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**Department of Energy**

Richland Operations Office  
P.O. Box 550  
Richland, Washington 99352

95-PCA-097

JAN 09 1995

Mr. Randall F. Smith, Director  
Hazardous Waste Division  
U.S. Environmental Protection Agency  
Region 10  
1200 Sixth Avenue  
Seattle, Washington 98101

Ms. Dru Butler, Program Manager  
Nuclear Waste Program  
State of Washington  
Department of Ecology  
P.O. Box 47600  
Olympia, Washington 98504

Dear Mr. Smith and Ms. Butler:

**HANFORD FACILITY DANGEROUS WASTE GENERAL INFORMATION PART A PERMIT APPLICATION, FORM 1 (WA7890008967)**

Enclosed is a revised Hanford Facility Dangerous Waste General Information Part A Permit Application (Part A), Form 1, for the Pacific Northwest Laboratory (PNL). This Part A, Form 1, is being submitted to cover the 8 treatment, storage, and/or disposal (TSD) units for which PNL has co-operator responsibilities with the U.S. Department of Energy, Richland Operations Office, (RL) at the Hanford Facility. This application supplements the two existing Part A, Form 1s, that currently designate Westinghouse Hanford Company (WHC) and Bechtel Hanford, Inc. (BHI) as co-operators. The three Hanford Facility contractors have co-operator responsibilities for dangerous waste units, as specified in the individual Part A, Form 3, applications. RL's Resource Conservation and Recovery Act (RCRA) responsibilities are for policy, programmatic, funding, and scheduling decisions, as well as general oversight. The contractors' RCRA responsibilities are for day-to-day operations, including, but not limited to, the following responsibilities: waste analysis and handling, monitoring, record keeping, reporting, and contingency planning.

The 8 TSD units for which PNL has co-operator responsibilities are listed below:

- 7-8-3 THERMAL TREATMENT TEST FACILITIES
- 7-8-4 PHYSICAL/CHEMICAL TREATMENT TEST FACILITIES
- 7-8-5 BIOLOGICAL TREATMENT TEST FACILITIES
- 7-5-4 325 HAZARDOUS WASTE TREATMENT UNITS
- 7-5-2 305-B STORAGE FACILITY
- 1-5-4 SIMULATED HIGH-LEVEL WASTE SLURRY T/S UNIT
- 7-5-3 332 STORAGE FACILITY
- 7-5-1 324 SODIUM REMOVAL PILOT PLANT



Mr. Smith and Ms. Butler  
95-PCA-097

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It should be noted that final disposition of the 5 TSD units addressed under Hanford Federal Facility Agreement and Consent Order (TPA) Milestone M-20-45, 2 of which PNL retains co-operator responsibilities for, has not been achieved. PNL intends to seek final disposition of these TSD units through TPA provision 6.3.3.

If you have any questions, please contact Mr. C. E. Clark of RL on (509) 376-9333 or Mr. H. T. Tilden of PNL on (509) 376-0499.

Sincerely,



James E. Rasmussen, Acting Program Manager  
Office of Environmental Assurance,  
Permits, and Policy  
DOE Richland Operations Office

EAP:CEC



T. D. Chikalla, Director  
Facilities and Operations  
Pacific Northwest Laboratory

Enclosure:  
Hanford Facility Dangerous Waste  
General Information Part A  
Permit Application, Form 1

cc w/encls:  
H. T. Tilden, PNL  
Administrative Records, H6-08

cc w/o encls:  
S. Alexander, Ecology  
J. Atwood, Ecology  
R. Bowman, WHC  
J. Breckel, Ecology  
B. Burke, CTUIR  
D. Duncan, EPA  
J. James, BHI  
R. Jim, YIN  
D. Lundstrom, Ecology  
D. Powaukee, NPT  
S. Price, WHC  
D. Sherwood, EPA  
R. Stanley, Ecology  
J. Stohr, Ecology



FORM  
1

State of  
Washington  
Department  
of Ecology



WASHINGTON STATE

HAZARDOUS WASTE PERMIT GENERAL INFORMATION

(Read "Form 1 Instructions" before starting)

I. EPA/STATE I.D. NUMBER

WA 7 18 9 10 10 10 18 9 6 17

II. NAME OF FACILITY  
US DEPARTMENT OF ENERGY - HANFORD FACILITY

III. FACILITY CONTACT  
A. NAME & TITLE (last, first, & title) WAGONER, JOHN, MANAGER  
B. PHONE (area code & no.) 509 376 7395

IV. FACILITY MAILING ADDRESS  
A. STREET OR P.O. BOX P.O. BOX 550  
B. CITY OR TOWN RICHLAND  
C. STATE WA  
D. ZIP CODE 99352

V. FACILITY LOCATION  
A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER HANFORD SITE  
B. COUNTY NAME BENTON  
C. CITY OR TOWN RICHLAND  
D. STATE WA  
E. ZIP CODE 99352  
F. COUNTY CODE (if known) 005

IV. SIC CODES (4-digit, in order of priority)  
A. FIRST 8733 RESEARCH, NONCOMMERCIAL  
B. SECOND 9999 NONCLASSIFIABLE  
C. THIRD  
D. FOURTH

VII. OPERATOR INFORMATION  
A. NAME DEPARTMENT OF ENERGY - RICHLAND OPERATIONS  
PACIFIC NORTHWEST LABORATORY (PNL)  
B. Is the name listed in Item VII-A also the owner?  YES  NO  
C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box; if "Other", specify.) F (specify)  
D. PHONE (area code & no.) 509 376 7395  
E. STREET OR P.O. BOX P.O. BOX 550 / P.O. BOX 999  
F. CITY OR TOWN RICHLAND  
G. STATE WA  
H. ZIP CODE 99352  
VIII. INDIAN LAND  
Is the facility located on Indian lands?  YES  NO

\*\* DOE-RL: OWNER/OPERATOR PNL: CO-OPERATOR FOR CERTAIN UNITS ON THE HANFORD SITE  
COMPLETE BACK PAGE

**IX. MAP**

Attach to this application a topographic map of the area extending to at least one mile beyond property boundaries. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in the map area. See instructions for precise requirements.

**X. NATURE OF BUSINESS (provide a brief description)**

- RESEARCH, NONCOMMERCIAL
- NONCLASSIFIABLE-OPERATIONS AND MANAGEMENT SERVICES

**XI. CERTIFICATION (see instructions)**

*I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the application, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.*

A. NAME &amp; OFFICIAL TITLE (type or print)

B. SIGNATURE

C. DATE SIGNED

SEE ATTACHMENT

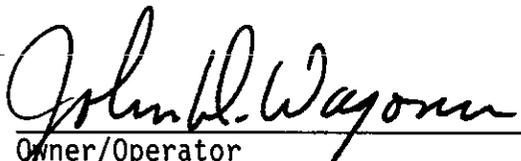
WA7890008967

FORM 1

DANGEROUS WASTE PERMIT GENERAL INFORMATION

XI. OPERATOR CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the application, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.



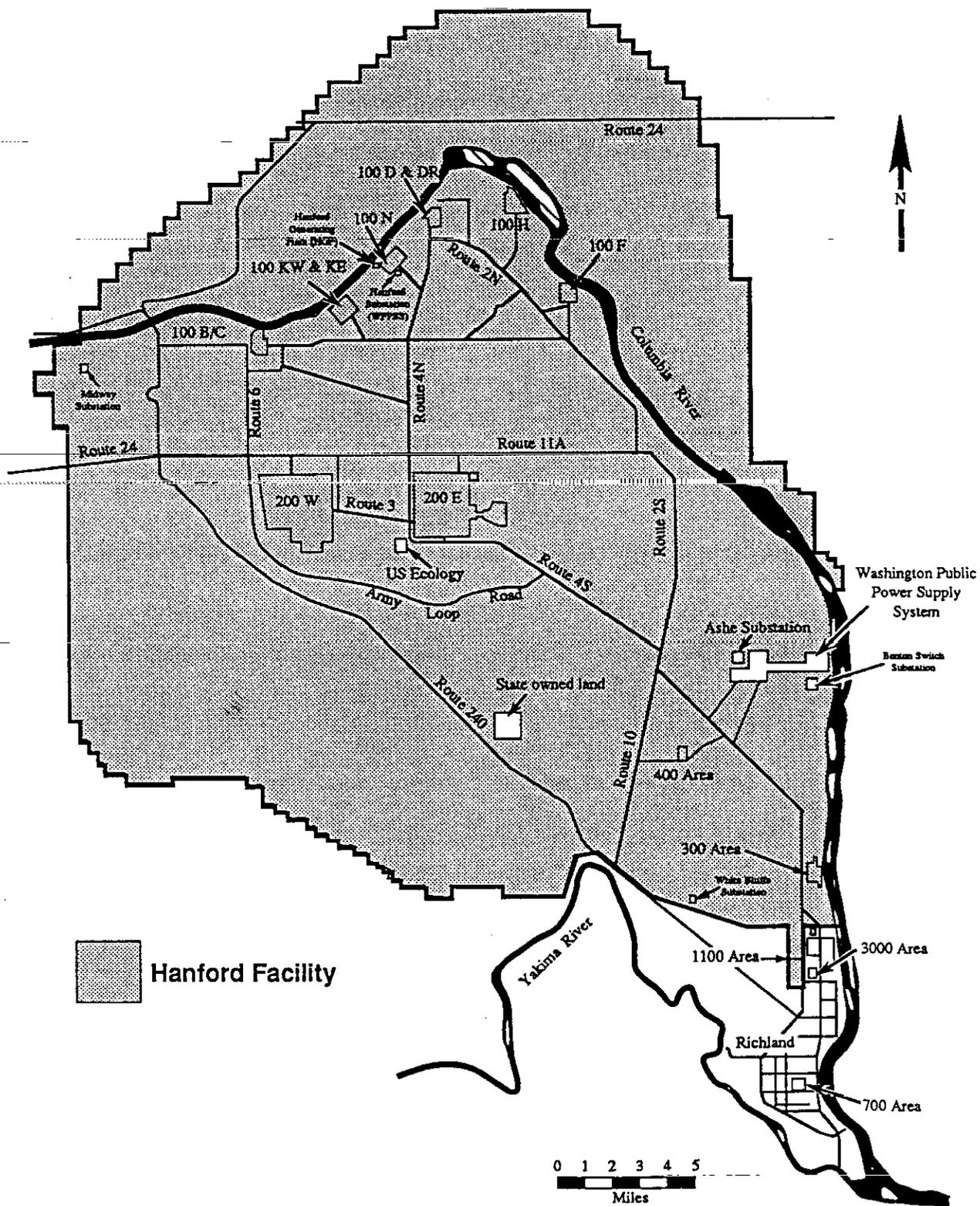
Owner/Operator  
John D. Wagoner, Manager  
U.S. Department of Energy  
Richland Operations Office

11/9/95  
Date



Co-operator  
William J. Madia, Director  
Pacific Northwest Laboratory

10/28/94  
Date



7950109

Hanford Facility Map