



Massachusetts Department of Environmental Protection

## **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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**Massachusetts Department of Environmental Protection**  
**Bureau of Air and Waste**

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

2019  
YEAR OF RECORD  
1190564  
FACILITY AQ Identifier

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.**

1. Select existing or new facility :

☒ Existing Facility:Check to create a complete package for reporting ☐ Check if you added emission units or stacks since your year 2019 last report.

☐ New Facility:Check if you have never before submitted an AQ Source Registration Package (SR) or (SR/GHG).

Date received (DEP use only - mm/dd/yyyy)

**B. Amend an AQ Source Registration Package (SR) or SR and Greenhouse Gas(SR/GHG) Package.**

☐ 1. Check if you need to correct or add to a previously submitted SR or SR/GHG Package **2019** ,check the boxes in the list below to select the forms/units you wish to work on.

2.Facility Name : CLEAN HARBORS OF BRAINTREE INC

Our records indicate that this facility has 23 Emission Units (points)

☒ Facility Information Form (general facility and contact)

☒ AP-TES Total Emissions Statement (facility-wide emissions; includes hazardous Air Pollutant (HAP) reporting).

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

**Massachusetts Department of Environmental  
Protection**

*Bureau of Air and Waste*

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

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



**Massachusetts Department of Environmental  
Protection**  
*Bureau of Air and Waste - Air Quality*

Facility Information

2019

Year of Record

1190564

Facility AQ identifier

## A. Facility Information:

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

CLEAN HARBORS OF BRAINTREE INC

a. Facility Name

1 HILL AVE

b. Facility Street Address Line 1

c. Facility Street Address Line 2

BRAINTREE

d. City/Town

MA

e. State

021840000

f. ZIP Code

7813807100

g. Facility Phone Number

7813807193

h. Facility Fax Number

2. Mailing address: (check all that apply)

☒ same address as facility address

1 HILL AVE

a. Facility Mailing Address / PO Box Line 1

b. Facility Mailing Address / PO Box Line 2

BRAINTREE

c. City/Town

MA

d. State

021840000

e. ZIP Code

3. Facility type - check one:

☐ Utility

☒ Private

☐ Tribal

☐ Federal

☐ State

☐ Local Government

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

ORIS Facility Code

5. ID Numbers:

34839

a. DEP Account Number / FMF Facility #

1190564

b. Facility AQ Identifier - SSEIS ID Number

6. Location :

42.235971

a. Latitude 42.9 - 41.2

70.972946

b. Longitude - West 73.5 - 69.8 Enter positive values only.

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

562211

a. (Primary)

b.

c.

d.

**Massachusetts Department of Environmental Protection**  
*Bureau of Air and Waste - Air Quality*

Facility Information

2019

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Facility AQ identifier

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

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

9. Facility's normal hours of operation:

12:00 AM

a. Start Time

12:00 AM

b. End Time

☒ c. Continuous - 24 X 7 X 52

d. Which days is the facility open?

☐ S

☐ M

☐ T

☐ W

☐ T

☐ F

☐ S

10. Number of Employees:

16

11. Facility Owner:

☐ same address as facility mailing address ( will copy address into fields below)

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

CLEAN HARBORS OF BRAINTREE INC

a. Owner or Corporation Name

1 HILL AVE

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

ATTN: GENERAL MANAGER

c. Mailing Address Line 2

BRAINTREE

d. City/Town

MA

e. State

021840000

f. Zip Code

US

g. Country

042507498

h. Owner TIN

7813807100

i. Owner Phone Number

7134

j. Extension

7813807193

k. Owner Fax Number

fontaine.andrew@cleanharbors.com

l. Owner E-mail Address

**Massachusetts Department of Environmental Protection**  
*Bureau of Air and Waste - Air Quality*

Facility Information

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Facility AQ identifier

12. Facility **contact** information:

☐ same address as facility address

☐ same address as facility mailing address

DAVID

a. Facility Contact **First Name**

MEDINA

Contact **Last Name**

1 HILL AVE

b. Mailing Address Line 1

c. Mailing Address Line 2

BRAINTREE

d. City/Town

MA

e. State

021840000

f. Zip Code

US

g. Country

medinad@cleanharbors.com

h. E-mail Address

7803807100

i. Phone Number

j. Extension

7813807193

k. Fax Number

13. **Air emissions information** contact:

☐ same name and address as facility contact name and address

☐ same address as facility address

JAMES R.

a. Air emissions contact **First Name**

LAUBSTED

Air emissions contact **Last Name**

26137 SOUTH RIDGELAND AVENUE

b. Mailing Address Line 1

c. Mailing Address Line 2

MONEE

d. City/Town

IL

e. State

604490000

f. Zip Code

US

g. Country

laubsted.j@cleanharbors.com

h. E-mail Address

6308542549

i. Phone Number

7134

j. Extension

7813807193

k. Fax Number

**Massachusetts Department of Environmental Protection**  
*Bureau of Air and Waste - Air Quality*

Facility Information

2019

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Facility AQ identifier

## B. Preparer

1. Contact information for the **preparer** of this submittal:

☐ same name and address as air emissions contact name and address

☐ same name and address as facility contact name and address

☐ same address as facility address

MICHAEL

a. Preparer **First** Name

COMEAU

Preparer **Last** Name

CLEAN HARBORS ENVIRONMENTAL SERVICES

b. Mailing Address Line 1

42 LONGWATER DRIVE

c. Mailing Address Line 2

NORWELL

d. City/Town

MA

e. State

020610000

f. Zip Code

US

g. Country

comeau.michaeld@cleanharbors.com

h. E-mail Address

7817925174

i. Phone Number

j. Extension

7817921030

k. Fax Number

**Massachusetts Department of Environmental Protection**  
*Bureau of Air and Waste - Air Quality*

Facility Information

2019

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## C. Notes

1. **Notes:** please include in the space below any additional information that will help DEP understand your submission (5000 character max).

## D. Certification

"I certify that I have personally examined the foregoing and am 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 penalties for submitting false information, including possible fines and imprisonment."

A responsible official for the facility must provide the electronic signature. **The signature and date are inserted below by eDEP during the signature Step.**

Signed under the pains and penalties of perjury:

Signature of Responsible Official

Date

Responsible official - complete all fields below.

MICHAEL

a. **First Name**

COMEAU

b. **Last Name**

COMPLIANCE MANAGER

c. **Title**

7817925174

d. **Phone Number**

comeau.michaeld@cleanharbors.com

e. **E-mail Address**



**Massachusetts Department of Environmental Protection**  
*Bureau of Air and Waste - Air Quality*

Facility Information

2019

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Facility AQ identifier

**TES - Transaction #1210786**

Print

Exit


**Massachusetts Department of Environmental Protection**  
*Bureau of Air and Waste*
**BWP AQ AP - TES**

Total Emissions Statement &amp; 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

## b. DEP Account Number

1190564

## 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 year:	.0246 Tons	.0157 Tons	 Tons	.2466 Tons
Actual for year of record:	0.0415 Tons	0.0270 Tons	0 Tons	0.3982 Tons
Potential emissions	9.4880 Tons	9.3526 Tons	0 Tons	11.9580 Tons
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:	PB	VOC	NH3	CO
Actual for previous year:	 Tons	.0171 Tons	0 Tons	.0986 Tons
Actual for year of record:	0 Tons	0.0296 Tons	0 Tons	0.1642 Tons
Potential emissions	0 Tons	22.8354 Tons	0 Tons	29.3023 Tons
Max allowed emissions-annual:	 Tons	36.2 Tons	 Tons	 Tons
Max allowed emissions-short term:	 Pounds	23600 Pounds	 Pounds	 Pounds
Short term Period	 	Month 	 	 

**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

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Facility AQ Identifier

Basis DEP Approval number or regulation:		MBR-95-RES-047		
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Pollutant:	NO2	HOC
Actual for previous year:	.4676 Tons	 Tons
Actual for year of record:	0.7777 Tons	0 Tons
Potential emissions	136.2320 Tons	0 Tons
Max allowed emissions-annual:	17.3 Tons	 Tons
Max allowed emissions-short term:	9400 Pounds	 Pounds
Short term Period	Month	
Basis DEP Approval number or regulation:	MBR-95-RES-047	

3.If you have **facility-wide** fuel, raw material, or product restrictions, either by plan approval or regulation complete the following for each

a.      
DEP approval # (most recent) Amount of Restriction Restriction Units Per Unit Time

Description of fuel, raw material or product restricted

b.      
DEP approval # (most recent) Amount of Restriction Restriction Units Per Unit Time

Description of fuel, raw material or product restricted

c.      
DEP approval # (most recent) Amount of Restriction Restriction Units Per Unit Time

Description of fuel, raw material or product restricted

**B. Hazardous Air Pollutant Emissions**

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

☐ Yes ☒ 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)?

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Bureau of Air and Waste

BWP AQ AP - TES

Total Emissions Statement & Hazardous Air Pollutant List

2019

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1190564

Facility AQ Identifier

☐ Yes ☒ No

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

☐ Yes ☒ No

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

☐ Yes ☒ No

C. Hazardous Air Pollutants (HAPs)

1. Hazardous Air Pollutant List

HAP

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

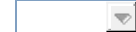
12.8

18.6

f. Potential Emissions

g. Max allowed 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

HAP

ETHYLENE GLYCOL



107211

a. HAP Name

b. CAS # for individual HAPs

☐ c. Check if this is your single largest HAP emission.

.109

0.052

d. Actual for previous year

e. Actual for year of record

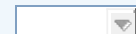
12.8

18.6

f. Potential Emissions

g. Max allowed emissions –  
annual(Tons)

5000



h. Max allowed emissions – short term(Pounds)

i. Short term period

MBR-95-RES-047

j. Basis DEP Approval number or regulation

HAP

**Massachusetts Department of Environmental Protection**  
*Bureau of Air and Waste*

**BWP AQ AP - TES**

Total Emissions Statement & Hazardous Air Pollutant List

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Facility AQ Identifier

METHYL ALCOHOL



67561

a. HAP Name

b. CAS # for individual HAPs

☒ c. Check if this is your single largest HAP emission.

.036

0.137

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



h. Max allowed emissions – short term(Pounds)

i. Short term period

MBR-95-RES-047

j. Basis DEP Approval number or regulation

**2. Total HAP Emissions**

a. Actual for previous year: Tons

.168

b. Actual for year of record: Tons

c. Potential at max capacity uncontrolled:  
Tons

38.4

d. Max allowed emissions – annual: Tons

55.8

Facility-wide restriction only

e. Max allowed emissions – short term :  
Pounds

10600

Facility-wide restriction only

f. Short term period:

Month

g. Basis for max allowed emissions:

MBR-95-RES-047

DEP approval # or regulation

**D. Notes and Attachments**

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

**2. Attachments:**

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

**Massachusetts Department of Environmental Protection**  
*Bureau of Air and Waste*

**BWP AQ AP - TES**

Total Emissions Statement & Hazardous Air Pollutant List

2019

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Facility AQ Identifier

**AP1 Sec A - Transaction #1210786**

Print

Exit



**Massachusetts Department of Environmental Protection**  
**Bureau of Air and Waste**  
**Fuel Burning Device**  
Emission Unit

2019

Year of Record

2

DEP EU#

1190564

Facility AQ Identifier

## A. Equipment Description

### 1. Facility Identifiers:

CLEAN HARBORS OF BRAintree INC

#### a. Facility Name

34839

#### b. DEP Account Number

1190564

#### c. Facility AQ Identifier

### 2. 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

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

2

#### 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:

11/17/2018

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

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

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

### 4. Emission Unit Replacement

#### a. Is this unit, replacing another emission unit?

☒ No ☐ Yes - Enter DEP's emissions unit number and name for the unit being replaced from the drop-down list below:

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

### 5. Equipment

#### a. Equipment Type

EPA Unit type code

BOILER

BOILER

If engine, is this an emergency generator?

☐ Yes

☐ No

If an emergency generator, please give the number of hours of operation during the reporting year for each category of operation:

Emergency Use(hours)

Massachusetts Department of Environmental Protection  
Bureau of Air and Waste

Fuel Burning Device

Emission Unit

2019

Year of Record

2

DEP EU#

1190564

Non Emergency Use(hours)

Maintenance and Readiness Testing(hours)

COLUMBIA

4VT-50BHP

b. Manufacturer

c. Model number

2.0910

1

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  
☐ hand fired  
☐ 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?

☒ 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):

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:

☐ Monthly

☐ Quarterly

☐ Semi-annual

☒ Annual

☒ RES

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

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

☒ NESHAP

☐ NSPS

☐ MACT

10. Hours of operation for the emission unit:

☐ a. check if continuously operated - 24 X 7 X 52

24

7

17



Massachusetts Department of Environmental Protection  
Bureau of Air and Waste

Fuel Burning Device

Emission Unit

2019

Year of Record

2

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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

Q1

Q2

Q3

Q4

Sum of Q1+Q2+Q3+Q4 must = 100%

or 0 if the unit was not operated for any quarter

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

0

0

0

a. Ozone season hours per day

b. Ozone season days per week

c. Weeks operated in ozone season

12. Emission Release Point - select one:

Engines click here for instructions:

Non-Stack Release Points:

- ☐ fugitive
- ☐ horizontal vent
- ☐ engine exhaust
- ☐ downward facing vent
- ☐ vertical stack/vent less than 10ft

Physical Stacks:

- ☒ vertical stack
- ☐ vertical with rain cap/sleeve

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?

☐ 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

a. Monitor type:

☐ CEMs

☐ CEMs

☐ CEMs

☐ opacity

☐ opacity

☐ opacity

☐ other

☐ other

☐ other

Describe

Describe

Describe

b. Manufacturer:

c. Model Number:

d. Monitor ID #:

Facility's Designation

Facility's Designation

Facility's Designation

Massachusetts Department of Environmental Protection  
Bureau of Air and Waste

Fuel Burning Device

Emission Unit

2019

Year of Record

2

DEP EU#

1190564

e. Installation Date:	<input type="text"/> (mm/dd/yyyy)	<input type="text"/> (mm/dd/yyyy)	<input type="text"/> (mm/dd/yyyy)
f. DEP Approval #:	<input type="text"/>	<input type="text"/>	<input type="text"/>
g. DEP Approval Date:	<input type="text"/> (mm/dd/yyyy)	<input type="text"/> (mm/dd/yyyy)	<input type="text"/> (mm/dd/yyyy)
h. Decommission Date:	<input type="text"/> (mm/dd/yyyy)	<input type="text"/> (mm/dd/yyyy)	<input type="text"/> (mm/dd/yyyy)
i. Recorder?	<input type="radio"/> yes <input type="radio"/> no	<input type="radio"/> yes <input type="radio"/> no	<input type="radio"/> yes <input type="radio"/> no
j. Audible Alarm?	<input type="radio"/> yes <input type="radio"/> no	<input type="radio"/> yes <input type="radio"/> no	<input type="radio"/> yes <input type="radio"/> no
k. Data System?	<input type="radio"/> yes <input type="radio"/> no	<input type="radio"/> yes <input type="radio"/> no	<input type="radio"/> yes <input type="radio"/> no
l. Monitored Pollutants - check all that apply:	<input type="checkbox"/> PM 10 <input type="checkbox"/> PM 2.5 <input type="checkbox"/> SO2 <input type="checkbox"/> CO <input type="checkbox"/> VOC <input type="checkbox"/> NO2 <input type="checkbox"/> NH3 <input type="checkbox"/> Mercury <input type="checkbox"/> Oxygen <input type="checkbox"/> CO2 <input type="checkbox"/> H2S <input type="checkbox"/> HCL <input type="checkbox"/> Opacity <input type="checkbox"/> Other <input type="text"/>	<input type="checkbox"/> PM 10 <input type="checkbox"/> PM 2.5 <input type="checkbox"/> SO2 <input type="checkbox"/> CO <input type="checkbox"/> VOC <input type="checkbox"/> NO2 <input type="checkbox"/> NH3 <input type="checkbox"/> Mercury <input type="checkbox"/> Oxygen <input type="checkbox"/> CO2 <input type="checkbox"/> H2S <input type="checkbox"/> HCL <input type="checkbox"/> Opacity <input type="checkbox"/> Other <input type="text"/>	<input type="checkbox"/> PM 10 <input type="checkbox"/> PM 2.5 <input type="checkbox"/> SO2 <input type="checkbox"/> CO <input type="checkbox"/> VOC <input type="checkbox"/> NO2 <input type="checkbox"/> NH3 <input type="checkbox"/> Mercury <input type="checkbox"/> Oxygen <input type="checkbox"/> CO2 <input type="checkbox"/> H2S <input type="checkbox"/> HCL <input type="checkbox"/> Opacity <input type="checkbox"/> Other <input type="text"/>
	Describe	Describe	Describe

B. Fuels and Emissions

1. Fuel Name / Characteristics:

BOILER #2-COLUMBIA #30 - #2 OIL-0.3 SULFUR

Fuel Name

1

DEP Fuel #

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

Number of Additional Fuels :

☐ Delete this fuel: check box if you stopped using this fuel in this unit permanently. You must still report for this year of record even if amount is "0" – the fuel will be removed from the unit in the next report cycle.

a. Source Classification Code (SCC):

10200501

SCC ( call DEP if SCC will not validate)

EXTERNAL COMBUSTION BOILERS - INDUSTRIAL - DISTILLATE OIL - GRADES 1 AND 2 - BOILER

Massachusetts Department of Environmental Protection  
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Emission Unit

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2

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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 decommissioned prior to this year of record):

0.0155

1000 GALLONS

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

☒

☐

☐

☐

month week day hour

2. 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 of record)

a. Amount - year of record

b. Units

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:	<input type="checkbox"/> PM10-FIL	<input type="checkbox"/> PM25-FIL	<input type="checkbox"/> PM-CON	<input type="checkbox"/> SO2
Actual for previous year:	0.0010 Tons	0.0003 Tons	 Tons	0.0199 Tons
Actual for year of record:	0.0129 Tons	0.0032 Tons	 Tons	0.2528 Tons
Potential emissions	0.0679 Tons	0.0170 Tons	 Tons	1.3304 Tons
Emission Factor	1 in pounds per unit	0.25 in pounds per unit	 in pounds per unit	142 in pounds per unit
Calculation Method	USEPA Emission Factor ( <input type="button" value="?"/> )	USEPA Emission Factor ( <input type="button" value="?"/> )	USEPA Emission Factor ( <input type="button" value="?"/> )	USEPA Emission Factor ( <input type="button" value="?"/> )
Max allowed				

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emissions-annual:	Tons	Tons	Tons	Tons
Max allowed				
emissions-short term:	Pounds	Pounds	Pounds	Pounds
Short term Period				
Basis DEP Approval number or regulation:				

<b>Pollutant:</b>	<input type="checkbox"/> PB	<input type="checkbox"/> VOC	<input type="checkbox"/> NH3	<input type="checkbox"/> CO
Actual for previous year:		0.0002		0.0051
	Tons	Tons	Tons	Tons
Actual for year of record:		0.0026		0.0645
	Tons	Tons	Tons	Tons
Potential emissions		0.0136		0.3395
	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	Pounds	Pounds	Pounds
Short term Period				
Basis DEP Approval number or regulation:				

<b>Pollutant:</b>	<input type="checkbox"/> NO2	specify other pollutant
Actual for previous year:	0.0244	
	Tons	Tons
Actual for year of record:	0.3096	
	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 term:		
	Pounds	Pounds
Short term Period		
Basis DEP Approval		

Massachusetts Department of Environmental Protection  
*Bureau of Air and Waste*

**Fuel Burning Device**

Emission Unit

2019

Year of Record

2

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1190564

number or regulation:

4. 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 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.

## AP1 Sec A - Transaction #1210786

Print

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**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

**A. Equipment Description**

## 1. Facility Identifiers:

CLEAN HARBORS OF BRAINTREE INC

a. Facility Name

34839

b. DEP Account Number

1190564

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

3

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

3

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:

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 replaced since the last report.

## 4. Emission Unit Replacement

a. Is this unit, replacing another emission unit?

☒ No ☐ Yes - Enter DEP's emissions unit number and name for the unit being replaced from the drop-down list below:

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

## 5. Equipment

a. Equipment Type

EPA Unit type code

BOILER

BOILER

If engine, is this an emergency generator?

☐ Yes☐ No

If an emergency generator, please give the number of hours of operation during the reporting year for each category of operation:

Emergency Use(hours)

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Non Emergency Use(hours)

Maintenance and Readiness Testing(hours)

CLEAVER BROOKS

CB800-150

b. Manufacturer

c. Model number

2.80

1

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  
☐ hand fired  
☐ 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

a. Most recent approval number

09/11/1986

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

7. Is this unit exempt under 310 CMR 7.02 Plan Approvals?

☐ 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:

☐ Monthly

☐ Quarterly

☐ Semi-annual

☒ Annual

☒ RES

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

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

☒ NESHAP

☐ NSPS

☐ MACT

10. Hours of operation for the emission unit:

☐ a. check if continuously operated - 24 X 7 X 52

24

5

15

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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

Q1

Q2

Q3

Q4

Sum of Q1+Q2+Q3+Q4 must = 100%

or 0 if the unit was not operated for any quarter

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

0

a. Ozone season hours per day

0

b. Ozone season days per week

0

c. Weeks operated in ozone season

12. Emission Release Point - select one:

Engines click here for instructions:

Non-Stack Release Points:

- ☐ fugitive
- ☐ horizontal vent
- ☐ engine exhaust
- ☐ downward facing vent
- ☐ vertical stack/vent less than 10ft

Physical Stacks:

- ☒ vertical stack
- ☐ vertical with rain cap/sleeve

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?

☐ 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

a. Monitor type:

☐ CEMs

☐ CEMs

☐ CEMs

☐ opacity

☐ opacity

☐ opacity

☐ other

☐ other

☐ other

Describe

Describe

Describe

b. Manufacturer:

c. Model Number:

d. Monitor ID #:

Facility's Designation

Facility's Designation

Facility's Designation



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e. Installation Date:	<input type="text"/> (mm/dd/yyyy)	<input type="text"/> (mm/dd/yyyy)	<input type="text"/> (mm/dd/yyyy)
f. DEP Approval #:	<input type="text"/>	<input type="text"/>	<input type="text"/>
g. DEP Approval Date:	<input type="text"/> (mm/dd/yyyy)	<input type="text"/> (mm/dd/yyyy)	<input type="text"/> (mm/dd/yyyy)
h. Decommission Date:	<input type="text"/> (mm/dd/yyyy)	<input type="text"/> (mm/dd/yyyy)	<input type="text"/> (mm/dd/yyyy)
i. Recorder?	<input type="radio"/> yes <input type="radio"/> no	<input type="radio"/> yes <input type="radio"/> no	<input type="radio"/> yes <input type="radio"/> no
j. Audible Alarm?	<input type="radio"/> yes <input type="radio"/> no	<input type="radio"/> yes <input type="radio"/> no	<input type="radio"/> yes <input type="radio"/> no
k. Data System?	<input type="radio"/> yes <input type="radio"/> no	<input type="radio"/> yes <input type="radio"/> no	<input type="radio"/> yes <input type="radio"/> no
l. Monitored Pollutants - check all that apply:	<input type="checkbox"/> PM 10 <input type="checkbox"/> PM 2.5 <input type="checkbox"/> SO2 <input type="checkbox"/> CO <input type="checkbox"/> VOC <input type="checkbox"/> NO2 <input type="checkbox"/> NH3 <input type="checkbox"/> Mercury <input type="checkbox"/> Oxygen <input type="checkbox"/> CO2 <input type="checkbox"/> H2S <input type="checkbox"/> HCL <input type="checkbox"/> Opacity <input type="checkbox"/> Other <input type="text"/>	<input type="checkbox"/> PM 10 <input type="checkbox"/> PM 2.5 <input type="checkbox"/> SO2 <input type="checkbox"/> CO <input type="checkbox"/> VOC <input type="checkbox"/> NO2 <input type="checkbox"/> NH3 <input type="checkbox"/> Mercury <input type="checkbox"/> Oxygen <input type="checkbox"/> CO2 <input type="checkbox"/> H2S <input type="checkbox"/> HCL <input type="checkbox"/> Opacity <input type="checkbox"/> Other <input type="text"/>	<input type="checkbox"/> PM 10 <input type="checkbox"/> PM 2.5 <input type="checkbox"/> SO2 <input type="checkbox"/> CO <input type="checkbox"/> VOC <input type="checkbox"/> NO2 <input type="checkbox"/> NH3 <input type="checkbox"/> Mercury <input type="checkbox"/> Oxygen <input type="checkbox"/> CO2 <input type="checkbox"/> H2S <input type="checkbox"/> HCL <input type="checkbox"/> Opacity <input type="checkbox"/> Other <input type="text"/>
	Describe	Describe	Describe

B. Fuels and Emissions

1. Fuel Name / Characteristics:

BOILER #1-CLEAVER BROOKS #2 OIL-0.3 PERCENT SULFU

Fuel Name

1

DEP Fuel #

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

Number of Additional Fuels :

☐ Delete this fuel: check box if you stopped using this fuel in this unit permanently. You must still report for this year of record even if amount is "0" – the fuel will be removed from the unit in the next report cycle.

a. Source Classification Code (SCC):

10200501

SCC ( call DEP if SCC will not validate)

EXTERNAL COMBUSTION BOILERS - INDUSTRIAL - DISTILLATE OIL - GRADES 1 AND 2 - BOILER

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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 decommissioned prior to this year of record):

0.02

1000 GALLONS

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:

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

☒

☐

☐

☐

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 of record)

a. Amount - year of record

b. Units

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:	<input type="checkbox"/> PM10-FIL	<input type="checkbox"/> PM25-FIL	<input type="checkbox"/> PM-CON	<input type="checkbox"/> SO2
Actual for previous year:	0.0108 Tons	0.0027 Tons	 Tons	0.2120 Tons
Actual for year of record:	0.0062 Tons	0.0016 Tons	 Tons	0.1215 Tons
Potential emissions	0.0876 Tons	0.0219 Tons	 Tons	1.7166 Tons
Emission Factor	1	0.25		142
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				

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Bureau of Air and Waste

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emissions-annual:	Tons	Tons	Tons	Tons
Max allowed				
emissions-short term:	Pounds	Pounds	Pounds	Pounds
Short term Period				
Basis DEP Approval number or regulation:				

<b>Pollutant:</b>	<input type="checkbox"/> PB	<input type="checkbox"/> VOC	<input type="checkbox"/> NH3	<input type="checkbox"/> CO
Actual for previous year:		0.0022		0.0541
	Tons	Tons	Tons	Tons
Actual for year of record:		0.0012		0.0310
	Tons	Tons	Tons	Tons
Potential emissions		0.0175		0.4380
	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	Pounds	Pounds	Pounds
Short term Period				
Basis DEP Approval number or regulation:				

<b>Pollutant:</b>	<input type="checkbox"/> NO2	specify other pollutant
Actual for previous year:	0.2597	
	Tons	Tons
Actual for year of record:	0.1488	
	Tons	Tons
Potential emissions	2.1024	
	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 term:		
	Pounds	Pounds
Short term Period		
Basis DEP Approval		

Massachusetts Department of Environmental Protection  
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number or regulation:

4. 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 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.

**AP1 Sec A - Transaction #1210786**

Print

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

## A. Equipment Description

### 1. Facility Identifiers:

CLEAN HARBORS OF BRAINTREE INC

a. Facility Name

34839

b. DEP Account Number

1190564

c. Facility AQ Identifier

### 2. Emission Unit Identifiers:

CUMMINS GENERATOR #2 (NT855G2, DIESEL)

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

50

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

50

c. DEP 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 replaced since the last report.

### 4. Emission Unit Replacement

a. Is this unit, replacing another emission unit?

☒ No ☐ Yes - Enter DEP's emissions unit number and name for the unit being replaced from the drop-down list below:

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

### 5. Equipment

a. Equipment Type

EPA Unit type code

RECIPROCATING IC ENGINE

ENGINE

If engine, is this an emergency generator?

☐ Yes ☒ No

If an emergency generator, please give the number of hours of operation during the reporting year for each category of operation:

Emergency Use(hours)

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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  
☐ hand fired  
☐ 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:

EXEMPT

a. Most recent approval number

05/04/1989

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

7. Is this unit exempt under 310 CMR 7.02 Plan Approvals?

☒ 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):

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:

☐ Monthly

☐ Quarterly

☐ Semi-annual

☒ Annual

☒ RES

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

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

☐ NESHAP

☐ NSPS

☐ MACT

10. Hours of operation for the emission unit:

☐ a. check if continuously operated - 24 X 7 X 52

1

1

12

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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

Q1

Q2

Q3

Q4

Sum of Q1+Q2+Q3+Q4 must = 100%

or 0 if the unit was not operated for any quarter

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

3

1

5

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:

- ☐ fugitive
- ☐ horizontal vent
- ☐ engine exhaust
- ☐ downward facing vent
- ☐ vertical stack/vent less than 10ft

Physical Stacks:

- ☒ vertical stack
- ☐ vertical with rain cap/sleeve

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?

☐ 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

a. Monitor type:

- ☐ CEMs
- ☐ opacity
- ☐ other

- ☐ CEMs
- ☐ opacity
- ☐ other

- ☐ CEMs
- ☐ opacity
- ☐ other

Describe

Describe

Describe

b. Manufacturer:

c. Model Number:

d. Monitor ID #:

Facility's Designation

Facility's Designation

Facility's Designation

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e. Installation Date:	<input type="text"/> (mm/dd/yyyy)	<input type="text"/> (mm/dd/yyyy)	<input type="text"/> (mm/dd/yyyy)
f. DEP Approval #:	<input type="text"/>	<input type="text"/>	<input type="text"/>
g. DEP Approval Date:	<input type="text"/> (mm/dd/yyyy)	<input type="text"/> (mm/dd/yyyy)	<input type="text"/> (mm/dd/yyyy)
h. Decommission Date:	<input type="text"/> (mm/dd/yyyy)	<input type="text"/> (mm/dd/yyyy)	<input type="text"/> (mm/dd/yyyy)
i. Recorder?	<input type="radio"/> yes <input type="radio"/> no	<input type="radio"/> yes <input type="radio"/> no	<input type="radio"/> yes <input type="radio"/> no
j. Audible Alarm?	<input type="radio"/> yes <input type="radio"/> no	<input type="radio"/> yes <input type="radio"/> no	<input type="radio"/> yes <input type="radio"/> no
k. Data System?	<input type="radio"/> yes <input type="radio"/> no	<input type="radio"/> yes <input type="radio"/> no	<input type="radio"/> yes <input type="radio"/> no
l. Monitored Pollutants - check all that apply:	<input type="checkbox"/> PM 10 <input type="checkbox"/> PM 2.5 <input type="checkbox"/> SO2 <input type="checkbox"/> CO <input type="checkbox"/> VOC <input type="checkbox"/> NO2 <input type="checkbox"/> NH3 <input type="checkbox"/> Mercury <input type="checkbox"/> Oxygen <input type="checkbox"/> CO2 <input type="checkbox"/> H2S <input type="checkbox"/> HCL <input type="checkbox"/> Opacity <input type="checkbox"/> Other <input type="text"/>	<input type="checkbox"/> PM 10 <input type="checkbox"/> PM 2.5 <input type="checkbox"/> SO2 <input type="checkbox"/> CO <input type="checkbox"/> VOC <input type="checkbox"/> NO2 <input type="checkbox"/> NH3 <input type="checkbox"/> Mercury <input type="checkbox"/> Oxygen <input type="checkbox"/> CO2 <input type="checkbox"/> H2S <input type="checkbox"/> HCL <input type="checkbox"/> Opacity <input type="checkbox"/> Other <input type="text"/>	<input type="checkbox"/> PM 10 <input type="checkbox"/> PM 2.5 <input type="checkbox"/> SO2 <input type="checkbox"/> CO <input type="checkbox"/> VOC <input type="checkbox"/> NO2 <input type="checkbox"/> NH3 <input type="checkbox"/> Mercury <input type="checkbox"/> Oxygen <input type="checkbox"/> CO2 <input type="checkbox"/> H2S <input type="checkbox"/> HCL <input type="checkbox"/> Opacity <input type="checkbox"/> Other <input type="text"/>
	Describe	Describe	Describe

B. Fuels and Emissions

1. Fuel Name / Characteristics:

GENERATOR #2-CUMMINS #NT855G2- #2 OIL 0.3 PER.S

Fuel Name

1

DEP Fuel #

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

Number of Additional Fuels :

☐ Delete this fuel: check box if you stopped using this fuel in this unit permanently. You must still report for this year of record even if amount is "0" – the fuel will be removed from the unit in the next report cycle.

a. Source Classification Code (SCC):

20200102

SCC ( call DEP if SCC will not validate)

INTERNAL COMBUSTION ENGINES - INDUSTRIAL - DISTILLATE OIL (DIESEL) - RECIPROCATING



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SCC Description - filled by eDEP upon error check.

DIESEL

Fuel Description - filled by eDEP upon error check.

b. Type of fuel

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

.138

Percent by weight

d. Ash content for oils and coal(0- 10.0%):

0

Percent by weight

e. Maximum hourly fuel rate for all firing burners:(enter "0"if unit decommissioned prior to this year of record):

0.0120

1000 GALLONS

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 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

☐ 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 record)

a. Amount - year of record

b. Units

.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:	<input type="checkbox"/> PM10-FIL	<input type="checkbox"/> PM25-FIL	<input type="checkbox"/> PM-CON	<input type="checkbox"/> SO2
Actual for previous year:	0.0030 Tons	0.0030 Tons	 Tons	0.0028 Tons
Actual for year of record:	0.0028 Tons	0.0028 Tons	 Tons	0.0026 Tons
Potential emissions	2.2338 Tons	2.2338 Tons	 Tons	2.0866 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				

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emissions-annual:	Tons	Tons	Tons	Tons
Max allowed				
emissions-short term:	Pounds	Pounds	Pounds	Pounds
Short term Period				
Basis DEP Approval number or regulation:				

<b>Pollutant:</b>	<input type="checkbox"/> PB	<input type="checkbox"/> VOC	<input type="checkbox"/> NH3	<input type="checkbox"/> CO
Actual for previous year:		0.0035		0.0091
	Tons	Tons	Tons	Tons
Actual for year of record:		0.0033		0.0086
	Tons	Tons	Tons	Tons
Potential emissions		2.5912		6.8328
	Tons	Tons	Tons	Tons
Emission Factor		49.30		130
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:				

<b>Pollutant:</b>	<input type="checkbox"/> NO2	specify other pollutant
Actual for previous year:	0.0423	
	Tons	Tons
Actual for year of record:	0.0399	
	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 term:		
	Pounds	Pounds
Short term Period		
Basis DEP Approval		

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number or regulation:

4. 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 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.

**AP1 Sec A - Transaction #1210786**

Print

Exit



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**Fuel Burning Device**  
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Facility AQ Identifier

## A. Equipment Description

### 1. Facility Identifiers:

CLEAN HARBORS OF BRAINTREE INC

a. Facility Name

34839

b. DEP Account Number

1190564

c. Facility AQ Identifier

### 2. Emission Unit Identifiers:

CATERPILLAR GENERATOR #1

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

55

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

55

c. DEP 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:

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 replaced since the last report.

### 4. Emission Unit Replacement

a. Is this unit, replacing another emission unit?

☒ No ☐ Yes - Enter DEP's emissions unit number and name for the unit being replaced from the drop-down list below:

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

### 5. Equipment

a. Equipment Type

EPA Unit type code

RECIPROCATING IC ENGINE

ENGINE

If engine, is this an emergency generator?

☐ Yes ☒ No

If an emergency generator, please give the number of hours of operation during the reporting year for each category of operation:

Emergency Use(hours)

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Non Emergency Use(hours)

Maintenance and Readiness Testing(hours)

CATERPILLAR

3412DIT

b. Manufacturer

c. Model number

5.3480

1

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  
☐ hand fired  
☐ 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

a. Most recent approval number

05/04/1989

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

7. Is this unit exempt under 310 CMR 7.02 Plan Approvals?

☐ 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:

☐ Monthly

☐ Quarterly

☐ Semi-annual

☒ Annual

☒ RES

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

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

☐ NESHAP

☐ NSPS

☐ MACT

10. Hours of operation for the emission unit:

☐ a. check if continuously operated - 24 X 7 X 52

1

1

11

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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

Q1

Q2

Q3

Q4

Sum of Q1+Q2+Q3+Q4 must = 100%

or 0 if the unit was not operated for any quarter

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

3 1 6

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:

- ☐ fugitive  
☐ horizontal vent  
☐ engine exhaust  
☐ downward facing vent  
☐ vertical stack/vent less than 10ft

Physical Stacks:

- ☒ vertical stack  
☐ vertical with rain cap/sleeve

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?

☐ 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

a. Monitor type:

- ☐ CEMs  
☐ opacity  
☐ other

- ☐ CEMs  
☐ opacity  
☐ other

- ☐ CEMs  
☐ opacity  
☐ other

Describe

Describe

Describe

b. Manufacturer:

c. Model Number:

d. Monitor ID #:

Facility's Designation

Facility's Designation

Facility's Designation

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e. Installation Date:	<input type="text"/> (mm/dd/yyyy)	<input type="text"/> (mm/dd/yyyy)	<input type="text"/> (mm/dd/yyyy)
f. DEP Approval #:	<input type="text"/>	<input type="text"/>	<input type="text"/>
g. DEP Approval Date:	<input type="text"/> (mm/dd/yyyy)	<input type="text"/> (mm/dd/yyyy)	<input type="text"/> (mm/dd/yyyy)
h. Decommission Date:	<input type="text"/> (mm/dd/yyyy)	<input type="text"/> (mm/dd/yyyy)	<input type="text"/> (mm/dd/yyyy)
i. Recorder?	<input type="radio"/> yes <input type="radio"/> no	<input type="radio"/> yes <input type="radio"/> no	<input type="radio"/> yes <input type="radio"/> no
j. Audible Alarm?	<input type="radio"/> yes <input type="radio"/> no	<input type="radio"/> yes <input type="radio"/> no	<input type="radio"/> yes <input type="radio"/> no
k. Data System?	<input type="radio"/> yes <input type="radio"/> no	<input type="radio"/> yes <input type="radio"/> no	<input type="radio"/> yes <input type="radio"/> no
l. Monitored Pollutants - check all that apply:	<input type="checkbox"/> PM 10 <input type="checkbox"/> PM 2.5 <input type="checkbox"/> SO2 <input type="checkbox"/> CO <input type="checkbox"/> VOC <input type="checkbox"/> NO2 <input type="checkbox"/> NH3 <input type="checkbox"/> Mercury <input type="checkbox"/> Oxygen <input type="checkbox"/> CO2 <input type="checkbox"/> H2S <input type="checkbox"/> HCL <input type="checkbox"/> Opacity <input type="checkbox"/> Other <input type="text"/>	<input type="checkbox"/> PM 10 <input type="checkbox"/> PM 2.5 <input type="checkbox"/> SO2 <input type="checkbox"/> CO <input type="checkbox"/> VOC <input type="checkbox"/> NO2 <input type="checkbox"/> NH3 <input type="checkbox"/> Mercury <input type="checkbox"/> Oxygen <input type="checkbox"/> CO2 <input type="checkbox"/> H2S <input type="checkbox"/> HCL <input type="checkbox"/> Opacity <input type="checkbox"/> Other <input type="text"/>	<input type="checkbox"/> PM 10 <input type="checkbox"/> PM 2.5 <input type="checkbox"/> SO2 <input type="checkbox"/> CO <input type="checkbox"/> VOC <input type="checkbox"/> NO2 <input type="checkbox"/> NH3 <input type="checkbox"/> Mercury <input type="checkbox"/> Oxygen <input type="checkbox"/> CO2 <input type="checkbox"/> H2S <input type="checkbox"/> HCL <input type="checkbox"/> Opacity <input type="checkbox"/> Other <input type="text"/>
	Describe	Describe	Describe

B. Fuels and Emissions

1. Fuel Name / Characteristics:

GENERATOR #1-CATERPILLAR 558.5 KW #2 OIL-0.3 S

Fuel Name

1

DEP Fuel #

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

Number of Additional Fuels :

☐ Delete this fuel: check box if you stopped using this fuel in this unit permanently. You must still report for this year of record even if amount is "0" – the fuel will be removed from the unit in the next report cycle.

a. Source Classification Code (SCC):

20200102

SCC ( call DEP if SCC will not validate)

INTERNAL COMBUSTION ENGINES - INDUSTRIAL - DISTILLATE OIL (DIESEL) - RECIPROCATING

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SCC Description - filled by eDEP upon error check.

DIESEL

Fuel Description - filled by eDEP upon error check.

b. Type of fuel

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

.0401

Percent by weight

d. Ash content for oils and coal(0- 10.0%):

0

Percent by weight

e. Maximum hourly fuel rate for all firing burners:(enter "0"if unit decommissioned prior to this year of record):

0.0380

1000 GALLONS

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:

MBR-89-COM-31

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

☐ 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 record)

a. Amount - year of record

b. Units

.456

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:	<input type="checkbox"/> PM10-FIL	<input type="checkbox"/> PM25-FIL	<input type="checkbox"/> PM-CON	<input type="checkbox"/> SO2
Actual for previous year:	0.0097 Tons	0.0097 Tons	 Tons	0.0091 Tons
Actual for year of record:	0.0194 Tons	0.0194 Tons	 Tons	0.0181 Tons
Potential emissions	7.0737 Tons	7.0737 Tons	 Tons	6.6077 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				



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emissions-annual:	Tons	Tons	Tons	Tons
Max allowed				
emissions-short term:	Pounds	Pounds	Pounds	Pounds
Short term Period				
Basis DEP Approval number or regulation:				

<b>Pollutant:</b>	<input type="checkbox"/> PB	<input type="checkbox"/> VOC	<input type="checkbox"/> NH3	<input type="checkbox"/> CO
Actual for previous year:		0.0112		0.0296
	Tons	Tons	Tons	Tons
Actual for year of record:		0.0225		0.0593
	Tons	Tons	Tons	Tons
Potential emissions		8.2055		21.6372
	Tons	Tons	Tons	Tons
Emission Factor		49.30		130
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:				

<b>Pollutant:</b>	<input type="checkbox"/> NO2	specify other pollutant
Actual for previous year:	0.1377	
	Tons	Tons
Actual for year of record:	0.2754	
	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 term:		
	Pounds	Pounds
Short term Period		
Basis DEP Approval		

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number or regulation:

4. Ozone season emissions - May 1 through September 30

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 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.

**AP1 Sec A - Transaction #1210786**

Print

Exit



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**Fuel Burning Device**  
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DEP EU#

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Facility AQ Identifier

## A. Equipment Description

### 1. Facility Identifiers:

CLEAN HARBORS OF BRAINTREE INC

a. Facility Name

34839

b. DEP Account Number

1190564

c. Facility AQ Identifier

### 2. Emission Unit Identifiers:

2 LENNOX FURNACES SR 20Q5-140/154

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

64

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

64

c. DEP 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:

06/01/1994

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

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

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

### 4. Emission Unit Replacement

a. Is this unit, replacing another emission unit?

☒ No ☐ Yes - Enter DEP's emissions unit number and name for the unit being replaced from the drop-down list below:

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

### 5. Equipment

a. Equipment Type

EPA Unit type code

FURNACE

FURNACE

If engine, is this an emergency generator?

☐ Yes

☐ No

If an emergency generator, please give the number of hours of operation during the reporting year for each category of operation:

Emergency Use(hours)

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Non Emergency Use(hours)

Maintenance and Readiness Testing(hours)

LENNOX

SR20Q5-140

b. Manufacturer

c. Model number

0.3070

1

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  
☐ hand fired  
☐ 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?

☒ 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):

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:

☐ Monthly

☐ Quarterly

☐ Semi-annual

☒ Annual

☒ RES

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

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

☐ NESHAP

☐ NSPS

☐ MACT

10. Hours of operation for the emission unit:

☐ a. check if continuously operated - 24 X 7 X 52

0

0

0

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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

Q1

Q2

Q3

Q4

Sum of Q1+Q2+Q3+Q4 must = 100%

or 0 if the unit was not operated for any quarter

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

0

a. Ozone season hours per day

0

b. Ozone season days per week

0

c. Weeks operated in ozone season

12. Emission Release Point - select one:

Engines click here for instructions:

Non-Stack Release Points:

- ☐ fugitive
- ☐ horizontal vent
- ☐ engine exhaust
- ☐ downward facing vent
- ☐ vertical stack/vent less than 10ft

Physical Stacks:

- ☒ vertical stack
- ☐ vertical with rain cap/sleeve

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?

☐ 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

a. Monitor type:

- ☐ CEMs
- ☐ opacity
- ☐ other

- ☐ CEMs
- ☐ opacity
- ☐ other

- ☐ CEMs
- ☐ opacity
- ☐ other

Describe

Describe

Describe

b. Manufacturer:

c. Model Number:

d. Monitor ID #:

Facility's Designation

Facility's Designation

Facility's Designation

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e. Installation Date:	<input type="text"/> (mm/dd/yyyy)	<input type="text"/> (mm/dd/yyyy)	<input type="text"/> (mm/dd/yyyy)
f. DEP Approval #:	<input type="text"/>	<input type="text"/>	<input type="text"/>
g. DEP Approval Date:	<input type="text"/> (mm/dd/yyyy)	<input type="text"/> (mm/dd/yyyy)	<input type="text"/> (mm/dd/yyyy)
h. Decommission Date:	<input type="text"/> (mm/dd/yyyy)	<input type="text"/> (mm/dd/yyyy)	<input type="text"/> (mm/dd/yyyy)
i. Recorder?	<input type="radio"/> yes <input type="radio"/> no	<input type="radio"/> yes <input type="radio"/> no	<input type="radio"/> yes <input type="radio"/> no
j. Audible Alarm?	<input type="radio"/> yes <input type="radio"/> no	<input type="radio"/> yes <input type="radio"/> no	<input type="radio"/> yes <input type="radio"/> no
k. Data System?	<input type="radio"/> yes <input type="radio"/> no	<input type="radio"/> yes <input type="radio"/> no	<input type="radio"/> yes <input type="radio"/> no
l. Monitored Pollutants - check all that apply:	<input type="checkbox"/> PM 10 <input type="checkbox"/> PM 2.5 <input type="checkbox"/> SO2 <input type="checkbox"/> CO <input type="checkbox"/> VOC <input type="checkbox"/> NO2 <input type="checkbox"/> NH3 <input type="checkbox"/> Mercury <input type="checkbox"/> Oxygen <input type="checkbox"/> CO2 <input type="checkbox"/> H2S <input type="checkbox"/> HCL <input type="checkbox"/> Opacity <input type="checkbox"/> Other <input type="text"/>	<input type="checkbox"/> PM 10 <input type="checkbox"/> PM 2.5 <input type="checkbox"/> SO2 <input type="checkbox"/> CO <input type="checkbox"/> VOC <input type="checkbox"/> NO2 <input type="checkbox"/> NH3 <input type="checkbox"/> Mercury <input type="checkbox"/> Oxygen <input type="checkbox"/> CO2 <input type="checkbox"/> H2S <input type="checkbox"/> HCL <input type="checkbox"/> Opacity <input type="checkbox"/> Other <input type="text"/>	<input type="checkbox"/> PM 10 <input type="checkbox"/> PM 2.5 <input type="checkbox"/> SO2 <input type="checkbox"/> CO <input type="checkbox"/> VOC <input type="checkbox"/> NO2 <input type="checkbox"/> NH3 <input type="checkbox"/> Mercury <input type="checkbox"/> Oxygen <input type="checkbox"/> CO2 <input type="checkbox"/> H2S <input type="checkbox"/> HCL <input type="checkbox"/> Opacity <input type="checkbox"/> Other <input type="text"/>
	Describe	Describe	Describe

B. Fuels and Emissions

1. Fuel Name / Characteristics:

FURNACES #1(2)-LENNOX SR 20Q5 #2 OIL-0.3 SULPHUR

Fuel Name

1

DEP Fuel #

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

Number of Additional Fuels :

☐ Delete this fuel: check box if you stopped using this fuel in this unit permanently. You must still report for this year of record even if amount is "0" – the fuel will be removed from the unit in the next report cycle.

a. Source Classification Code (SCC):

10500105

SCC ( call DEP if SCC will not validate)

EXTERNAL COMBUSTION - SPACE HEATERS - INDUSTRIAL -  
DISTILLATE OIL

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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 decommissioned prior to this year of record):

0.0022

1000 GALLONS

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)

19.2720

1000 GALLONS

Quantity

Units

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

0.0022

1000 GALLONS

Quantity

Units

Per

☐ 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 of record)

a. Amount - year of record

b. Units

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:	<input type="checkbox"/> PM10-FIL	<input type="checkbox"/> PM25-FIL	<input type="checkbox"/> PM-CON	<input type="checkbox"/> SO2
Actual for previous year:	<input type="text" value="0"/> Tons	<input type="text" value="0"/> Tons	<input type="text"/> Tons	<input type="text" value="0"/> Tons
Actual for year of record:	<input type="text" value="0"/> Tons	<input type="text" value="0"/> Tons	<input type="text"/> Tons	<input type="text" value="0"/> Tons
Potential emissions	<input type="text" value="0.0237"/> Tons	<input type="text" value="0.0059"/> Tons	<input type="text"/> Tons	<input type="text" value="0.1910"/> Tons
Emission Factor	<input type="text" value="2.46"/> in pounds per unit	<input type="text" value="0.6150"/> in pounds per unit	<input type="text"/> in pounds per unit	<input type="text" value="143.60"/> in pounds per unit
Calculation Method	<input type="text" value="USEPA Emission Factor ( )"/>	<input type="text" value="USEPA Emission Factor ( )"/>	<input type="text" value="USEPA Emission Factor ( )"/>	<input type="text" value="USEPA Emission Factor ( )"/>
Max allowed	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

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emissions-annual:	Tons	Tons	Tons	Tons
Max allowed				
emissions-short term:	Pounds	Pounds	Pounds	Pounds
Short term Period				
Basis DEP Approval number or regulation:				

<b>Pollutant:</b>	<input type="checkbox"/> PB	<input type="checkbox"/> VOC	<input type="checkbox"/> NH3	<input type="checkbox"/> CO
Actual for previous year:		0		0
	Tons	Tons	Tons	Tons
Actual for year of record:		0		0
	Tons	Tons	Tons	Tons
Potential emissions		0.0073		0.0482
	Tons	Tons	Tons	Tons
Emission Factor		0.76		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:				

<b>Pollutant:</b>	<input type="checkbox"/> NO2	specify other pollutant
Actual for previous year:	0	
	Tons	Tons
Actual for year of record:	0	
	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
Short term Period		
Basis DEP Approval		



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number or regulation:

4. 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 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.

THIS UNIT WAS NOT USED IN CALENDAR YEAR 2018

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.

## AP1 Sec A - Transaction #1210786

Print

Exit

**Massachusetts Department of Environmental Protection**  
*Bureau of Air and Waste***Fuel Burning Device**

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Facility AQ Identifier

**A. Equipment Description**

## 1. Facility Identifiers:

CLEAN HARBORS OF BRAINTREE INC

a. Facility Name

34839

b. DEP Account Number

1190564

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

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

67

c. DEP emission unit #

d. ORIS ID # – for large electrical utilities only

64

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 replaced since the last report.

## 4. Emission Unit Replacement

a. Is this unit, replacing another emission unit?

☒ No ☐ Yes - Enter DEP's emissions unit number and name for the unit being replaced from the drop-down list below:

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

## 5. Equipment

a. Equipment Type

EPA Unit type code

FURNACE

FURNACE

If engine, is this an emergency generator?

☐ Yes☐ No

If an emergency generator, please give the number of hours of operation during the reporting year for each category of operation:

Emergency Use(hours)

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Non Emergency Use(hours)

Maintenance and Readiness Testing(hours)

ALLIED AIR ENTERPRISES LLC (A LENNOX COMPANY)

LG-14-225/275B40

b. Manufacturer

c. Model number

0.28

1

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  
☐ hand fired  
☐ 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?

☒ 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):

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:

☐ Monthly

☐ Quarterly

☐ Semi-annual

☒ Annual

☒ RES

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

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

☐ NESHAP

☐ NSPS

☐ MACT

10. Hours of operation for the emission unit:

☐ a. check if continuously operated - 24 X 7 X 52

10

7

4

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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

Q1

Q2

Q3

Q4

Sum of Q1+Q2+Q3+Q4 must = 100%

or 0 if the unit was not operated for any quarter

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

0

0

0

a. Ozone season hours per day

b. Ozone season days per week

c. Weeks operated in ozone season

12. Emission Release Point - select one:

Engines click here for instructions:

Non-Stack Release Points:

- ☐ fugitive
- ☐ horizontal vent
- ☐ engine exhaust
- ☐ downward facing vent
- ☐ vertical stack/vent less than 10ft

Physical Stacks:

- ☒ vertical stack
- ☐ vertical with rain cap/sleeve

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?

☐ 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

a. Monitor type:

- ☐ CEMs
- ☐ opacity
- ☐ other

- ☐ CEMs
- ☐ opacity
- ☐ other

- ☐ CEMs
- ☐ opacity
- ☐ other

Describe

Describe

Describe

b. Manufacturer:

c. Model Number:

d. Monitor ID #:

Facility's Designation

Facility's Designation

Facility's Designation

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e. Installation Date:	<input type="text"/> (mm/dd/yyyy)	<input type="text"/> (mm/dd/yyyy)	<input type="text"/> (mm/dd/yyyy)
f. DEP Approval #:	<input type="text"/>	<input type="text"/>	<input type="text"/>
g. DEP Approval Date:	<input type="text"/> (mm/dd/yyyy)	<input type="text"/> (mm/dd/yyyy)	<input type="text"/> (mm/dd/yyyy)
h. Decommission Date:	<input type="text"/> (mm/dd/yyyy)	<input type="text"/> (mm/dd/yyyy)	<input type="text"/> (mm/dd/yyyy)
i. Recorder?	<input type="radio"/> yes <input type="radio"/> no	<input type="radio"/> yes <input type="radio"/> no	<input type="radio"/> yes <input type="radio"/> no
j. Audible Alarm?	<input type="radio"/> yes <input type="radio"/> no	<input type="radio"/> yes <input type="radio"/> no	<input type="radio"/> yes <input type="radio"/> no
k. Data System?	<input type="radio"/> yes <input type="radio"/> no	<input type="radio"/> yes <input type="radio"/> no	<input type="radio"/> yes <input type="radio"/> no
l. Monitored Pollutants - check all that apply:	<input type="checkbox"/> PM 10 <input type="checkbox"/> PM 2.5 <input type="checkbox"/> SO2 <input type="checkbox"/> CO <input type="checkbox"/> VOC <input type="checkbox"/> NO2 <input type="checkbox"/> NH3 <input type="checkbox"/> Mercury <input type="checkbox"/> Oxygen <input type="checkbox"/> CO2 <input type="checkbox"/> H2S <input type="checkbox"/> HCL <input type="checkbox"/> Opacity <input type="checkbox"/> Other <input type="text"/>	<input type="checkbox"/> PM 10 <input type="checkbox"/> PM 2.5 <input type="checkbox"/> SO2 <input type="checkbox"/> CO <input type="checkbox"/> VOC <input type="checkbox"/> NO2 <input type="checkbox"/> NH3 <input type="checkbox"/> Mercury <input type="checkbox"/> Oxygen <input type="checkbox"/> CO2 <input type="checkbox"/> H2S <input type="checkbox"/> HCL <input type="checkbox"/> Opacity <input type="checkbox"/> Other <input type="text"/>	<input type="checkbox"/> PM 10 <input type="checkbox"/> PM 2.5 <input type="checkbox"/> SO2 <input type="checkbox"/> CO <input type="checkbox"/> VOC <input type="checkbox"/> NO2 <input type="checkbox"/> NH3 <input type="checkbox"/> Mercury <input type="checkbox"/> Oxygen <input type="checkbox"/> CO2 <input type="checkbox"/> H2S <input type="checkbox"/> HCL <input type="checkbox"/> Opacity <input type="checkbox"/> Other <input type="text"/>
	Describe	Describe	Describe

B. Fuels and Emissions

1. Fuel Name / Characteristics:

NO. 2 OIL

Fuel Name

1

DEP Fuel #

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

Number of Additional Fuels :

☐ Delete this fuel: check box if you stopped using this fuel in this unit permanently. You must still report for this year of record even if amount is "0" – the fuel will be removed from the unit in the next report cycle.

a. Source Classification Code (SCC):

10200501

SCC ( call DEP if SCC will not validate)

EXTERNAL COMBUSTION BOILERS - INDUSTRIAL - DISTILLATE OIL - GRADES 1 AND 2 - BOILER

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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 decommissioned prior to this year of record):

0.0003

1000 GALLONS

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:

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

☐ ☐ ☐ ☐

month week day hour

2. 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 of record)

a. Amount - year of record

b. Units

.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:	<input type="checkbox"/> PM10-FIL	<input type="checkbox"/> PM25-FIL	<input type="checkbox"/> PM-CON	<input type="checkbox"/> SO2
Actual for previous year:	0.0001 Tons	0 Tons	 Tons	0.0028 Tons
Actual for year of record:	0.0002 Tons	0 Tons	 Tons	0.0032 Tons
Potential emissions	0.0013 Tons	0.0003 Tons	 Tons	0.0257 Tons
Emission Factor	1	0.25		142
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				

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emissions-annual:	Tons	Tons	Tons	Tons
Max allowed				
emissions-short term:	Pounds	Pounds	Pounds	Pounds
Short term Period				
Basis DEP Approval number or regulation:				

<b>Pollutant:</b>	<input type="checkbox"/> PB	<input type="checkbox"/> VOC	<input type="checkbox"/> NH3	<input type="checkbox"/> CO
Actual for previous year:		0		0.0007
	Tons	Tons	Tons	Tons
Actual for year of record:		0		0.0008
	Tons	Tons	Tons	Tons
Potential emissions		0.0003		0.0066
	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	Pounds	Pounds	Pounds
Short term Period				
Basis DEP Approval number or regulation:				

<b>Pollutant:</b>	<input type="checkbox"/> NO2	<b>specify other pollutant</b>	
Actual for previous year:	0.0035		
	Tons	Tons	
Actual for year of record:	0.0040		
	Tons	Tons	
Potential emissions	0.0315		
	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 term:			
	Pounds	Pounds	
Short term Period			
Basis DEP Approval			

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number or regulation:

4. 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 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.