START

0016294

NONRADIOACTIVE DANGEROUS WASTE LANDFILL

INTERNAL SHIPPING DOCUMENTS - MANIFESTS

CATEGORIZED PACKAGE

FOR YEAR 1983

BEST AVAILABLE COPY

SEP 1991
RECEIVED
EDMC

NOTES ON PREPARATION OF THE NONRADIOACTIVE DANGEROUS WASTE LANDFILL WASTE DISPOSAL DOCUMENT FOR YEAR 1983

1. The file copy of the Nonradioactive Dangerous Waste Landfill (NRDWL) disposal records for the operational years 1975 through 1985 were reviewed and assembled into waste disposal packets.

3. A waste disposal packet number is composed of the letter P (for packet), the last two digits of the year in which disposal took place, and a consecutively assigned three digit number starting with 001 for the first packet of each year (i.e. P75-001 or P83-001)

2. Generally, the disposal record packages contain information on the waste that was disposed only at the NRDWL. However, some waste disposal events have final disposal locations other than NRDWL, have unconfirmed disposal locations or have two or more final (partial) disposal locations. Other final disposal locations consist of the 2727-S/200W Offsite Staging Facility, United Nuclear Industries Landfill, Hanford Solid Waste Landfill, Hanford sanitary trenches, 200W burial area, or unidentified offsite locations. Retained in this document are those disposal events that identify the NRDWL as a final, partial or a uncertain disposal location. All disposal events having been identified as having been disposed of at an other facility either entirely or partially have been forwarded to that particular facility.

3. Records documenting disposal for a given year were assigned page numbers in the initial submittal of the file copy, "Manifest Records for Year 1983", on February 14, 1991. Records are numbered consecutively for each year beginning with 0000001. Generally all documents relating to a single disposal event are arranged in consecutive order. Occasionally, however, disposal packets contain related documents out of consecutive order. Some pages are related to more than one disposal event and appear in more than one waste disposal packet.

4. A cross reference table exists for this document which identifies the packet number, disposal date, file copy page numbers (from the original submittal), final disposal location, and trench number.

DISPOSAL PACKET NUMBER

P83-001

REQUEST FOR DISPOSAL OF NONRADIOACTIVE HAZARDOUS MATERIAL

10 A 11

INSTRUCTIONS

Complete this request by providing all available information in the spaces provided. Fold, staple, and return completed form by plant mail to Environmental Protection.

I. CUSTODIAN

NAME Tom Dillon TELEPHONE 3-1744

BUILDING/AREA 202 A - 200 E

II. IDENTIFICATION OF MATERIAL

TRADE NAME Asbestos

CHEMICAL NAME Asbestos

STORAGE LOCATION outside 202 A Dock #3

CONTAMINATED WITH RADIOACTIVE MATERIAL? YES ____ NO X

III. PACKAGING

LIQUID ____ SOLID X GAS ____

NUMBER OF CONTAINERS ____ WEIGHT ____ EA. VOLUME 230 C.F. EA.

TYPE OF CONTAINER Dumpster AGE OF CONTAINER ____

IV. REASON FOR DISPOSAL

Removed insulation

V. DATE DISPOSAL REQUIRED

A.S.A.P.

VI. COMMENTS

Asbestos in plastic bags stored in Dumpster at Dock #3 202 A Contact Bud Knoll for key to unlock Dumpster 3-2675

APPROVED FOR DISPOSAL
BY [signature]
DATE January 17, 1983

DISPOSAL LOCATION
Land Fill Asbestos Trench
BY D. E. [signature]
DATE 1-20-83

000188

DISPOSAL PACKET NUMBER

P83-002

2025 / 200W
RHO

REQUEST FOR DISPOSAL OF NONRADIOACTIVE HAZARDOUS MATERIAL

INSTRUCTIONS

Complete this request by providing all available information in the spaces provided. Fold, staple, and return completed form by plant mail to Environmental Protection.

I. CUSTODIAN

NAME A. S. Barron TELEPHONE 3-1900

BUILDING/AREA 277W / 200W

II. IDENTIFICATION OF MATERIAL

TRADE NAME Asbestos

CHEMICAL NAME

STORAGE LOCATION 277W

CONTAMINATED WITH RADIOACTIVE MATERIAL? YES ____ NO X

III. PACKAGING

LIQUID ____ SOLID X GAS ____

NUMBER OF CONTAINERS 1 Load WEIGHT ____ EA. VOLUME 5 yards ~~EA.~~

TYPE OF CONTAINER Steel Lugger AGE OF CONTAINER ____

IV. REASON FOR DISPOSAL

V. DATE DISPOSAL REQUIRED

VI. COMMENTS

Asbestos must be wetted and double bagged before disposal will be made!

APPROVED FOR DISPOSAL
BY M. H. [illegible]
DATE 1/12/83

DISPOSAL LOCATION Land Fill / Asbestos Trench
BY D E Phelps
DATE 1-20-83

000189

DISPOSAL PACKET NUMBER

P83-003

REQUEST FOR DISPOSAL OF NONRADIOACTIVE HAZARDOUS MATERIAL

INSTRUCTIONS

Complete this request by providing all available information in the spaces provided. Fold, staple, and return completed form by plant mail to Environmental Protection.

I. CUSTODIAN

NAME Don Brotherton TELEPHONE 3-2385

BUILDING/AREA 271U - 200W

II. IDENTIFICATION OF MATERIAL

TRADE NAME Asbestos

CHEMICAL NAME "

STORAGE LOCATION 284 W

CONTAMINATED WITH RADIOACTIVE MATERIAL? YES ____ NO ✓

III. PACKAGING

LIQUID ____ SOLID ✓ GAS ____

NUMBER OF CONTAINERS ____ WEIGHT ____ EA. VOLUME 230^3 EA.

TYPE OF CONTAINER ____ AGE OF CONTAINER ____

IV. REASON FOR DISPOSAL

Removed Insulation

V. DATE DISPOSAL REQUIRED

ASAP

VI. COMMENTS

Asbestos in plastic bags - stored in Dumpster

APPROVED FOR DISPOSAL
BY [signature]
DATE January 26, 1983

DISPOSAL LOCATION asbestos Trench
Land Fill
BY [signature] 18m
DATE 1-31-83

000202

DISPOSAL PACKET NUMBER

P83-004

REQUEST FOR DISPOSAL OF NONRADIOACTIVE HAZARDOUS MATERIAL

INSTRUCTIONS

Complete this request by providing all available information in the spaces provided. Fold, staple, and return completed form by plant mail to Environmental Protection.

I. CUSTODIAN

NAME Don Brotherton TELEPHONE 3-2385

BUILDING/AREA 271U - 200W

II. IDENTIFICATION OF MATERIAL

TRADE NAME Asbestos

CHEMICAL NAME "

STORAGE LOCATION 210M

CONTAMINATED WITH RADIOACTIVE MATERIAL? YES ____ NO ✓

III. PACKAGING

LIQUID ____ SOLID ✓ GAS ____

NUMBER OF CONTAINERS ____ WEIGHT ____ EA. VOLUME 230³ EA.

TYPE OF CONTAINER Dumpster AGE OF CONTAINER ____

IV. REASON FOR DISPOSAL

Removed Insulation

V. DATE DISPOSAL REQUIRED

ASAP

VI. COMMENTS

Asbestos in plastic bag stored in Dumpster

APPROVED FOR DISPOSAL
BY [illegible]
DATE JANUARY 26, 1983

DISPOSAL LOCATION Land Fill
Asbestos Trench
BY D E Fisher
DATE 1-31-83

000203

DISPOSAL PACKET NUMBER

P83-005

REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

I. GENERATION: The Generator should complete Part I and forward this form to: WS&DT, 202-S 200 West, Rockwell

A. Generator's Name: E.L. SEELY Phone: 6-6493 Address: 1171 BLDG Company: RHO.

B. Custodian's Name: E.L. SEELY Phone: 6-6493 Address: 1171 Bldg-1100 Company: RHO

C. Waste Description: (If more than five items, attach additional sheets)

	Generic Name	Total Quantity	Type of Container	Number of Containers	Check One: Sol.	Liq.	Gas	Hazard Class
1	Asbestos	2 cu ft		1				
2								
3								
4								
5								

D. Have appropriate labels been affixed to containers? YES Not required ____

E. Have efforts been made to recycle (e.g., excess) waste? NO

F. Has waste been treated in any manner? YES If so, how? WATER Added

G. Storage Location: Light Equipment Shop - 1171 Bldg 1100 AREA

H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: ____

Generator's Signature: E.L. Seely Date: 2-1-83

II. APPROVAL

A. Approved for disposal by Name: E.R. Cox Phone: 3-3679 Address: 202-S/200 West Rockwell

Date: 1/28/83 Signature: E.R. Cox

B. Packaging Requirements (specify): Double bagged and wetted.

C. Disposal Location: Land Fill Chemical Trench Asbestos Trench Asbestos X Trench

(check one) ____ 212-P (Storage). ____ Other

III. TRANSPORTATION/DISPOSAL

A. Transporter(s) Name: HUMAVEX Phone: 66654 Address: 1171 1100 AREA Company: RHO

B. Date Transported/Disposed: 2-2-83

C. Transporter's Signature: H. Humfey 66654.

(N-1-82)

000201

DISPOSAL PACKET NUMBER

P83-006

Return to
A. H. Litzinger
22-T/200 W

Vargas

UNC

1-23

REQUEST FOR DISPOSAL OF NONRADIOACTIVE HAZARDOUS MATERIAL

INSTRUCTIONS

Complete this request by providing all available information in the spaces provided. Fold, staple, and return completed form by plant mail to Environmental Protection.

I. CUSTODIAN

NAME WV COOK TELEPHONE 3-1420

BUILDING/AREA 105DR /100D

II. IDENTIFICATION OF MATERIAL

TRADE NAME

CHEMICAL NAME Lithium Nitrite & Reaction Debris

STORAGE LOCATION 105DR

CONTAMINATED WITH RADIOACTIVE MATERIAL? YES ____ NO X

III. PACKAGING

1. 390 #
2. 400 #
3. 350 #

LIQUID ____ SOLID X GAS ____

NUMBER OF CONTAINERS 3 WEIGHT ____ EA. VOLUME 55gal EA.

TYPE OF CONTAINER Steel Drum AGE OF CONTAINER New

IV. REASON FOR DISPOSAL

By-product waste

V. DATE DISPOSAL REQUIRED

2/15/83

VI. COMMENTS

Material has already been reacted and absorbed.

APPROVED FOR DISPOSAL
BY [signature]
DATE January 28, 1983

DISPOSAL LOCATION Land Fill
Chemical Trench
BY [signature]
DATE 2-3-83

0000043

F. Litzinger
12-T/20 W
HO

VAQ

2-4-83

REQUEST FOR DISPOSAL OF NONRADIOACTIVE HAZARDOUS MATERIAL

INSTRUCTIONS

Complete this request by providing all available information in the spaces provided. Fold, staple, and return completed form by plant mail to Environmental Protection.

I. CUSTODIAN

NAME WV COOK TELEPHONE 3-1420

BUILDING/AREA 105DR /100D

II. IDENTIFICATION OF MATERIAL

TRADE NAME

CHEMICAL NAME Lithium Nitrite & Reaction Debris

STORAGE LOCATION 105DR

CONTAMINATED WITH RADIOACTIVE MATERIAL? YES ____ NO X

III. PACKAGING

1. 390 #
2. 400 #
3. 350 #

LIQUID ____ SOLID X GAS ____

NUMBER OF CONTAINERS 3 WEIGHT ____ EA. VOLUME 55gal EA.

TYPE OF CONTAINER Steel Drum AGE OF CONTAINER New

IV. REASON FOR DISPOSAL

By-product waste

V. DATE DISPOSAL REQUIRED

2/15/83

VI. COMMENTS

Material has already been reacted and absorbed.

APPROVED FOR DISPOSAL
BY [signature]
DATE January 28, 1983

DISPOSAL LOCATION Land Fill
Chemical Trench
BY [signature]
DATE 2-3-83

000262

DISPOSAL PACKET NUMBER

P83-007

Stephens

Rockwell

REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

1-25

I. GENERATION: The Generator should complete Part I and forward this form to: WS&DT, 202-S/200 West, Rockwell

A. Generator's Name G.L. GURWELL Phone: 3-3490 Address: 2704-S 2W Company: R.H.O.

B. Custodian's Name J.S. BUCKINGHAM Phone: 3-2487 Address: MO-037 2W Company: R.H.O.

C. Waste Description: (If more than five items, attach additional sheets)

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One) Sol.	Liq.	Gas	Hazard Class
1. METAL DRUMS (Chem)		55 GAL	31				EMPTY
2. PLASTIC DRUM (chem)		55 GAL.	1				EMPTY
3. METAL DRUMS (chem)		30 GAL.	2				EMPTY
4. METAL TANK ON LEGS (Chem)		55 GAL.	1				EMPTY
5.		TOTAL	3955-+	3-200gal			Drill cuttings Coal

D. Have appropriate labels been affixed to containers? YES - ~~Not required~~ EMPTY TAGS

E. Have efforts been made to recycle (e.g., excess) waste? N/A

F. Has waste been treated in any manner? N/A If so, how? —

G. Storage Location: WEST END of 202-S BUILDING

H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: WILL BE SURVEYED S-83-0124 R.C. Crawford,

Generator's Signature: G L Gurwell Date: January 19, 1983

II. APPROVAL

A. Approved for disposal by Name: G.R. Cox Phone: 3-3679 Address 202-S/200-W Co.: Rockwell

Date: 1/28/83 Signature: G.R. Cox

B. Packaging Requirements (specify): None

Land Fill Chemical Trench 2-3-83 D E Phelps

C. Disposal Location: X Chemical Trench, ____ Asbestos Trench,

(check one) ____ 212-P (Storage), ____ Other

III. TRANSPORTATION/DISPOSAL

Transporter(s) Name: W.A. Stephens Jr. Phone: 66654 Address: 1171 Company R.H.O.

B. Date Transported/Disposed: 2/3/83

C. Transporter(s) Signature: W. A. Stephens Jr.

0000044

E 87510

BC-6700-174.1 (N-1-82)

REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

I. GENERATION: The Generator should complete Part I and forward this form to: WS&DT, 202-S/200 West, Rockwell

A. Generator's Name G.L. Gurwell Phone: 3-3190 Address: 2704-S 2W Company: R.H.C

B. Custodian's Name J.S. Buckingham Phone: 3-2187 Address: 40-037 2W Company: R.H.C.

C. Waste Description: (If more than five items, attach additional sheets)

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One) Sol.	Liq.	Gas	Hazard Class
1. METAL DRUMS (Chem)		55 GAL	31				EMPTY
2. PLASTIC DRUM (Chem)		55 GAL	1				EMPTY
3. METAL DRUMS (Chem)		30 GAL	2				EMPTY
4. METAL TANK OUTLEGS (Chem)		55 GAL	1				EMPTY
5.		TOTAL	35 55-+	3-208			UNR open Cont

D. Have appropriate labels been affixed to containers? YES - ~~Not required~~ EMPTY TAGS

E. Have efforts been made to recycle (e.g., excess) waste? N/A

F. Has waste been treated in any manner? N/A If so, how? —

G. Storage Location: WEST END of 202-S Building

H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: WILL BE SURVEYED 5-83-0124 R.C. Crawford,

Generator's Signature: G. L. Gurwell Date: January 19, 1983

II. APPROVAL

A. Approved for disposal by Name: G.R. Cox Phone: 3-3679 Address 202-S/200-W Co.: Rockwell

Date: 1/28/83 Signature: G.R. Cox

B. Packaging Requirements (specify): None

Land Fill Chemical Trench 2-3-83 O.E. Phelps

C. Disposal Location: X Chemical Trench, ____ Asbestos Trench,

(check one) ____ 212-P (Storage), ____ Other

III. TRANSPORTATION/DISPOSAL

A. Transporter(s) Name: W.A. Stephens Jr. Phone: 66654 Address: 1171 Company R.H.C

B. Date Transported/Disposed: 2/3/83

C. Transporter(s) Signature: W.A. Stephens Jr.

E 87510

1-82)

000263

DISPOSAL PACKET NUMBER

P83-008

Rockwell

129

REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

I. GENERATION: The Generator should complete Part I and forward this form to: WS&DT 202-S/200 West Rockwell

A. Generator's Name: [illegible] Phone: 373-2323 Address: 202A 200E Company: Rockwell

B. Custodian's Name: _____ Phone: _____ Address: _____ Company: _____

C. Waste Description: (If more than five items, attach additional sheets)

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One) Sol.	Liq.	Gas	Hazard Class
1. EMPTY 55 GAL. DRUMS	26						
2.							
3.							
4.							
5.							

D. Have appropriate labels been affixed to containers? _____ Not required ✓

E. Have efforts been made to recycle (e.g., excess) waste? YES

F. Has waste been treated in any manner? Flushed If so, how? Flushed

G. Storage Location: 211-A

H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: A053 0305

Generator's Signature: [illegible] Date: 1/31/83

II. APPROVAL

A. Approved for disposal by Name: G.R. Cox Phone: 3-3679 Address 202-S/2-W Co.: RHO

Date: February 2, 1983 Signature: [illegible] R. Cox

B. Packaging Requirements (specify): N/A

C. Disposal Location: Chemical Trench Chemical Trench, _____ Asbestos Trench,

(check one) _____ 212-P (Storage), _____ Other

D E Phelps

III. TRANSPORTATION/DISPOSAL

A. Transporter(s) Name: Stephens Phone: 66654 Address: 1171 Company RHO.

B. Date Transported/Disposed: 2-9-83

C. Transporter(s) Signature: [illegible]

0000045

BC-6700-174.1 (N-1-82)

REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

I. GENERATION: The Generator should complete Part I and forward this form to: WS&DT
202-S/200 West
Rockwell

A. Generator's Name: [signature] Phone: 373 2323 Address: 202A 200E Company: Rockwell

B. Custodian's Name: _____ Phone: _____ Address: _____ Company: _____

C. Waste Description: (If more than five items, attach additional sheets)

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One) Sol.	Liq.	Gas	Hazard Class
1. EMPTY 55 GAL. DRUMS	26						
2.							
3.							
4.							
5.							

D. Have appropriate labels been affixed to containers? _____ Not required ✓

E. Have efforts been made to recycle (e.g., excess) waste? YES

F. Has waste been treated in any manner? Flushed If so, how? Flushed

G. Storage Location: 211-A

H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable), and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: A0830305

Generator's Signature: [signature] Date: 1/31/83

II. APPROVAL

A. Approved for disposal by Name: G.R. Cox Phone: 3-3679 Address 202-S/2-W Co.: RHO

Date: February 2, 1983 Signature: [signature] R. Cox

B. Packaging Requirements (specify): N/A

C. Disposal Location: Chemical Trench Chemical Trench, _____ Asbestos Trench,

(check one) _____ 212-P (Storage), _____ Other

D.E. Phelps

III. TRANSPORTATION/DISPOSAL

A. Transporter(s) Name: Stephens Phone: 66654 Address: 1171 Company RHO

B. Date Transported/Disposed: 2-9-83

C. Transporter(s) Signature: [signature]

1.1 (N-1-82

000261

DISPOSAL PACKET NUMBER

P83-009

DON'T SAY IT --- Write It!

TO ~~R.A. Polk~~ Dennis Poor

DATE November 14, 1983

FROM Gary R. Cox

Please sign this Disposal Request, attach a copy of the orginal reference letter listing the empty containers (PS-017-83), and send it to Dennis Poor
1171 Bldg./1100 Area
RHO.

This should get things straightened out so we may continue to serve you as we have in the past.
Thanks.

Any problems call me, R.A. Polk
Ph. 3-2323

"TO MAKE LIFE LAST, PUT SAFETY FIRST"

GIVE THIS TO GENE AT THE LANDFILL

0000185

HEDL

REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

I. GENERATION: The Generator should complete Part I and forward this form to: WS&DT, 202-S/200 West, Rockwell

A. Generator's Name: C.S. Hofmeister Phone: 6-3420 Address: 340/300 Company: HEDL

B. Custodian's Name: SAME Phone: SAME Address: HEDL Boneyard Company: HEDL

C. Waste Description: (If more than five items, attach additional sheets)

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One) Sol.	Liq.	Gas	Hazard Class
1. Hydroxide Liquid CAUSTIC	17	55-gallon drum	17	Drums rinsed-empty			
2.							
3.							
4.							
5.							

D. Have appropriate labels been affixed to containers? _____ Not required X

E. Have efforts been made to recycle (e.g., excess) waste? Yes

F. Has waste been treated in any manner? No If so, how? (Caustic emplied; drums rinsed)

G. Storage Location: Currently at HEDL Boneyard Awaiting disposal

H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: _____

Generator's Signature: C.S. Hofmeister Date: 2-10-83

II. APPROVAL

A. Approved for disposal by Name: M H Litzinger Phone: 3-2662 Address 202-S 200W Co.: RHO

Date: 1/12/83 Signature: M H Litzinger

B. Packaging Requirements (specify): Empty Caustic Drum - This request is not good for any other wastes

C. Disposal Location: Chemical Trench (Chemical Trench) _____ Asbestos Trench, (check one) _____ 212-P (Storage), _____ Other

O E Pleke

III. TRANSPORTATION/DISPOSAL

Transporter(s) Name: Lance Davis Phone: 66654 Address 1171 Company PHO

B. Date Transported/Disposed: 2-10-83

C. Transporter(s) Signature: Lance Davis

0000186

BC-6700-174.1 (N-1-82)

REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

I. GENERATION: The Generator should complete Part I and forward this form to WS&DT 202-S/200 West Rockwell

A. Generator's Name: CS Hofmeister Phone: 6-3420 Address: 340/300 Company: HEDL

B. Custodian's Name: SAME Phone: SAME Address: HEDL Boneyard Company: HEDL

C. Waste Description: (If more than five items, attach additional sheets)

Generic Name	Total Quantity	Type of Container	Number of Containers	Check One: Sol.	Liq.	Gas	Hazard Class
1. Hydroxide Liquid	17	55-gallon	17				
2. CAUSTIC		drum		Drums rinsed-empty			
3.							
4.							
5.							

D. Have appropriate labels been affixed to containers? _____ Not required X

E. Have efforts been made to recycle (e.g., excess) waste? Yes

F. Has waste been treated in any manner? No If so, how? (Caustic emplied; drums rinsed)

G. Storage Location: Currently at HEDL Boneyard awaiting disposal

H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: _____

Generator's Signature: CS Hofmeister Date: 2-10-83

II. APPROVAL

A. Approved for disposal by Name M H Litzinger Phone: 3-2662 Address 202-S 200 Co. RHO

Date: 1/12/83 Signature: M H Litzinger

B. Packaging Requirements (specify): Empty Caustic Drum - This request is not good for any other wastes

C. Disposal Location (check one): Chemical Trench (Chemical Trench) _____ Asbestos Trench _____ 212-P (Storage) _____ Other _____

D E Fischer

III. TRANSPORTATION/DISPOSAL

A. Transporter(s) Name: Lance Davis Phone: 66654 Address: 1171 Company: RHO

B. Date Transported/Disposed: 2-10-83

C. Transporter(s) Signature: Lance Davis

00-174.1 (N-1-82)

000260

DISPOSAL PACKET NUMBER

P83-010

RADIATION RELEASE

BLDG. 202-S DATE 3-9-83

RELEASED BY R.C. Crawford
RADIATION MONITORING

REMARKS: Survey 5-83-0305

10-Empty Drums —

54-3000-022 (5 - 57)

Rockwell

25

TIVE HAZARDOUS WASTE

I. GEN

orm to: WS&DT
202-S/200 West
Rockwell

A. Generator's Name: G.L. Gurwell Phone: 3-3490 Address: 200 West 2704-S Bldg Company: RHO

B. Custodian's Name: J.S. Buckingham Phone: 3-2487 Address: 200 West MO-037 Company: RHO

C. Waste Description: (If more than five items, attach additional sheets)

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One) Sol.	Liq.	Gas	Hazard Class
1. Tri Chloro Benzene	MT.	55 gal Drum	1				
2. Oil Drums	MT.	55 gal "	2				
3. Tributyl phosphate	MT.	55 gal "	1				
4. NaLCO 5 Dodium aluminate	MT.	55 gal "	5				
5. " "	MT.	30 gal "	1				

D. Have appropriate labels been affixed to containers? _____ Not required ✓

E. Have efforts been made to recycle (e.g., excess) waste? Yes

F. Has waste been treated in any manner? No If so, how? _____

G. Storage Location: WEST End of 202-S Bldg.

H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: To Be Surveyed 3-83-0305 R.C. Crawford

Generator's Signature: G.L. Gurwell Date: March 3, 1983

II. APPROVAL

A. Approved for disposal by Name: Gary R. Cox Phone: 3-3679 Address: 202-S/200-W Co.: Rockwell

Date: March 3, 1983 Signature: Gary R. Cox

B. Packaging Requirements (specify): No problems if empty.

C. Disposal Location: X Chemical Trench, _____ Asbestos Trench,

(check one) _____ 212-P (Storage), _____ Other

III. TRANSPORTATION/DISPOSAL

A. Transporter(s) Name: Larry D. Padilla Phone: 66178 Address: 1171 Company RHO

B. Date Transported/Disposed: 3-9-83

C. Transporter(s) Signature: Larry D. Padilla

0000056

BC-6700-174.1 (N-1-82)

DISPOSAL PACKET NUMBER

P83-011

Rockwell

REQUEST FOR DISPOSAL OF NONRADIOACTIVE HAZARDOUS MATERIAL

INSTRUCTIONS

Complete this request by providing all available information in the spaces provided. Fold, staple, and return completed form by plant mail to Environmental Protection.

I. CUSTODIAN

NAME M.C. Thompson TELEPHONE 6-7110

BUILDING/AREA 1166 / 1100

II. IDENTIFICATION OF MATERIAL

TRADE NAME Stock #51-0100-475

CHEMICAL NAME Phosphoric Acid

STORAGE LOCATION Acid House - 1100 area

CONTAMINATED WITH RADIOACTIVE MATERIAL? YES ____ NO ✓

III. PACKAGING

LIQUID ✓ SOLID ____ GAS ____

NUMBER OF CONTAINERS 1 WEIGHT ____ EA. VOLUME ____ EA.

TYPE OF CONTAINER ____ AGE OF CONTAINER ____

IV. REASON FOR DISPOSAL

Old - solidified/crystalized

V. DATE DISPOSAL REQUIRED

ASAP

VI. COMMENTS

See attached PDR # 82-270

Land Fill at Chemical Trench/Central Land Fill

APPROVED FOR DISPOSAL
BY [signature]
DATE March 7, 1983

DISPOSAL LOCATION Chemical Trench
BY D E Phelps
DATE 3-21-83

Called talked to Joan Shewell ck w/Mark L

0000014

NAME OF CONTRACTOR

PROPERTY DISPOSAL REQUEST

70430

RHC-270

CROSSCONTROL NO

PART I — DESCRIPTION OF PROPERTY AND REASON FOR DISPOSAL

ITEM	QTY.	UNIT	INCLUDE IDENTIFICATION NUMBERS, SUCH AS: NEW, EQUIPMENT PIECE, SERIAL NOS., BUILDING FROM WHICH REMOVED, PROJECT AFFECTED, ETC.	UNIT ACQ. VALUE	ACCOUNTING LIBRARY TOTAL VALUE	PROPERTY MGT. USE ONLY. DISPOSE OF AS *
1	1	EA	51-0100-475 PHOSPHORIC ACID			#2
2	35	C	54-2160-248 FORMS RL 248			#3
3	1	EA	57-4450-140 GLASS			#5
4	3	EA	57-1292-055 GLASS GROUND JOINT			#5
5	260	EA	16-0001-001 16 CALAGOOG			#5
6	1	EA	57-0760-100 GRADUATED CYLINDER GLASS			#5
7	1	EA	17-4860-940 LAMPS 200 WATT			#5
8.	2	EA	12-7310-002 OIL			#5
9.	1	EA	57-1026-250 FLASK			#5
10	1	EAS	18-2693-150 FILM			#2
11	1	BOX	53-7570-113 RIBBONS			#2
12						

* DISPOSITION SYMBOLS: 1. — EXCESS 2. — SALVAGE 3. — SCRAP 4. — BURY 5. — DESTROY 6. — OTHER (EXPLAIN)

REASON FOR DISPOSAL (IF CONTAMINATED, ATTACH RADIATION SURVEY REPORT.)

1. OLD - SOLIDIFIED
2. OLD REVISION
3. BROKEN WHEN RECEIVED
4. BROKEN WHEN RECEIVED
5. OLD REVISION*
6. BROKEN WHEN RECEIVED
7. BROKEN WHEN RECEIVED
8. BROKEN IN HANDLING
9. BROKEN WHEN RECEIVED
10. DEFECTIVE
11. DAMAGED IN HANDLING

*** CERTIFIED TO BE FREE OF CONTAMINATION:
SIGNED: M.C. Thompson
M.C. THOMPSON, MR WAREHOUSING AND DISTRIBUTION

THE PROPERTY LISTED ABOVE — ☐ IS ☒ IS NOT — TOXIC OR HAZARDOUS TO HUMANS, ANIMALS, THE ENVIRONS

COMPONENT		DATE	LOCATION OF MATERIAL
MATERIAL - WAREHOUSING AND DISTRIBUTION		4-28-82	
ORIGINATOR: M.C. Thompson M.C. THOMPSON	BUILDING: 1166	PHONE: 376-7110	LOCATION OF BURIAL
RM CLEARANCE FOR PUBLIC SALE: M.C. Thompson	SURVEY NO.: VR	DATE	
SIGNATURE OF REQUESTING AUTHORITY: M.C. Thompson M.C. THOMPSON			

PART II — INVESTIGATION

AN INVESTIGATION HAS BEEN MADE AND DISPOSITION INSTRUCTIONS HAVE BEEN NOTED IN PART I ABOVE.

BY	DATE
J. L. Burke	5/13/82

PART III — DISPOSITION RECEIPT

BY	DATE
[illegible]	5/13/82
DISPOSED OF PER INSTRUCTIONS IN PART I (BY)	DATE

NOTE: THE SIGNATURE FOR RM CLEARANCE AND THE SURVEY NUMBER MUST BE OBTAINED THE SAME DAY AS THE ARRIVAL OF THE PROPERTY AT THE STORES SALE YARD.

PART IV — APPROVAL

DISPOSITION OF THE ABOVE PROPERTY OR MATERIALS IN ACCORDANCE WITH THE ABOVE RECOMMENDATIONS IS APPROVED.

SIGNATURE OF APPROVING OFFICIAL	DATE
[illegible]	[illegible]

PART V — INVENTORY CONTROL

IN THE CASE OF INVENTORY MATERIALS DESIGN BY ITEM NUMBER ABOVE ACCOUNT TO BE RELIEVED AND OFFSETTING ACCOUNT TO BE CHARGED.

ITEM NO.	DEBIT ACCOUNT	CREDIT ACCOUNT
[illegible]		

94-3000-217 (4-78)

0000015

MEMORANDUM COPY

1-17

REQUEST FOR DISPOSAL OF NONRADIOACTIVE HAZARDOUS MATERIAL

INSTRUCTIONS

Complete this request by providing all available information in the spaces provided. Fold, staple, and return completed form by plant mail to Environmental Protection.

I. CUSTODIAN

NAME Jim Kneiszel TELEPHONE 6-6764

BUILDING/AREA 1169 Bldg. / 1100 Area

II. IDENTIFICATION OF MATERIAL

TRADE NAME Phosphoric Acid

CHEMICAL NAME Same

STORAGE LOCATION 1169 Bldg. (Acid House)

CONTAMINATED WITH RADIOACTIVE MATERIAL? YES ____ NO ✓

III. PACKAGING

LIQUID ____ SOLID ____ GAS ____

NUMBER OF CONTAINERS 1 WEIGHT ____ EA. VOLUME ____ EA.

TYPE OF CONTAINER ____ AGE OF CONTAINER ____

IV. REASON FOR DISPOSAL

Old - Crystallized

V. DATE DISPOSAL REQUIRED

ASAP

VI. COMMENTS

Attached PDR # RHO-82-270.

APPROVED FOR DISPOSAL
BY [signature]
DATE January 21, 1983

DISPOSAL LOCATION Chemical Trench
BY D E Phelps
DATE 3-21-83

0000016

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy of duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER

ONSITE 3068-1

TO:	FROM:
T/S/D FACILITY [illegible]	Generator [illegible]
E.P.A. ID Code No. WA 749-000-[illegible]	E.P.A. ID Code No. WA 749-000-[illegible]
Address	Address [illegible]
Destination [illegible]	Origin [illegible]
Phone N/A	Phone [illegible]

No. Shipping Units	D.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. Ind. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
1	[illegible], WASTE [illegible]	[illegible]	[illegible]		<10 [illegible]	[illegible]

PLACARDS REQUIRED

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding $ _____ Per _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement: The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of Consignor)

FREIGHT CHARGES
PREPAID ☒ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)	EMERGENCY RESPONSE INFORMATION
T/S/D FACILITY N/A	CONTACT Name [illegible]
E.P.A. ID Code No.	Phone [illegible]
Address	National Response Center 1-800-424-8802
Destination	in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature [illegible] Date 3-4-83

TRANSPORTER #1 [illegible] E.P.A. ID No. [illegible]
Address [illegible]
City _____ State _____ Zip _____ Phone [illegible]

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature _____ Date _____

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature _____ Date [illegible]

TREATMENT/STORAGE/DISPOSAL FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.

T/S/D FACILITY Signature _____ Date _____

COPY 0000017

Rockwell

REQUEST FOR DISPOSAL OF NONRADIOACTIVE HAZARDOUS MATERIAL

2-7

INSTRUCTIONS

Complete this request by providing all available information in the spaces provided. Fold, staple, and return completed form by plant mail to Environmental Protection.

I. CUSTODIAN

NAME M.C. Thompson TELEPHONE 6-7110

BUILDING/AREA 1166 / 1100

II. IDENTIFICATION OF MATERIAL

TRADE NAME Stock # 51-0100-475

CHEMICAL NAME Phosphoric Acid

STORAGE LOCATION Acid House - 1100 area

CONTAMINATED WITH RADIOACTIVE MATERIAL? YES ____ NO ✓

III. PACKAGING

LIQUID ✓ SOLID ____ GAS ____

NUMBER OF CONTAINERS 1 WEIGHT ____ EA. VOLUME ____ EA.

TYPE OF CONTAINER ____ AGE OF CONTAINER ____

IV. REASON FOR DISPOSAL

Old - solidified/crystalized

V. DATE DISPOSAL REQUIRED

ASAP

VI. COMMENTS

See attached PDR # 82-270

Land Fill at Chemical Trench/Central Landfill

APPROVED FOR DISPOSAL
BY [signature]
DATE March 7, 1983

DISPOSAL LOCATION Chemical Trench
BY ____
DATE ____

Called talked to Jean Zhe will cl w/Mar L

3-21-83?

0000057

REQUEST FOR DISPOSAL OF NONRADIOACTIVE HAZARDOUS MATERIAL

INSTRUCTIONS

Complete this request by providing all available information in the spaces provided. Fold, staple, and return completed form by plant mail to Environmental Protection.

I. CUSTODIAN

NAME Jim Kreiszel TELEPHONE 6-6764

BUILDING/AREA 1169 Bldg. / 1100 Area

II. IDENTIFICATION OF MATERIAL

TRADE NAME Phosphoric Acid

CHEMICAL NAME Same

STORAGE LOCATION 1169 Bldg. (Acid House)

CONTAMINATED WITH RADIOACTIVE MATERIAL? YES ____ NO ✓

III. PACKAGING

LIQUID ____ SOLID ____ GAS ____

NUMBER OF CONTAINERS 1 WEIGHT ____ EA. VOLUME ____ EA.

TYPE OF CONTAINER ____ AGE OF CONTAINER ____

IV. REASON FOR DISPOSAL

Old - Crystallized

V. DATE DISPOSAL REQUIRED

ASAP

VI. COMMENTS

Attached PDR # RHO-82-270.

APPROVED FOR DISPOSAL BY Tom R. Cox

DATE January 21, 1983

DISPOSAL LOCATION Chemical Trench

BY D E Fisher

DATE 3-21-83

000255

HAZARDOUS WASTE MANIFEST

THIS SHIPPING ORDER must be legibly filled in, in Ink, in Indelible Pencil, or in Carbon, and retained by the Agent.

MANIFEST DOCUMENT NUMBER: ONSITE 3068-1

TO:		FROM:	
T/S/D FACILITY	Hanford Central Landfill	Generator	Rockwell Material
E.P.A. ID Code No.	WA 789-000-8967	E.P.A. ID Code No.	WA-789-000-8967
Address		Address	Bldg 1166, Stores
Destination	Chemical Trench	Origin	Store Stall
Phone	N/A	Phone	6-7110

No. Shipped	DOT PROPER SHIPPING NAME	HAZARD CLASS	[illegible]	[illegible]	WEIGHT	LABELS REQUIRED (or Exemption No.)
1	Phosphoric Acid, WASTE 1 Each 1 Sealed Glass Bottle	Corrosive Material	UN 1805		<10lbs	Corrosive

PLACARDS REQUIRED NONE

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding $_____ Per _____

[illegible]

(Signature of Consignor)

FREIGHT CHARGES: PREPAID ☒ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted [illegible] and condition of contents of packages, [illegible] marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY N/A
E.P.A. ID Code No.
Address
Destination

EMERGENCY RESPONSE INFORMATION

CONTACT Name Gary Cox
Phone 3-3679

National Response Center 1-800-424-8802
In D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature [signature] Date 3-9-83

TRANSPORTER #1 John Wayne Corr E.P.A. ID No. WA-789-000-8967
Address 1171
City State Zip Phone 376-6657

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature Date

TRANSPORTER #2 E.P.A. ID No.
Address
City State Zip Phone

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature Date 3-21-83

TREATMENT/STORAGE/DISPOSAL FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.

T/S/D FACILITY Signature 105 Pipe Chemical Trench Date 3-21-83

TRANSPORTER #1 COPY 000258

HAZARDOUS WASTE

DISPOSAL PACKET NUMBER

P83-012

E 69792 / 6320 Rockwe

REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

2/3

I. GENERATION: The Generator should complete Part I and forward this form to: WS&DT 202-S/200 West Rockwell

A. Generator's Name: G. Burch Phone: 3-2484 Address: 2225 200W Company: Rockwell

B. Custodian's Name: _____ Phone: _____ Address: _____ Company: _____

C. Waste Description: (If more than five items, attach additional sheets)

	Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One) Sol.	Liq.	Gas	Hazard Class
#2	1. gasoline	170 ml	glass	2		✓		
x	2. xylene	4000 ml	glass	12		✓		
x	3. toluene	1850 ml	glass	3		✓		
x	4. cyclohexane	1000 ml	glass	2		✓		
	5. ~~[illegible]~~	~~[illegible]~~	~~glass~~			✓		

D. Have appropriate labels been affixed to containers? _____ Not required _____

E. Have efforts been made to recycle (e.g., excess) waste? _____

F. Has waste been treated in any manner? _____ If so, how? _____

G. Storage Location: _____

H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: _____

Generator's Signature: Gayle Burch Date: 12-6-82

II. APPROVAL

A. Approved for disposal by Name: Gary R. Cox Phone: 3-3679 Address: 202-S/200-W Co.: Rockwell

Date: March 3, 1983 Signature: Gary R. Cox

B. Packaging Requirements (specify): Already in storage at 2727-S Bldg. (Offsite Shipment (Bldg)

C. Disposal Location: X Chemical Trench, _____ Asbestos Trench,

(check one) _____ 212-P (Storage), _____ Other

III. TRANSPORTATION/DISPOSAL

A. Transporter(s) Name: John W. Case Phone: 36654 Address: 1171 Company RHO

B. Date Transported/Disposed: 3/21/83

C. Transporter(s) Signature: John Wayne Case

0000054

D E Phelps Chemical Trench 3-21-83

SC-6700-174.1 (N-1-82)

	Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One) Sol.	Liq.	Gas	Hazard Class
	6. tetra-n-propyl ~~Ammonium~~ hydroxide	40 ml	poly bottle	1		✓		
	7. Di-n-butyl sulfoxide	400 ml	glass	4		✓		
X	8. 2,4,-D-amine	100 ml	poly	1		✓		
X	9. Dicamba	200 ml	poly	1		✓		
X	10. Treflan	200 ml	poly	1		✓		
	11. ~~[illegible]~~	~~[illegible]~~	~~[illegible]~~	1		✓		
X	12. Tordon	200 ml	poly	1		✓		
	13. 50% Hydrogen Peroxide	500 ml	poly	1		✓		
#3	14. Type B Polymer holdup	200 ml	poly	1		✓		
	15. Type A Polymer	200 ml	poly	1		✓		
	16.							
	17.							
	18.							
	19.							
	20.							
	21.							
	22.							
	23.							
	24.							
	25.							
	26.							
	27.							
	28.							
	29.							
	30.							
	31.							
	32.							
	33.							
	34.							

0000055

SC-5700-174.2 (N-1-82)

REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

I. GENERATION: The Generator should complete Part I and forward this form to: WS&DT, 202-S/200 West, Rockwell

A. Generator's Name: G. Burch Phone: 3-2484 Address: 222 S 200W Company: Rockwell

B. Custodian's Name: _____ Phone: _____ Address: _____ Company: _____

C. Waste Description: (If more than five items, attach additional sheets)

	Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One) Sol.	Liq.	Gas	Hazard Class
#2	1. gasoline	170 ml	glass	2		✓		
x	2. xylene	4000 ml	glass	12		✓		
x	3. toluene	1000 ml	glass	3		✓		
+	4. cyclohexane	1000 ml	glass	2		✓		
	5. ~~[illegible]~~	~~[illegible]~~	~~glass~~	~~[illegible]~~		✓		

D. Have appropriate labels been affixed to containers? _____ Not required _____

E. Have efforts been made to recycle (e.g., excess) waste? _____

F. Has waste been treated in any manner? _____ If so, how? _____

G. Storage Location: _____

H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: _____

Generator's Signature: Gayle Burch Date: 12-6-82

II. APPROVAL

A. Approved for disposal by Name: Gary R. Cox Phone: 3-3679 Address: 202-S/200-W Co.: Rockwell

Date: March 3, 1983 Signature: Gary R. Cox

B. Packaging Requirements (specify): Already in storage at 2727-S Bldg. (Offsite Shipment (Bldg.)

C. Disposal Location: X Chemical Trench, _____ Asbestos Trench,

(check one) _____ 212-P (Storage), _____ Other

III. TRANSPORTATION/DISPOSAL

A. Transporter(s) Name: John W. Carr Phone: 86654 Address: 1171 Company: RHO

B. Date Transported/Disposed: 3/21/83

C. Transporter(s) Signature: John Edwyne Carr

D E Phelps Chemical Trench 3-21-83

SC-5700-174.1 (N-1-82)

000251

	Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One) Sol.	Liq.	Gas	Hazard Class
#1	6. tetra-n-propyl ammonium hydroxide	40 ml	poly bottle	1		✓		
	7. Di-n-butyl sulfoxide	400 ml	glass	4		✓		
X	8. 2,4-D-amine	100 ml	poly	1		✓		
X	9. Dicamba	200 ml	poly	1		✓		
X	10. Treflan	200 ml	poly	1		✓		
	11. ~~[illegible]~~	~~[illegible]~~	~~[illegible]~~	1		✓		
X	12. Tordon	200 ml	poly	1		✓		
	13. 50% Hydrogen Peroxide	500 ml	poly	1		✓		
#3	14. Type B Polymer holdup	200 ml	poly	1		✓		
	15. Type A Polymer	200 ml	poly	1		✓		
	16.							
	17.							
	18.							
	19.							
	20.							
	21.							
	22.							
	23.							
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	29.							
	30.							
	31.							
	32.							
	33.							
	34.							

RF-5700-174.2 (N-1-82)

REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

I. GENERATION: The Generator should complete Part I and forward this form to: WS&DT 202-S/200 West Rockwell

A. Generator's Name: G. Burch Phone: 3-2484 Address: 222 S 200W Company: Rockwell

B. Custodian's Name: _____ Phone: _____ Address: _____ Company: _____

C. Waste Description: (If more than five items, attach additional sheets)

	Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One) Sol.	Liq.	Gas	Hazard Class
#2	1. gasoline	170 ml	glass	2		✓		
x	2. xylene	4800 ml	glass	12		✓		
x	3. toluene	1800 ml	glass	3		✓		
+	4. cyclohexane	1000 ml	glass	2		✓		
	5. ~~[illegible]~~	~~[illegible]~~	~~[illegible]~~	~~[illegible]~~		✓		

D. Have appropriate labels been affixed to containers? _____ Not required _____

E. Have efforts been made to recycle (e.g., excess) waste? _____

F. Has waste been treated in any manner? _____ If so, how? _____

G. Storage Location: _____

H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: _____

Generator's Signature: Gayle Burch Date: 12-6-82

II. APPROVAL

A. Approved for disposal by Name: Gary R. Cox Phone: 3-3679 Address: 202-S/200-W Co.: Rockwell

Date: March 3, 1983 Signature: Gary R. Cox

B. Packaging Requirements (specify): Already in storage at 2727-S Bldg. (Offsite Shipment (Bldg.)

C. Disposal Location: X Chemical Trench, _____ Asbestos Trench,

(check one) _____ 212-P (Storage), _____ Other

III. TRANSPORTATION/DISPOSAL

A. Transporter(s) Name: John W. Case Phone: 86654 Address: 1171 Company: RHO

B. Date Transported/Disposed: 3/21/83

C. Transporter(s) Signature: John Wayne Case

D E Phelps Chemical Trench 3-21-83

SC-6700-174.1 (N-1-82)

000253

	Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One) Sol.	Liq.	Gas	Hazard Class
#1	tetra-n-propyl ammonium hydroxide	40 ml	poly bottle	1		✓		
1	7. Di-n-butyl sulfoxide	400 ml	glass	4		✓		
X	8. 2,4,5-D-amine	100 ml	poly	1		✓		
X	9. Dicamba	200 ml	poly	1		✓		
X	10. Treflan	200 ml	poly	1		✓		
	11. ~~[illegible]~~	~~[illegible]~~	~~[illegible]~~	1		✓		
X	12. Tordon	200 ml	poly	1		✓		
	13. 50% Hydrogen Peroxide	500 ml	poly	1		✓		
#3	14. Type B Polymer holdup	200 ml	poly	1		✓		
	15. Type A Polymer	200 ml	poly	1		✓		
	16.							
	17.							
	18.							
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	31.							
	32.							
	33.							
	34.							

SC

000254

DISPOSAL PACKET NUMBER

P83-013

Rockwell

REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

2-9

I. GENERATION: The Generator should complete Part I and forward this form to: WS&DT 202-S/200 West Rockwell

A. Generator's Name: W.W. TAYLOR Phone: 6-1514 Address: 1166/1100 Company: ROCKWELL

B. Custodian's Name: J.F. KNEISZEL Phone: 6-1514 Address: 1169 Company: ROCKWELL

C. Waste Description: (If more than five items, attach additional sheets)

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One) Sol.	Liq.	Gas	Hazard Class
1. AMMONIUM FLUORIDE	2 GAL	PLASTIC	2		X		UNKNOWN
2.							
3.							
4.							
5							

D. Have appropriate labels been affixed to containers? _____ Not required X

E. Have efforts been made to recycle (e.g., excess) waste? NO

F. Has waste been treated in any manner? NO If so, how? N/A

G. Storage Location: 1169 /1100 ACID STORAGE BUILDING

H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: _____

Generator's Signature: W.W. TAYLOR W W Taylor Date: 3-10-83

II. APPROVAL

A. Approved for disposal by Name: G.R. Cox Phone: 3-3679 Address 202-S/200-W Co.: Rockwell

Date: March 14, 1983 Signature: G.R. Cox

B. Packaging Requirements (specify): None

C. Disposal Location: X Chemical Trench, _____ Asbestos Trench,

(check one) _____ 212-P (Storage), _____ Other

III. TRANSPORTATION/DISPOSAL

A. Transporter(s) Name: John W Carr Phone: 66651 Address: 1171 Company RHO

B. Date Transported/Disposed: 3/21/83

C. Transporter(s) Signature: John Wayne Carr

0000055

D E Phelps Chemical Trench 3-21-83

SC-6700-174.1 (N-1-82)

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy of duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER

ONSITE 3075-1

TO: HANFORD CENTRAL LANDFILL T/S/D FACILITY	FROM: ROCKWELL MATERIAL Generator
E.P.A. ID Code No. WA-789-000-8967	E.P.A. ID Code No. WA-789-000-8967
Address	Address 1166 BUILDING/1100 AREA
Destination CHEMICAL TRENCH	Origin HOT STORES STOCK
Phone N/A	Phone 376-7110

Containers	DOT PROPER SHIPPING NAME	HAZARD CLASS	DOT ID No.	EPA Haz Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
2	AMMONIUM FLUORIDE 2 EACH 1 GAL.	ORM-B	UN2505		14 LBS	POISON
	PLASTIC JUG					

PLACARDS REQUIRED NONE

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding

$_____ Per _____

FREIGHT CHARGES PREPAID ☐ COLLECT ☐

RECEIVED subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classifications and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY N/A
E.P.A. ID Code No. _____
Address _____
Destination _____

EMERGENCY RESPONSE INFORMATION

CONTACT Name GARY COX
Phone 373-3679

National Response Center 1-800-424-8802
in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature W.W. TAYLOR Date 3-16-88

TRANSPORTER #1 _____ E.P.A. ID No. WA-789-000-8967
Address 1172
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature _____ Date _____

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.

T/S/D FACILITY Signature _____ Date _____

T/S/D F COPY

0000059

REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

I. GENERATION: The Generator should complete Part I and forward this form to: WS&DT 202-S/200 West Rockwell

A. Generator's Name: W.W. TAYLOR Phone: 6-1514 Address: 1166/1100 Company: ROCKWELL

B. Custodian's Name: J.F. KNEISZEL Phone: 6-1514 Address: 1169 Company: ROCKWELL

C. Waste Description: (If more than five items, attach additional sheets)

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One) Sol.	Liq.	Gas	Hazard Class
1. AMMONIUM FLUORIDE	2 GAL	PLASTIC	2		X		UNKNOWN
2.							
3.							
4.							
5.							

D. Have appropriate labels been affixed to containers? _____ Not required X

E. Have efforts been made to recycle (e.g., excess) waste? NO

F. Has waste been treated in any manner? NO If so, how? N/A

G. Storage Location: 1169 /1100 ACID STORAGE BUILDING

H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: _____

Generator's Signature: W.W. TAYLOR W W Taylor Date: 3-10-83

II. APPROVAL

A. Approved for disposal by Name: G.R. Cox Phone: 3-3679 Address: 202-S/200-W Co.: Rockwell

Date: March 14, 1983 Signature: R. Cox

B. Packaging Requirements (specify): None

C. Disposal Location: X Chemical Trench, _____ Asbestos Trench,

(check one) _____ 212-P (Storage), _____ Other

III. TRANSPORTATION/DISPOSAL

A. Transporter(s) Name: John W Cox Phone: 66654 Address: 1121 Company RHO

B. Date Transported/Disposed: 3/21/83

C. Transporter(s) Signature: John Elayne Cox

D E Phelps Chemical Trench 3-21-83

BC-6700-174.1 (N-1-82)

000256

THIS SHIPPING ORDER

Must be legibly filled in, in ink, in indelible Pencil, or in Carbon, and retained by the Agent.

MANIFEST DOCUMENT NUMBER

ONSITE 3075-1

TO: HANFORD CENTRAL LANDFILL T/S/D FACILITY	FROM: ROCKWELL MATERIAL Generator
E.P.A. ID Code No. WA-789-000-8967	E.P.A. ID Code No. WA-789-000-8967
Address	Address 1166 BUILDING/1100 AREA
Destination CHEMICAL TRENCH	Origin NOT STORES STOCK
Phone N/A	Phone 376-7110

Number and Kind of Containers	DOT PROPER SHIPPING NAME	HAZARD CLASS	Identification No.	Packing Group	WEIGHT	LABELS REQUIRED (or Exemption No.)
2	AMMONIUM FLUORIDE 2 EACH 1 GAL. PLASTIC JUG	ORM-B	UN2505		14 LBS	POISON

PLACARDS REQUIRED NONE

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding

$ _____ Per _____

Shipper to furnish if or the shipment, of this material to be as authorized in the emergency response guidebook or the emergency, the contractor shall stop the vehicle to determine.

The carrier shall not make delivery of this shipment without receipt of freight and all other lawful charges.

Shipper or Consignee

FREIGHT CHARGES PREPAID ☐ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed, as to each carrier of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY N/A

E.P.A. ID Code No. _____

Address _____

Destination _____

EMERGENCY RESPONSE INFORMATION

CONTACT Name GARY COX

Phone 373-3679

National Response Center 1-800-424-8802

In D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature W.W. TAYLOR W W Taylor Date 3-16-88

TRANSPORTER #1 John Wayne Cass E.P.A. ID No. WA-789-000-8967

Address 1171

City _____ State _____ Zip _____ Phone 3766654

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature _____ Date _____

TRANSPORTER #2 _____ E.P.A. ID No. _____

Address _____

City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.

T/S/D FACILITY Signature [illegible] Date [illegible]

TRANSPORTER #1 COPY

000257

US WASTE HAZ

DISPOSAL PACKET NUMBER

P83-014

Rockwell

REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

I. GENERATION: The Generator should complete Part I and forward this form to: WS&DT 202-S/200 West Rockwell

A. Generator's Name: Mike Malarch Phone: 66654 Address: 1100 Dorm Company: Rockwell

B. Custodian's Name: Mike Malarche Phone: 66654 Address: 1100 Atlas Company: Rock

C. Waste Description: (If more than five items, attach additional sheets)

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One) Sol.	Liq.	Gas	Hazard Class
1. Empty Pesticide Containers	108	Paper					NON
2.							
3.							
4.							
5.							

D. Have appropriate labels been affixed to containers? _____ Not required ✓

E. Have efforts been made to recycle (e.g., excess) waste? N/A.

F. Has waste been treated in any manner? NA If so, how? N/A

G. Storage Location: 4 Barrel Cadu Chemical Storage Shed.

H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: _____

Generator's Signature: [signature] Date: 3/29/83

II. APPROVAL

A. Approved for disposal by Name: G. R. Cox Phone: 3-3679 Address: 202-S/200-W Co.: Rockwell

Date: 2/25/83 Signature: Gary R. Cox

B. Packaging Requirements (specify): N/A

C. Disposal Location: X Chemical Trench, _____ Asbestos Trench,

(check one) _____ 212-P (Storage), _____ Other

D E Phelps Chemical Trench 3-29-83

III. TRANSPORTATION/DISPOSAL

Transporter(s) Name: John W. Carr Phone: 66654 Address: 1101 Company RHO

B. Date Transported/Disposed: 3/29/83

C. Transporter(s) Signature: John Wayne Carr

0000187

BC-6700-174.1 (N-1-82)

REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

I. GENERATION: The Generator should complete Part I and forward this form to: WS&DT 202-S/200 West Rockwell

A. Generator's Name: Mike Malarch Phone: 66654 Address: 1100 Norris Company: Rockwell

B. Custodian's Name: Mike Malarche Phone: 66654 Address: 1100 Atlas Company: Rwk

C. Waste Description: (If more than five items, attach additional sheets)

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One) Sol.	Liq.	Gas	Hazard Class
1. Empty Pesticide Containers	103	Paper					N.A.
2.							
3.							
4.							
5.							

D. Have appropriate labels been affixed to containers? _____ Not required ✓

E. Have efforts been made to recycle (e.g., excess) waste? N.A.

F. Has waste been treated in any manner? NA If so, how? N.A.

G. Storage Location: 4 Barrel Cable Chemical Storage Shed.

H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: _____

Generator's Signature: [signature] Date: 3/29/83

II. APPROVAL

A. Approved for disposal by Name: G. R. Cox Phone: 3-3679 Address: 202-S/200-W Co.: Rockwell

Date: 2/25/83 Signature: Gary R. Cox

B. Packaging Requirements (specify): N/A

C. Disposal Location: X Chemical Trench, _____ Asbestos Trench,

(check one) _____ 212-P (Storage), _____ Other

D E Phelps Chemical Trench 3-29-83

III. TRANSPORTATION/DISPOSAL

A. Transporter(s) Name: John W. Carr Phone: 66654 Address: 1101 Company: RHO

B. Date Transported/Disposed: 3/29/83

C. Transporter(s) Signature: John Wayne Carr

(N-1-82)

000200

DISPOSAL PACKET NUMBER

P83-015

4-5-83

REQUEST FOR DISPOSAL OF NONRADIOACTIVE HAZARDOUS MATERIAL

INSTRUCTIONS

Complete this request by providing all available information in the spaces provided. Fold, staple, and return completed form by plant mail to Environmental Protection.

I. CUSTODIAN

NAME B.H. Clark TELEPHONE 3-2355

BUILDING/AREA 284E - 200E

II. IDENTIFICATION OF MATERIAL

TRADE NAME Asbestos

CHEMICAL NAME "

STORAGE LOCATION 2101M

CONTAMINATED WITH RADIOACTIVE MATERIAL? YES ____ NO ✓

III. PACKAGING

LIQUID ____ SOLID ✓ GAS ____

NUMBER OF CONTAINERS ____ WEIGHT ____ EA. VOLUME 230 EA.

TYPE OF CONTAINER Dumpster AGE OF CONTAINER ____

IV. REASON FOR DISPOSAL

Removed Insulation

V. DATE DISPOSAL REQUIRED

ASAP

VI. COMMENTS

Asbestos is in Plastic bags Stored in Dumpster

APPROVED FOR DISPOSAL BY [illegible]

DATE 4/4/83

DISPOSAL LOCATION Asbest trench

BY D.E. Fisher

DATE 4-4-83

000190

DISPOSAL PACKET NUMBER

P83-016

Rockwell

REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

2-27

I. GENERATION: The Generator should complete Part I and forward this form to: WS&DT, 202-S/200 West, Rockwell

A. Generator's Name: D.D. ROUNTRY Phone: 3 2108 Address: 202-S/200W Company: ROCKWELL

B. Custodian's Name: E.P. THOMPSON Phone: 3 2394 Address: 279 WA/200W Company: ROCKWELL

C. Waste Description: (If more than five items, attach additional sheets)

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One) Sol.	Liq.	Gas	Hazard Class
1. 2,4-D AMINE	3	55 GALLON METAL	3				*
2. 2,4-D AMINE	12	3.0 GALLON METAL	12				*
3. MISCELLANEOUS	2	DOUBLE-WRAPPED IN PLASTIC BAGS	2				
4. HERBICIDE CONTAMINATED							
5 RAGS, RESPIRATOR CARTRIDGES, ETC.							

D. Have appropriate labels been affixed to containers? YES Not required ____

E. Have efforts been made to recycle (e.g., excess) waste? NO

F. Has waste been treated in any manner? YES If so, how? *TRIPLE-RINSED CONTAINERS

G. Storage Location: 275-EA WAREHOUSE

H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: NOT APPLICABLE

Generator's Signature: D D Rountry Date: 4-5-83

II. APPROVAL

A. Approved for disposal by Name: Gary R. Cox Phone: 3-3679 Address 202-S/200-W Co.: Rockwell

Date: April 5, 1983 Signature: Gary R. Cox

B. Packaging Requirements (specify): None

C. Disposal Location: X Chemical Trench, ____ Asbestos Trench,

(check one) ____ 212-P (Storage), ____ Other

III. TRANSPORTATION/DISPOSAL

A. Transporter(s) Name: H J Murphy Phone 6654 Address: 1171 Company PHS

B. Date Transported/Disposed: 11-12-83

C. Transporter(s) Signature: H J Murphy

0000072

RG-6700-174.1 (N-1-82)

Rockwell

REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

2-27

GENERATION: The Generator should complete Part I and forward this form to: WS&DT 202-S/200 West Rockwell

A. Generator's Name: D.D. ROUNTRY Phone: 32108 Address: 202-S/200W Company: ROCKWELL

B. Custodian's Name: E.P. THOMPSON Phone: 32394 Address: 2719 WA/200W Company: ROCKWELL

C. Waste Description: (If more than five items, attach additional sheets)

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One) Sol.	Liq.	Gas	Hazard Class
1. FENAMINE	44	2.5 GALLON PLASTIC	44				*
2. BANVEL	12	2.5 GALLON PLASTIC	12				*
3. R-11	2	1.0 GALLON PLASTIC	2				*
4. R-11	12	5.0 GALLON PLASTIC	12				*
5. FENAMINE	10	5.0 GALLON PLASTIC	10				*

D. Have appropriate labels been affixed to containers? YES Not required _____

E. Have efforts been made to recycle (e.g., excess) waste? NO

F. Has waste been treated in any manner? YES If so, how? * TRIPLE-RINSED CONTAINERS

G. Storage Location: 275-EA WAREHOUSE

H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: NOT APPLICABLE

Generator's Signature: D.D. Rountry Date: 4-5-83

II. APPROVAL

A. Approved for disposal by Name: Gary R. Cox Phone: 3-3679 Address: 202-S/200-W Co.: Rockwell

Date: April 5, 1983 Signature: Gary R. Cox

B. Packaging Requirements (specify): None

C. Disposal Location: X Chemical Trench, _____ Asbestos Trench,

(check one) _____ 212-P (Storage), _____ Other

III. TRANSPORTATION/DISPOSAL

A. Transporter(s) Name: H 2-Mapley Phone: 66654 Address: 1171 Company: P.Ho.

B. Date Transported/Disposed: 4.12.83

C. Transporter(s) Signature: H 2-Mapley 66654 1171

0000073 BC-6700-174.1 (N-1-82)

DISPOSAL PACKET NUMBER

P83-017

HEHF

✓

REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

P1 of 2

2-15

GENERATION: The Generator should complete Part I and forward this form to: WS&DT, 202-S/200 West, Rockwell

A. Generator's Name: MK Hamilton Phone: 6-6980 Address: 747 Bldg Company: HEHF

B. Custodian's Name: Same Phone: _____ Address: _____ Company: _____

C. Waste Description: (If more than five items, attach additional sheets)

	Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One) Sol.	Liq.	Gas	Hazard Class
EHW	1. Acetonitrile	8.5 qt.	glass bottles	13		X		EHW - U003
	2. Sulfanilic Acid	11 lb.	"	11	X			
	3. Sulfanilamide	4 kg.	"	8	X			
	4. Potassium persulfate	500 g.	"	1	X			
	5. Chloramine T (cont.)	250 g	"	1	X			

D. Have appropriate labels been affixed to containers? X Not required _____ All original manufacturer's packaging except oils

E. Have efforts been made to recycle (e.g., excess) waste? yes - by RHO

F. Has waste been treated in any manner? No If so, how? _____

G. Storage Location: 747 Bldg.

H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: _____

Generator's Signature: Maureen K. Hamilton Date: 3-17-83

II. APPROVAL

A. Approved for disposal by Name: Gary R. Cox Phone: 3-3679 Address: 202-S/200-W Co.: Rockwell

Date: March 30, 1983 Signature: Gary R. Cox

B. Packaging Requirements (specify): Number 7 goes to 212-P for storage and offsite shipment. Numbers 1 & 6 go to 2727-S for storage and offsite shipment. #2, 3, 4, 5 to Chemical Trench.

C. Disposal Location: X Chemical Trench, _____ Asbestos Trench,

(check one) #7 212-P (Storage), 2727-S for offsite shipment Other

III. TRANSPORTATION/DISPOSAL

A. Transporter(s) Name: [illegible] Phone: 6-6654 Address: 1171 Company: RHO

B. Date Transported/Disposed: 4-14-83

C. Transporter(s) Signature: [illegible]

000006?

BC-6700-174.1 (N-1-82)

2-17-83 - P.2

HEHE

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One) Sol.	Liq.	Gas	Hazard Class
6. N-1-naphthylene diamine dihydrochloride	700g.	glass bottle	7	X			
7. Assorted oil (some with PCB - sent to EHS for analysis, mostly by EHS)	~7L	glass bottles - glass + plastic	36		X		
8. orthomethoxy phenol	400ml	glass	4		X		
9.							
10.							
11.							
12.							
13.							
14.							
15.							
16.							
17.							
18.							
19.							
20.							
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23.							
24							
25.							
26.							
27.							
28.							
29.							
30.							
31.							
32.							
33.							
34.							

0000063

SC-6700-174.2 (N-1-82)

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER

EZ87-003

TO:		FROM:	
T/S/D FACILITY	Rockwell Hanford Op.	Generator	Hanford Environmental Health Foundation
E.P.A. ID Code No.		E.P.A. ID Code No.	
Address	Chemical Trench/200W	Address	141 Bldg/100 Area
Destination		Origin	
Phone	373-3679	Phone	376-6900

No. of Containers	DOT PROPER SHIPPING NAME	HAZARD CLASS	Total Quantity	EPA Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
11	Sulfanilic acid				11 lb.	
8	Sulfanilamide				4 kg.	
1	Potassium persulfate				500 g.	
1	Chloramine T				250 g.	

PLACARDS REQUIRED

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding

$ _____ Per _____

Shipper or Consignor

FREIGHT CHARGES PREPAID ☐ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY Rockwell Hanford Op.
E.P.A. ID Code No. _____
Address 2025/200W
Destination _____

EMERGENCY RESPONSE INFORMATION

CONTACT Name Gary W. Cox
Phone 373-3679

National Response Center 1-800-424-8802
in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature [illegible] Date 4/14/87

TRANSPORTER #1 [illegible] E.P.A. ID No. _____
Address [illegible]
City [illegible] State [illegible] Zip [illegible] Phone [illegible]

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature [illegible] Date _____

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.

T/S/D FACILITY Signature _____ Date _____

T/S/D F COPY 0000064

DISPOSAL PACKET NUMBER

P83-018

2-29

REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

I. GENERATION: The Generator should complete Part I and forward this form to: WS&DT 202-S/200 West Rockwell

A. Generator's Name: M.C. THOMPSON Phone: 376-1073 Address: 1166/1100 Company: ROCKWELL

B. Custodian's Name: J.T. FOSS Phone: 376-6764 Address: 1169/1100 Company: ROCKWELL

C. Waste Description: (If more than five items, attach additional sheets)

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One) Sol.	Liq.	Gas	Hazard Class
1. MURIATIC ACID	5 GAL	PLASTIC	1		X		
2. HYDRAFLURORIC ACID	1 GAL	PLASTIC	1		X		
3.							
4.							
5.							

D. Have appropriate labels been affixed to containers? YES Not required

E. Have efforts been made to recycle (e.g., excess) waste? YES

F. Has waste been treated in any manner? NO If so, how?

G. Storage Location: 1169 BUILDING (ACID STORAGE WAREHOUSE)

H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number:

Generator's Signature: M.C. THOMPSON M C Thompson Date: 4-4-83

II. APPROVAL

A. Approved for disposal by Name: Gary R. Cox Phone: 3-3679 Address: 202-S/200 W Co.: Rockwell

Date: April 5, 1983 Signature: Gary R. Cox

B. Packaging Requirements (specify): Pack in absorbent

C. Disposal Location: X Chemical Trench, Asbestos Trench,

(check one) 212-P (Storage), Other

III. TRANSPORTATION/DISPOSAL

A. Transporter(s) Name: H. J. Mafey Phone: 66654 Address: 1171 Bl Company P.H.O.

B. Date Transported/Disposed: 5-4-83

C. Transporter(s) Signature: H. J. Mafey

0000074

R E Thelen Chemical Trench

BC-6700-174.1 (N-1-82)

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy of duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER

ONSITE 4097-1

TO: HANFORD CENTRAL LANDFILL T/S/D FACILITY	FROM: ROCKWELL MATERIAL Generator
E.P.A. ID Code No. WA-789-000-8967	E.P.A. ID Code No. WA-789-000-8967
Address	Address 1166 BUILDING/1100 AREA
Destination CHEMICAL TRENCH	Origin ROCKWELL
Phone N/A	Phone 376-7110

Containers No. & Type	DOT PROPER SHIPPING NAME	HAZARD CLASS	DOT Hazardous Substance ID No.	EPA Hazardous Waste Number	WEIGHT	LABELS REQUIRED (or Exemption No.)
1	ACID HYDROCHLOR TECH (PLASTIC)	CORROSIVE MATL	UN1789	5GAL	6 GAL/ 10 LBS	CORROSIVE
1	ACID HYDROFLU TECH (PLASTIC)	CORROSIVE MATL	UN1790		1 GAL/ 10 LBS	CORROSIVE

PLACARDS REQUIRED NONE

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding

$_____ Per _____

Shipper to Receive Full the consideration, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

_____
Signature of Consignor

FREIGHT CHARGES
PREPAID [XX] COLLECT [ ]

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY N/A
E.P.A. ID Code No. _____
Address _____
Destination _____

EMERGENCY RESPONSE INFORMATION

CONTACT Name GARY R. COX
Phone 373-3679

National Response Center 1-800-424-8802
In D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature N.C. THOMPSON Date 4-7-83

TRANSPORTER #1 _____ E.P.A. ID No. WA-789-000-8967
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 1 Signature _____ Date _____

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.
T/S/D FACILITY Signature _____ Date _____

T/S/D F COPY 0000075

13.0

REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

I. GENERATION: The Generator should complete Part I and forward this form to: WS&DT 202-S/200 West Rockwell

A. Generator's Name: M.C. THOMPSON Phone: 376-1073 Address: 1166/1100 Company: ROCKWELL

B. Custodian's Name: J.T. FOSS Phone: 376-6764 Address: 1169/1100 Company: ROCKWELL

C. Waste Description (If more than five items, attach additional sheets)

	Waste Name	Total Quantity	Type of Container	Number of Containers	(Check One) Sol.	Liq.	Gas	Hazard Class
1.	MURIATIC ACID	5 GAL	PLASTIC	1		X		
2.	HYDRAFLURORIC ACID	1 GAL	PLASTIC	1		X		
3.								
4.								
5.								

D. Have appropriate labels been affixed to containers? YES Not required _____

E. Have efforts been made to recycle (e.g., excess) waste? YES

F. Has waste been treated in any manner? NO If so, how? _____

G. Storage location: 1169 BUILDING (ACID STORAGE WAREHOUSE)

H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: _____

Generator's Signature: M.C. Thompson M.C. THOMPSON Date: 4-4-83

II. APPROVAL

A. Approved for disposal by Name: Gary R. Cox Phone: 3-3679 Address: 202-S/200 W Co.: Rockwell

Date: April 5, 1983 Signature: Gary R. Cox

B. Packaging Requirements (specify): Pack in absorbent

C. Disposal Location (check one): X Chemical Trench, _____ Asbestos Trench, _____ 212-P (Storage), _____ Other

III. TRANSPORTATION/DISPOSAL

A. Transporter(s) Name: H. J. Mafey Phone: 66654 Address: 1171 Bd Company: R.H.O.

B. Date Transported/Disposed: 5-4-83

C. Transporter(s) Signature: H. J. Mafey

D E Thelpe Chemical Trench

BC-6700-174.1 (N-1-82)

000242

HAZARDOUS WASTE MANIFEST

THIS SHIPPING ORDER must be legibly filled in, in ink, in indelible Pencil, or in Carbon, and retained by the Agent.

MANIFEST DOCUMENT NUMBER: ONSITE 4097-1

TO: HANFORD CENTRAL LANDFILL T/S/D FACILITY	FROM: ROCKWELL MATERIAL Generator
E.P.A. ID Code No. WA-789-000-8967	E.P.A. ID Code No. WA-789-000-8967
Address	Address 1166 BUILDING/1100 AREA
Destination CHEMICAL TRENCH	Origin [illegible]
Phone N/A	Phone 376-7110

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	[illegible]	EPA [illegible]	WEIGHT	LABELS REQUIRED (or Exemption No.)
1	ACID HYDROCHLOR TECH (PLASTIC)	CORROSIVE MATL	UN1789	5GAL	6 GAL/ 10 LBS	CORROSIVE
1	ACID HYDROFLU TECH (PLASTIC)	CORROSIVE MATL	UN1790		1 GAL/ 10 LBS	CORROSIVE

PLACARDS REQUIRED NONE

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding $ _____ Per _____

[illegible]

Shippers or Consignor

FREIGHT CHARGES PREPAID [XXX] COLLECT [ ]

RECEIVED subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY N/A
E.P.A. ID Code No. _____
Address _____
Destination _____

EMERGENCY RESPONSE INFORMATION

CONTACT Name GARY R. COX
Phone 373-3679
National Response Center 1-800-424-8802
In D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature X M.C. THOMPSON MC Thompson Date 4-7-83

TRANSPORTER #1 [illegible] E.P.A. ID No. WA-789-000-8967
Address [illegible]
City [illegible] State [illegible] Zip [illegible] Phone [illegible]

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature [illegible] Date [illegible]

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.

T/S/D FACILITY Signature [illegible] Chemical Trench Date 5-4-83

TRANSPORTER #1 COPY

000243

HAZARDOUS WASTE

DISPOSAL PACKET NUMBER

P83-019

E 000 ... 13.

REQUEST FOR DISPOSAL OF NONRADIOACTIVE HAZARDOUS MATERIAL

INSTRUCTIONS

Complete this request by providing all available information in the spaces provided. Fold, staple, and return completed form by plant mail to Environmental Protection.

I. CUSTODIAN

NAME Stan Jones TELEPHONE 373-2456

BUILDING/AREA 271 B 200E

II. IDENTIFICATION OF MATERIAL

TRADE NAME Asbestos

CHEMICAL NAME

STORAGE LOCATION North of 272 BB

CONTAMINATED WITH RADIOACTIVE MATERIAL? YES ____ NO X

III. PACKAGING

LIQUID ____ SOLID X GAS ____

NUMBER OF CONTAINERS 1 WEIGHT ____ EA. VOLUME ____ EA.

TYPE OF CONTAINER Load Lugger AGE OF CONTAINER ____

IV. REASON FOR DISPOSAL

Waste

V. DATE DISPOSAL REQUIRED

Soon

VI. COMMENTS

Wet down and double plastic bagged.

APPROVED FOR DISPOSAL
BY [signature]
DATE 4/28/83

DISPOSAL LOCATION Asbestos Pit Central Landfill Fill 1 [illegible]
BY D E [illegible]
DATE 5-4-83

000199

DISPOSAL PACKET NUMBER

P83-020

REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

1-34

I. GENERATION: The Generator should complete Part I and forward this form to: WS&DT, 202-S/200 West, Rockwell

A. Generator's Name: G.L. Gurwell Phone: 3-3490 Address: 2704-S, 200W Company: RHO

B. Custodian's Name: T.A. Lane Phone: 3-2426 Address: 234-5Z, 200W Company: RHO

C. Waste Description: (If more than five items, attach additional sheets)

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One) Sol.	Liq.	Gas	Hazard Class
1. BENZENE EHW reactive	7 pts.	GLASS	7		X		
2. P-DIOXANE reacts w/ oxidizer	2 gal.	GLASS	4-½ gal.		X		
3. 1-OCTANOL reacts w/ oxidizer	5½ gal	GLASS	5-½ GAL		X		
4. TOLUENE EHW reactive	6 pts	GLASS	6		X		
5. THERMITE Exp/.	~70 lbs	METAL CANS	~7	X			

D. Have appropriate labels been affixed to containers? _____ Not required Containers labelled.

E. Have efforts been made to recycle (e.g., excess) waste? Yes.

F. Has waste been treated in any manner? N/A. If so, how? _____

G. Storage Location: RM 179-B + Dock #5 234-5Z Facility.

H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: Will Be Surveyed.

Generator's Signature: G.L. Gurwell Date: February 1, 1983

II. APPROVAL

A. Approved for disposal by Name: G.R. Cox Phone: 3-3679 Address 202-S/200W Co.: RHO

Date: 2/10/83 Signature: Gary R. Cox

B. Packaging Requirements (specify): The Extremely Hazardous Waste must be packaged in one container for offsite shipment (#1,4,7); #2,3,6,8 may be packaged together for burial at the Central Landfill; #5 must separate and obtain the Manufacturers Data Sheet for.

C. Disposal Location: _____ Chemical Trench, _____ Asbestos Trench,

(check one) _____ 212-P (Storage), Offsite-Arlington, OR Other

III. TRANSPORTATION/DISPOSAL

a. Transporter(s) Name L. L. Davis Phone 66554 Address: 1171 Company Rock

b. Date Transported/Disposed: 5-5-83

c. Transporter(s) Signature: D.E. Phelps Chemical Trench

0000047

BC-6700-174.1 (N-1-82)

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One) Sol.	Liq.	Gas	Hazard Class
6. TRITON X-100 ★	2 qts.	GLASS	2		X		
7. TETRO CHLORO-ETHYLENE EHW	10 pts.	GLASS	10		X		
8. 1,2,4 TRICHLORO-BENZENE (reacts w/oxidizers)	~20 kgs	GLASS	19		X		
9.							
10.							
11. ★ alkylaryl polyether alcohol							
12.							
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1-3

0000048

BC-6700-174.2 (N-1-82)

DRUM # 2 — Central Lab

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One) Sol.	Liq.	Gas	Hazard Class
1. 1,2,4 TRICHLORO-BENZENE	19 Kgs	~QUART GLASS	19		X		13
2. TRITON X-100	2 qts.	QUART GLASS	2		X		
3. P-DIOXANE	2 gal.	½ gal JUG.	4		X		
9. 1-OCTANOL	4 Kg's	½ Gal. JUG	4		X		
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12.							
33.							
34.							

0000049

BC-6700-174.2 (N-1-82)

5-5-83

REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

I. GENERATION: The Generator should complete Part I and forward this form to: WS&DT, 202-S/200 West, Rockwell

A. Generator's Name: G.L. Gurwell Phone: 3-3490 Address: 2704-S, 200W Company: RHO

B. Custodian's Name: T.A. Lane Phone: 3-2426 Address: 234-5Z, 200W Company: RHO

C. Waste Description: (If more than five items, attach additional sheets)

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One) Sol.	Liq.	Gas	Hazard Class
1. Benzene EHW reactive w/ oxidizer	7 pts.	Glass	7		X		
2. P-Dioxane reactive w/ oxidizer	2 gal.	Glass	4-½ gal.		X		
3. 1-Octanol reactive w/ oxidizer	5½ gal	Glass	5-½ Gal.		X		
4. Toluene EHW reactive w/ oxidizer	6 pts	Glass	6		X		
5. Thermite Exp.	~70 lbs	Metal Cans	~7	X			

D. Have appropriate labels been affixed to containers? _____ Not required Containers labelled.

E. Have efforts been made to recycle (e.g., excess) waste? Yes.

F. Has waste been treated in any manner? N/A. If so, how? _____

G. Storage Location: RM 179-B + Dock #5 234-5Z Facility.

H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: Will Be Surveyed.

Generator's Signature: G.L. Gurwell Date: February 1, 1983

II. APPROVAL

A. Approved for disposal by Name: G.R. Cox Phone: 3-3679 Address 202-S/200W Co.: RHO

Date: 2/10/83 Signature: Gary R. Cox

B. Packaging Requirements (specify): The Extremely Hazardous Waste must be packaged in one container for offsite shipment (#1,4,7); #2,3,6,8 may be packaged together for burial at the Central Landfill; #5 hold separate and obtain the Manufacturers Data Sheet for.

C. Disposal Location: X Chemical Trench, _____ Asbestos Trench,

(check one) _____ 212-P (Storage), Offsite-Arlington OR Other

III. TRANSPORTATION/DISPOSAL

A. Transporter(s) Name L. G. Davis Phone 66584 Address: 1171 Company Rock

B. Date Transported/Disposed: 5-5-83

C. Transporter(s) Signature: D E Phelps Chemical Trench

0-6700-174.1 (N-1-82)

000238

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One) Sol.	Liq.	Gas	Hazard Class
6. TRITONX-100 *	2 qts	GLASS	2		X		
7. TETRA Chloro ETHYLENE EHW	10 pts	GLASS	10		X		
8. 1,2,4 TRICHLORO BENZENE	~20 Kgs	GLASS	19		X		
9. reactsw/oxidizers							
10.							
11. * Alkylaryl polyether alcohol							
12.							
13.							
14.							
15.							
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32.							
33.							
34.							

DRUM #- 2 — [illegible]

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One) Sol.	Liq.	Gas	Hazard Class
1. 1,2,4 TRICHLORO-BENZENE	19 Kgs	QUART GLASS	19		X		
2. TRITON X-100	2 qts.	QUART GLASS	2		X		
3. P-DIOXANE	2 gal.	½ gal JUG.	4		X		
4. 1-OCTANOL	4 Kg's	½ Gal. JUG	4		X		
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SC-6700-174.2 (N-1-82)

000240

DISPOSAL PACKET NUMBER

P83-021

REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

(3-1)

GENERATION: The Generator should complete Part I and forward this form to: WS&DT 202-S/200 West Rockwell

A. Generator's Name: N. W. Hoebel Phone: 3-2883 Address: 2101M/200 E. Company: Rockwell

B. Custodian's Name: V. L. Blanchard Phone: 3-2172 Address: 2101M/200 E. Company: Rockwell

C. Waste Description: (If more than five items, attach additional sheets)

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One) Sol.	Liq.	Gas	Hazard Class
1. Petroleum Distillates	8835 gr	aerosol can	31		X		Flammable
2. Ethyl Acetate	1500cc.	aerosol can	5		X		"
3. Petro. Solvent & alcohol	16.5 Oz	aerosol can	2		X		"
4. Met L Check Remover E-59	12oz	aerosol can	2		X		"
5. Petro. Distill. & Diethyl ether	3 oz.	aerosol can	1		X		"

D. Have appropriate labels been affixed to containers? Yes Not required

E. Have efforts been made to recycle (e.g., excess) waste? Yes

F. Has waste been treated in any manner? No If so, how?

G. Storage Location: 2701 M/200 East

H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: N/A

Generator's Signature: Nancy W. Hoebel Date: May 10, 1983

II. APPROVAL

A. Approved for disposal by Name: G.R. Cox Phone: 3-3679 Address: 202-S/200-W Co.: Rockwell

Date: May 11, 1983 Signature: G. R. Cox

B. Packaging Requirements (specify): Pack together for shipment to Central Landfill

C. Disposal Location: X Chemical Trench, Asbestos Trench,

(check one) 212-P (Storage), Other

III. TRANSPORTATION/DISPOSAL

Transporter(s) Name: RHO Phone: Address: Company

Date Transported/Disposed: 5/83: shipped (Per NW Hoebel conversation 6/26/85.)

C. Transporter(s) Signature:

0000093

SC-6700-174.1 (N-1-82)

DISPOSAL PACKET NUMBER

P83-022

2/17

REQUEST FOR DISPOSAL OF NONRADIOACTIVE HAZARDOUS MATERIAL

INSTRUCTIONS

Complete this request by providing all available information in the spaces provided. Fold, staple, and return completed form by plant mail to Environmental Protection.

I. CUSTODIAN M L McCollom

NAME M. L. McCollom TELEPHONE 376-6706

BUILDING/AREA 1167-A 1100

II. IDENTIFICATION OF MATERIAL

TRADE NAME See Attached List

CHEMICAL NAME

STORAGE LOCATION 1167- (4723)

CONTAMINATED WITH RADIOACTIVE MATERIAL? YES ____ NO X

III. PACKAGING

LIQUID ____ SOLID ____ GAS ____

NUMBER OF CONTAINERS ____ WEIGHT ____ EA. VOLUME ____ EA.

TYPE OF CONTAINER ____ AGE OF CONTAINER ____

IV. REASON FOR DISPOSAL

Not usable - No interest shown by other agencys, nor any public sale interest

V. DATE DISPOSAL REQUIRED

5-1-83

VI. COMMENTS

See attached list for disposition.

APPROVED FOR DISPOSAL
BY Gary R Cox
DATE March 28, 1983

DISPOSAL LOCATION Land Fill
BY D E Phelps Chemical Trench
DATE 5-12-83

0000065

CHEMICALS IN METAL BUILDING

2-17

DOE #	CHEMICAL	QUANTITY
1 * 5432-02	AMMONIA SOL. STRONG reacts with oxidizer 60	- 48 LB GL JRY
-5432-03	AMMONIUM BIFLUORIDE reacts w/acid = toxic 2	
-5432-04	CALCIUM FLUORIDE reacts w/acids = toxic 1	- 25 LB JAR
-5432-06	CHEL DTPA 41 (SODIUM SALT) 1	- 55 GAL DRM (600 LB)
-5432-07	SODIUM SALT 1	- FIB DRM (200 LB)
* 5432-08	MAGNESIUM NITRATE CRYSTAL oxidizer 9	- FIB DRM (100 LB)
* 5432-09	NITRILOTRIACETIC ACID very toxic 4	- 55 GAL DRM
-5432-10	RARE EARTH CARBONATE 8	- FIB DRM (150 LB)
1 * 5432-11	NALCO 5 - SODIUM ALUMINATE 26	- 55 GAL. DRM
-5432-13	SODIUM SULFATE reacts w/oxidizer 1	- FIB DRM (250 LB)
-5432-14	STRONTIUM CARBONATE 99.7% 3	- FIB DRM (100 LB)
-5432-24	FLOCULANT } TOTAL →	- 3 - FIB DRM (100 LB)
-5432-25	FLOCULANT }	
-5432-27	TOL FLOC COAG. FLOCULANT } TOTAL →	3 - 5 GAL BKTS
-5432 28	" " " }	
* 5778-31	NICKELOUS NITRATE oxidizer 1	- FIB DRM

PDR #		
- N/A	CALCIUM reacts with oxidizers	11 - SHORT MTL DRM
1 * RHO-81-526	AEROSOL OT	18 - 1 GAL GL JG

*To 2727-S Building for storage while awaiting offsite shipment.

- To Central Landfill for disposal

0000066

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER

TO:		FROM:	
T/S/D FACILITY	CENTRAL LANDFILL	Generator	ROCKWELL HANFORD OPERATIONS
E.P.A. ID Code No.	WA 789-000-8967	E.P.A. ID Code No.	WA 789-000-8967
Address	HANFORD OPERATIONS	Address	BLDG. 1167, 1100 AREA
Destination	RICHLAND, WA 99352	Origin	EXCESS PROPERTY ACTIVITY
Phone	373-3679	Phone	376-6706

Shipping Name	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Hazard Mat. ID No.	EPA Hazardous Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
3	TOLFLOC COAGULANT FLOCULANT (ORGANIC)	NONE	NONE		100 lbs	NONE
1	SODIUM SALT	NONE	NONE		600 lbs	NONE
1	SODIUM SALT	NONE	NONE		200 lbs	NONE
1	CALCIUM FLUORIDE	NONE	NONE		25 lbs	NONE
8	RARE EARTH CARBONATE	NONE	NONE		1200 lbs	NONE
1	SODIUM SULFATE	NONE	NONE		250 lbs	NONE

PLACARDS REQUIRED NONE

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding

_____ Per _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement.
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

_____
Signature of Consignor

FREIGHT CHARGES
PREPAID ☐ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY _____
E.P.A. ID Code No. _____
Address _____
Destination _____

EMERGENCY RESPONSE INFORMATION

CONTACT Name _____
Phone _____

National Response Center 1-800-424-8802
in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature [signature] C.D. HANSEN Date 5-15-83

TRANSPORTER #1 ROCKWELL HANFORD OPERATIONS E.P.A. ID No. WA 789-000-8967
Address P.O. BOX 300, BLDG. 1171
City RICHLAND, WA State WA Zip 99352 Phone 376-6178

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature _____ Date _____

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.

T/S/D FACILITY Signature _____ Date _____

0000087

T/S/D F COPY

REQUEST FOR DISPOSAL OF NONRADIOACTIVE HAZARDOUS MATERIAL

2-19

INSTRUCTIONS

Complete this request by providing all available information in the spaces provided. Fold, staple, and return completed form by plant mail to Environmental Protection.

I. CUSTODIAN M.L. McCollom

NAME M.L. McCollom TELEPHONE 376-6706

BUILDING/AREA 1167-A 1100

II. IDENTIFICATION OF MATERIAL

TRADE NAME See Attached List

CHEMICAL NAME

STORAGE LOCATION 1167-(4723)

CONTAMINATED WITH RADIOACTIVE MATERIAL? YES ____ NO X

PACKAGING

FLUID SOLID GAS

NUMBER OF CONTAINERS WEIGHT EA. VOLUME EA.

TYPE OF CONTAINER AGE OF CONTAINER

III. REASON FOR DISPOSAL

Not usable - No interest shown by other agencys, nor any public sale interest

IV. DATE DISPOSAL REQUIRED

4-1-83

V. COMMENTS

For Disposal at Central Landfill.

APPROVED FOR DISPOSAL BY Sam R. Cox DATE March 24, 1983

DISPOSAL LOCATION Land Fill Chemical Trench BY D.E. Phelps DATE 5-12-83

0000065

2-19

CHEMICALS IN METAL BUILDING

DOE #	CHEMICAL	QUANTITY
5432-12	SILICA GEL-ACTIVATED DESSICANT	10 FIB DRM
5432-17	SILICA GEL	4 DRM (100 LB)
5432-21	POWDERED CLAY	25 - 50 LB BAG
5432-23	OLIN 5004 COAGULANT AID	7 - 50 LB BAG

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is issued solely for filing or record.

MANIFEST DOCUMENT NUMBER

TO:		FROM:	
T/S/D FACILITY	CENTRAL LANDFILL	Generator	ROCKWELL HANFORD OPERATIONS
E.P.A. ID Code No.	WA 789-000-8967	E.P.A. ID Code No.	789-000-8967
Address	HANFORD RESERVATION	Address	BLDG. 1167, 1100 AREA
Destination	RICHLAND, WA 99352	Origin	EXCESS PROPERTY ACTIVITY
Phone	376-3679	Phone	376-6796

	PROPER SHIPPING NAME	HAZARD CLASS			WEIGHT	LABELS REQUIRED (or Exemption No.)
1	AMMONIUM HYDROGEN FLUORIDE, SOLID	CORROSIVE	UN-1727			CORROSIVE
11	CALCIUM, METAL	FLAMMABLE SOLID	UN-1404		1000 lbs	FLAMMABLE SOLID DANGEROUS WHEN WET
x3	SILICA GEL	NONE	NONE		300 lbs	NONE
25	POWDERED CLAY	NONE	NONE		1250 lbs	NONE
7	OLIN 5004 COAGULANT AID	NONE	NONE		350 lbs	NONE
10	SILICA GEL-ACTIVATED DESSICANT	NONE	NONE		1000 lbs	NONE

PLACARDS REQUIRED FLAMMABLE SOLID X / CORROSIVE

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding

$ _____ Per _____

COD: Amount to be collected: $ _____ The carrier may accept a check or money order in payment.

The carrier may not make delivery of this shipment without payment of freight and all other lawful charges.

_____ (Signature of Consignee)

FREIGHT CHARGES PREPAID ☐ COLLECT ☐

RECEIVED subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed, as to each carrier of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY NONE

E.P.A. ID Code No. _____

Address _____

Destination _____

EMERGENCY RESPONSE INFORMATION

CONTACT Name _____

Phone _____

National Response Center 1-800-424-8802

in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature C. D. HANSEN Date 5-18-93

TRANSPORTER #1 ROCKWELL HANFORD OPERATIONS E.P.A. ID No. WA-789-000-8967

Address PO BOX 300, BLDG. 1171

City RICHLAND, WA State WA Zip 99352 Phone [redacted] 376-6178

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature _____ Date _____

TRANSPORTER #2 _____ E.P.A. ID No. _____

Address _____

City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.

T/S/D FACILITY Signature _____ Date _____

0060070

T/S/D F COPY

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a Bill of Lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER

TO:	FROM:
T/S/D FACILITY CENTRAL LANDFILL	Generator ROCKWELL HANFORD OPERATIONS
E.P.A. ID Code No. WA 789-000-8967	E.P.A. ID Code No. WA 789-000-8967
Address HANFORD RESERVATION	Address BLDG. 1167, 1100 AREA
Destination RICHLAND, WA 99352	Origin EXCESS PROPERTY ACTIVITY
Phone 373-3679	Phone 376-6706

Number of Containers	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	D.O.T. I.D. No.	EPA Hazardous Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
3	STRONTIUM CARBONATE	NONE	NONE	NONE	300 lbs	NONE
3	FLOCULANT	NONE	NONE	NONE	300 lbs	NONE

PLACARDS REQUIRED NONE

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding

$_____ Per _____

FREIGHT CHARGES PREPAID ☐ COLLECT ☐

RECEIVED subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed, as to each carrier of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY _____
E.P.A. ID Code No. _____
Address _____
Destination _____

EMERGENCY RESPONSE INFORMATION

CONTACT Name _____
Phone _____

National Response Center 1-800-424-8802
in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature C. D. Hansen C. D. HANSEN Date 5-25-83

TRANSPORTER #1 ROCKWELL HANFORD OPERATIONS E.P.A. ID No. WA 789-000-8967
Address PO BOX 800, BLDG. 1171
City RICHLAND, WA State WA Zip 99352 Phone 376-6173

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature _____ Date _____

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.

T/S/D FACILITY Signature _____ Date _____

T/S/D F 30.7 0000071

13.0

REQUEST FOR DISPOSAL OF NONRADIOACTIVE HAZARDOUS MATERIAL

INSTRUCTIONS

Complete this request by providing all available information in the spaces provided. Fold, staple, and return completed form by plant mail to Environmental Protection.

I. CUSTODIAN M L McCollom

NAME M L McCollom TELEPHONE 376-6706

BUILDING/AREA 1167-A 1100

II. IDENTIFICATION OF MATERIAL

TRADE NAME See Attached List

CHEMICAL NAME

STORAGE LOCATION 1167- (4723)

CONTAMINATED WITH RADIOACTIVE MATERIAL? YES ____ NO X

III. PACKAGING

LIQUID ____ SOLID ____ GAS ____

NUMBER OF CONTAINERS ____ WEIGHT ____ EA. VOLUME ____ EA.

TYPE OF CONTAINER ____ AGE OF CONTAINER ____

IV. REASON FOR DISPOSAL

Not usable - No interest shown by other agencys, nor any public sale interest

V. DATE DISPOSAL REQUIRED

5-1-83

VI. COMMENTS

See attached list for disposition.

APPROVED FOR DISPOSAL
BY Gary R Cox
DATE March 28, 1983

DISPOSAL LOCATION Land fill
BY D E Phelps Chemical Trench
DATE 5-12-83

000244

CHEMICALS IN METAL BUILDING

DOE #	CHEMICAL	QUANTITY
1 * 5432-02	AMMONIA SOL. STRONG reacts with oxidizer 60	- 48 LB GL JR
- 5432-03	AMMONIUM BIFLUORIDE reacts w/acid = toxic 2	
- 5432-04	CALCIUM FLUORIDE reacts w/acids = toxic	1 - 25 LB JAR
- 5432-06	CHEL DTPA 41 (SODIUM SALT)	1 - 55 GAL DRM (600 LB)
- 5432-07	SODIUM SALT	1 - FIB DRM (200 LB)
2 * 5432-08	MAGNESIUM NITRATE CRYSTAL oxidizer 9	- FIB DRM (100 LB)
2 * 5432-09	NITRILOTRIACETIC ACID very toxic	4 - 55 GAL DRM
- 5432-10	RARE EARTH CARBONATE	8 - FIB DRM (150 LB)
1 * 5432-11	NALCO 5 - SODIUM ALUMINATE	26 - 55 GAL. DRM
- 5432-13	SODIUM SULFATE reacts w/oxidizer	1 - FIB DRM (250 LB)
- 5432-14	STRONTIUM CARBONATE 99.7%	3 - FIB DRM (100 LB)
- 5432-24	FLOCULANT } TOTAL →	3 - FIB DRM (100 LB)
- 5432-25	FLOCULANT }	
- 5432-27	TOLFLOC COAG. FLOCULANT } TOTAL →	3 - 5 GAL BKTS
- 5432 28	" " "	
2 * 5778-31	NICKELOUS NITRATE oxidizer	1 - FIB DRM

PDR #		
- N/A	CALCIUM reacts with oxidizers	11 - SHORT MTL DRM
1 * RH0-81-526	AEROSOL OT	18 - 1 GAL GL JG

*To 2727-S Building for storage while awaiting offsite shipment.

- To Central Land Fill for disposal

HAZARDOUS WASTE MANIFEST

THIS SHIPPING ORDER Must be legibly filled in, in Ink, in Indelible Pencil, or in Carbon, and retained by the Agent.

MANIFEST DOCUMENT NUMBER

TO:		FROM:	
T/S/D FACILITY	CENTRAL LANDFILL	Generator	ROCKWELL HANFORD OPERATIONS
E.P.A. ID Code No.	WA 789-000-8967	E.P.A. ID Code No.	WA 789-000-8967
Address	HANFORD OPERATIONS	Address	BLDG. 1167, 1100 AREA
Destination	RICHLAND, WA 99352	Origin	EXCESS PROPERTY ACTIVITY
Phone	373-3679	Phone	376-6706

[illegible]	DOT PROPER SHIPPING NAME	HAZARD CLASS	[illegible]	[illegible]	WEIGHT	LABELS REQUIRED (or Exemption No.)
3	TOLFLOC COAGULANT FLOCULANT (ORGANIC)	NONE	NONE		100 lbs	NONE
1	SODIUM SALT	NONE	NONE		600 lbs	NONE
1	SODIUM SALT	NONE	NONE		200 lbs	NONE
1	CALCIUM FLUORIDE	NONE	NONE		25 lbs	NONE
8	RARE EARTH CARBONATE	NONE	NONE		1200 lbs	NONE
1	SODIUM SULFATE	NONE	NONE		250 lbs	NONE

PLACARDS REQUIRED NONE

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding $ _____ Per _____

FREIGHT CHARGES PREPAID ☐ COLLECT ☐

RECEIVED subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY _____
E.P.A. ID Code No. _____
Address _____
Destination _____

EMERGENCY RESPONSE INFORMATION

CONTACT Name _____
Phone _____
National Response Center 1-800-424-8802
in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature Ch Hansen C.D. HANSEN Date 5-10-83

TRANSPORTER #1 ROCKWELL HANFORD OPERATIONS E.P.A. ID No. WA 789-000-8967
Address P.O. BOX 800, BLDG. 1171
City RICHLAND, WA State WA Zip 99352 Phone 376-6178

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature [signature] Date _____

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.

T/S/D FACILITY Signature D E Phelps Chemical Trench Date 5-10-83

TRANSPORTER #1 COPY

000246

HAZARDOUS WASTE MANIFEST

THIS SHIPPING ORDER must be legibly filled in, in ink, in Indelible Pencil, or in Carbon, and retained by the Agent.

MANIFEST DOCUMENT NUMBER

TO:	FROM:
T/S/D FACILITY CENTRAL LANDFILL	Generator ROCKWELL HANFORD OPERATIONS
E.P.A. ID Code No. WA 789-000-8967	E.P.A. ID Code No. WA 789-000-8967
Address HANFORD RESERVATION	Address BLDG. 1167, 1100 AREA
Destination RICHLAND, WA 99352	Origin EXCESS PROPERTY ACTIVITY
Phone 373-3679	Phone 376-6706

Shipping Units	DOT PROPER SHIPPING NAME	HAZARD CLASS	[illegible]	[illegible]	WEIGHT	LABELS REQUIRED (or Exemption No.)
3	STRONTIUM CARBONATE	NONE	NONE	NONE	300 lbs	NONE
3	FLOCULANT	NONE	NONE	NONE	300 lbs	NONE

PLACARDS REQUIRED NONE

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding $ _____ Per _____

FREIGHT CHARGES PREPAID ☐ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment. Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY _____
E.P.A. ID Code No. _____
Address _____
Destination _____

EMERGENCY RESPONSE INFORMATION

CONTACT Name _____
Phone _____
National Response Center 1-800-424-8802 in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature C D Hansen C. D. HANSEN Date 5-10-83

TRANSPORTER #1 ROCKWELL HANFORD OPERATIONS E.P.A. ID No. WA 789-000-8967
Address PO BOX 800, BLDG. 1171
City RICHLAND, WA State WA Zip 99352 Phone 376-6178

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature [signature] Date _____

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.

T/S/D FACILITY Signature D E Phelps Chemical Tech Date 5 12 83

TRANSPORTER #1 COPY 000217

✓ ...MENT FOR DISPOSAL OF NONRADIOACTIVE HAZARDOUS MATERIA...

INSTRUCTIONS

...plete this request by providing all available information in the spaces ...ed. Fold, staple, and return completed form by plant mail to ...vironmental Protection.

CUSTODIAN M L McCollom

NAME M. L. McCollom TELEPHONE 376-6706

BUILDING/AREA 1167-A 1100

IDENTIFICATION OF MATERIAL

TRADE NAME See Attached List

CHEMICAL NAME

STORAGE LOCATION 1167-(#723)

CONTAMINATED WITH RADIOACTIVE MATERIAL? YES ____ NO. X

PACKAGING

LIQUID SOLID GAS

NUMBER OF CONTAINERS WEIGHT EA. VOLUME EA.

TYPE OF CONTAINER AGE OF CONTAINER

REASON FOR DISPOSAL

Not usable - No interest shown by other agencys, nor any public sale interest

DATE DISPOSAL REQUIRED

4-1-83

COMMENTS

For Disposal at Central Landfill.

APPROVED FOR DISPOSAL Glenn R. Cox

DATE March 24, 1983

DISPOSAL LOCATION Land Fill Chemical Trench

BY D. E. Phelps

DATE 5-12-83

000248

CHEMICALS IN METAL BUILDING

DOE #	CHEMICAL	QUANTITY
5432-12	SILICA GEL-ACTIVATED DESSICANT	10 FIB DRM
5432-17	SILICA GEL	4 DRM (100 LB)
5432-21	POWDERED CLAY	25 - 50 LB BAG
5432-23	OLIN 5004 COAGULANT AID	7 - 50 LB BAG

HAZARDOUS WASTE MANIFEST

THIS SHIPPING ORDER must be legibly filled in, in ink, in Indelible Pencil, or in Carbon, and retained by the Agent.

MANIFEST DOCUMENT NUMBER

TO:		FROM:	
T/S/D FACILITY	CENTRAL LANDFILL	Generator	ROCKWELL HANFORD OPERATIONS
E.P.A. ID Code No.	WA 789-000-8967	E.P.A. ID Code No.	789-000-8967
Address	HANFORD RESERVATION	Address	BLDG. 1167, 1100 AREA
Destination	RICHLAND, WA 99352	Origin	EXCESS PROPERTY ACTIVITY
Phone	376-3679	Phone	376-6706

No. Shipping Units	DOT PROPER SHIPPING NAME	HAZARD CLASS	Hazard Mat. Id. No.	EPA Hazard Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
1	AMMONIUM HYDROGEN FLUORIDE, SOLID	CORROSIVE	UN-1727			CORROSIVE
11	CALCIUM, METAL	~~[illegible]~~ FLAMMABLE SOLID	UN-1404		1000 lbs	FLAMMABLE SO & DANGEROU WHEN WET
1 x3	SILICA GEL	NONE	NONE		300 lbs	NONE
25	POWDERED CLAY	NONE	NONE		1250 lbs	NONE
7	OLIN 5004 COAGULANT AID	NONE	NONE		350 lbs	NONE
10	SILICA GEL-ACTUATED DESSICANT	NONE	NONE		1000 lbs	NONE

PLACARDS REQUIRED FLAMMABLE SOLID ~~X~~ ~~CORROSIVE~~

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding $_____ Per _____

(Signature of Consignor)

FREIGHT CHARGES PREPAID ☐ COLLECT ☐

RECEIVED subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY NONE
E.P.A. ID Code No.
Address
Destination

EMERGENCY RESPONSE INFORMATION

CONTACT Name
Phone
National Response Center 1-800-424-8802 in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature C. D. Hansen C.D. HANSEN Date 5-12-83

TRANSPORTER #1 ROCKWELL HANFORD OPERATIONS E.P.A. ID No. WA-789-000-8967
Address PO BOX 800, BLDG. 1171
City RICHLAND, WA State WA Zip 99352 Phone ~~[illegible]~~ 376-6178

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature [signature] Date

TRANSPORTER #2 E.P.A. ID No.
Address
City State Zip Phone

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature Date

TREATMENT/STORAGE/DISPOSAL FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.

T/S/D FACILITY Signature D E Phelps Chemical Tech Date 5-12-83

TRANSPORTER #1 COPY

000250

HAZARDOUS WASTE

9 1 1 1 2 1 4 5

DISPOSAL PACKET NUMBER

P83-023

REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

3-3

I. GENERATION: The Generator should complete Part I and forward this form to: WS&DT 202-S/200 West Rockwell

A. Generator's Name: C.A. Meldrum Phone: 32576 Address: 2345 /200W Company: RHO

B. Custodian's Name: _____ Phone: _____ Address: _____ Company: _____

C. Waste Description: (If more than five items, attach additional sheets)

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One) Sol.	Liq.	Gas	Hazard Class
1. Battery Lead Acid bel	100	55 Gal Drum	1				
2.							
3.							
4.							
5.							

D. Have appropriate labels been affixed to containers? _____ Not required ✓

E. Have efforts been made to recycle (e.g., excess) waste? Yes

F. Has waste been treated in any manner? No If so, how? _____

G. Storage Location. _____

H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: ZZ830695

Generator's Signature: C.A. Meldrum Date: 5/11/83

FREE [illegible]

II. APPROVAL

A. Approved for disposal by Name: G.R. Cox Phone: 3-3679 Address 2025/200W Co.: Rockwell

Date: May 12, 1983 Signature: G.R. Cox

B. Packaging Requirements (specify): Pack in 55 gallon drum with venting

C. Disposal Location: X Chemical Trench, _____ Asbestos Trench,

(check one) _____ 212-P (Storage), _____ Other

III. TRANSPORTATION/DISPOSAL

A. Transporter(s) Name: _____ Phone: _____ Address: _____ Company _____

B. Date Transported/Disposed: _____

C. Transporter(s) Signature: _____

0000094

BC-6700-174.1 (N-1-82)

DISPOSAL PACKET NUMBER

P83-024

REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

3-25

GENERATION: The Generator should complete Part I and forward this form to: WS&DT 202-S/200 West Rockwell

A. Generator's Name: Mike Malachy Phone 66654 Address: 1171 Bldg Company: Rockwell

B. Custodian's Name: Mike Malachy Phone 66654 Address: 1171 Bldg Company: Rockwell

C. Waste Description: (If more than five items, attach additional sheets)

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One) Sol.	Liq.	Gas	Hazard Class
1. Assault	8 gal	Can	8	Empty			Non Hazardous
2. Assault	55 gal	Drum	2	Empty			" "
3. Poly mate	55 gal	Drum	2	Empty			" "
4.							
5.							

D. Have appropriate labels been affixed to containers? _____ Not required ✓

E. Have efforts been made to recycle (e.g., excess) waste? NA

F. Has waste been treated in any manner? NA If so, how? _____

Storage Location: Y Bldg.

"I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: _____

Generator's Signature: Mike Malachy Date: 5/16/83

II. APPROVAL

A. Approved for disposal by Name: G.R. Cox Phone: 3-3679 Address 202-S/200 West Co.: Rockwell

Date: May 12, 1983 Signature: G.R. Cox

B. Packaging Requirements (specify): Empty herbicide containers

C. Disposal Location: X Chemical Trench, _____ Asbestos Trench,

(check one) _____ 212-P (Storage), _____ Other

III. TRANSPORTATION/DISPOSAL

A. Transporter(s) Name: _____ Phone: _____ Address: _____ Company _____

B. Date Transported/Disposed: _____

C. Transporter(s) Signature: _____

5-24-83 DE Phelps Chemical Trench

0000106 BC-6700-174.1 (N-1-82)

13.0

REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

I. GENERATION: The Generator should complete Part I and forward this form to: WS&DT 202-S/200 West Rockwell

A. Generator's Name: Mike Malarchi Phone: 66654 Address: 1171 Bldg Company: Rockwell

B. Custodian's Name: Mike Malarchi Phone: 66654 Address: 1171 Bldg Company: Rockwell

C. Waste Description: (If more than five items, attach additional sheets)

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One) Sol.	Liq.	Gas	Hazard Class
1. [illegible]	8	Can	8	Empty			Non Hazardous
2. [illegible]	55 gal	Drum	2	Empty			" "
3. Poly Mon	55 gal	Drum	2	Empty			" "
4.							
5.							

D. Have appropriate labels been affixed to containers? _____ Not required ✓

E. Have efforts been made to recycle (e.g., excess) waste? NA

F. Has waste been treated in any manner? NA If so, how? _____

G. Storage Location: V Bldg.

H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: _____

Generator's Signature: Mike Malarchi Date: 5/16/83

II. APPROVAL

A. Approved for disposal by Name: G.R. Cox Phone: 3-3679 Address 202-S/200 West Co.: Rockwell

Date: May 12, 1983 Signature: [signature]

B. Packaging Requirements (specify): Empty herbicide containers

C. Disposal Location: X Chemical Trench, _____ Asbestos Trench,

(check one) _____ 212-P (Storage), _____ Other

III. TRANSPORTATION/DISPOSAL

A. Transporter(s) Name: _____ Phone: _____ Address: _____ Company _____

B. Date Transported/Disposed: _____

C. Transporter(s) Signature: _____

5-20-83 [illegible] Chemical Trench

3C-5700-174.1 (N-1-82)

000232

13.0

REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

I. GENERATION: The Generator should complete Part I and forward this form to: WS&DT 202-S/200 West Rockwell

A. Generator's Name: Mike Malachy Phone 6654 Address: 1171 Bldg Company: Rockwell

B. Custodian's Name: Mike Malachy Phone 6654 Address: 1171 Bldg Company: Rockwell

C. Waste Description: (If more than five items, attach additional sheets)

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One) Sol.	Liq.	Gas	Hazard Class
1. Assault	~~8 gal~~	Can	8	Empty	-		Non Hazardous
2. Assault	55 gal	Drum	2	Empty			" "
3. Poly mate	55 gal	Drum	2	Empty	-		" "
4.							
5.							

D. Have appropriate labels been affixed to containers? _____ Not required ✓

E. Have efforts been made to recycle (e.g., excess) waste? NA

F. Has waste been treated in any manner? NA If so, how? _____

G. Storage Location: Y Bldg.

H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: _____

Generator's Signature: Mike Malachy Date: 5/16/83

II. APPROVAL

A. Approved for disposal by Name: G.R. Cox Phone: 3-3679 Address 202-S/200 West Co.: Rockwell

Date: May 12, 1983 Signature: Dan R. Cox

B. Packaging Requirements (specify): Empty herbicide containers

C. Disposal Location: X Chemical Trench, _____ Asbestos Trench,

(check one) _____ 212-P (Storage), _____ Other

III. TRANSPORTATION/DISPOSAL

A. Transporter(s) Name: _____ Phone: _____ Address: _____ Company _____

B. Date Transported/Disposed: _____

C. Transporter(s) Signature: _____

5-24-83 DE Phelps Chemical Trench

000241 BC-5700-174.1 (N-1-8')

DISPOSAL PACKET NUMBER

P83-025

13,0

... IT --- Write it!

DATE May 20, 1983

Dutch Rutherford

FROM Gary R. Cox (3-3679)

This consists of a 'blanket' approval for timesake so that Jones can expedite this disposal. I have talked with Tom Hendrix on this and he sees no problems. Please have Gene at the Landfill Tally the trucks as they come in and check that they have a rad release. To get the end number we will then add the number of trucks and multiply by 250 ft³/truck. It should come close to his estimate of 3700 ft³.

Call me if you have any questions or perceive any problems.

... LABEL PUT SAFETY FIRST

000195

J. A. JONES CONSTRUCTION SERVICES COMPANY

DON'T SAY IT — Write It!

DATE MAY 12, 1983

Gary R. Cox (3-3679)

FROM W. A. BROWN

THE TOTAL QUANTITY OF ASBESTOS IS ESTIMATED AT 3700 FEET^3, A LOAD WILL BE RIGHT AT (250 ft.^{3}) 100 BAGS PER LOAD. WE WOULD LIKE TO GET TWO LOADS A DAY FOR 7 DAYS. LOAD TIME WILL BE 9:30, TRANSPORT TO CENTRAL LAND FIL WILL BE THERE AT 10:30, AFTER NOON LOAD OUT TIME 1:30 CENTRAL LAND FILL AT 2:30. AND EACH LOAD WILL HAVE ITS OWN RELEASE, IT CAN NOT BE SURVEIED UNTILL ITS BEING LOADED. The release numbers will be affixed to the Disposal request upon completion of disposal of all 3700 ft.^{3}.

"BE SAFE - BE WISE - ENJOY ANOTHER SAFETY PRIZE"

POOR COPY RECEIVED

REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

GENERATION: The Generator should complete Part I and forward this form to: WS&DT
202-S/200 West
Rockwell

Name: W. A. Brown Phone: 3-1732 Address: 100-N Company: J. A. Jones

Name: U.N.C. Phone: 3-1307 Address: 100-K Nat Company: UNC

(If more than five items, attach additional sheets)

Name	Total Quantity	Type of Container	Number of Containers	(Check One) Sol.	Liq.	Gas	Hazard Class
Asbestos	3700 ft³	Plastic	2	✓			

Has labels been affixed to containers? YES Not required

Has made to recycle (e.g., excess) waste? NO

Has treated in any manner? YES If so, how? WET down

165 KW 100-K

"... that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has ... to the best of my knowledge." Survey Card Number: (attach from all shipments)

Signature: W. A. Brown Date: 5/18/83

DISPOSAL

Disposal by Name: Gary R. Cox Phone: 3-3679 Address: 202-S/200-W Co.: Rockwell

Date: May 19, 1983 Signature: Gary R. Cox

Requirements (specify): This disposal will consist of approximately 15-20 truckloads of material over 7 days, count trucks as they enter and tally for end result.

Location: _____ Chemical Trench, X Asbestos Trench.

Location: _____ 212-P (Storage), _____ Other

TRANSPORTATION/DISPOSAL

Name: _____ Phone: _____ Address: _____ Company _____

Transported Disposed: _____

Signature: _____

000197

BC-6700-174.1 (N-1-82)

DATE: _____

CENTRAL LANDFILL

BHW
UNC
RHO
JAJ

OTHERS

CONTRACTORS Asbestos	VOLUME	CONTRACTORS	VOLUME
MAY 26 - 1993			
JAT Flatbed	99 Bags		
JAT Flatbed	130 Bags		
JAT Flatbed	120 Bags		
6 - 2 - 83			
JAT Flatbed	120 Bags		
6 - 6 - 83			
JAT Flatbed	120 Bags		
JAT Flatbed	130 Bags		
6-9-83			
JAT Flatbed	133 Bags		
JAT Flatbed	130 Bags		
6 9-83			
JAT FLATBED TRUCK	140 BAGS		
6-10-83			
JAT FLATBED TRUCK	130 BAGS		
6-13-83			
JAT FLATBED TRUCK	130 BAGS		
6-14-83			
JAT - FLATBED TRUCK	130 BAGS		
6-15-83			
JAT FLATBED TRUCK	130 BAGS		
6-22-83			
JAT FLATBED TRUCK	125 BAGS		
6-30-83			
JAT FLATBED TRUCK	127 - BAGS		
8-15-83			
JAT FLATBED TRUCK	60 BAGS		

DISPOSAL PACKET NUMBER

P83-026

REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

3-13

GENERATION: The Generator should complete Part I and forward this form to: WS&DT 202-S/200 West Rockwell

A. Generator's Name: H.P. Simonds Phone: 3-2781 Address: 274B/200E Company: Rockwell

B. Custodian's Name: H.P. Simonds Phone: 3-2781 Address: 271-B/200E Company: Rockwell

C. Waste Description: (If more than five items, attach additional sheets).

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One) Sol.	Liq.	Gas	Hazard Class
1. Sodium Bisulphate	M/T	Cardboard Drum	35	✓			ORM-B
2.							
3.							
4.							
5.							

D. Have appropriate labels been affixed to containers? _____ Not required ✓

E. Have efforts been made to recycle (e.g., excess) waste? Yes

F. Has waste been treated in any manner? No If so, how? _____

G. Storage Location: 271-B Storage dock

H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has

DON'T SAY IT --- *Write It!*

DATE May 31, 1983

TO Dave Briggs FROM Gary R. Cox

As per our discussion today the following should be included in your chemical handling procedure to adequately address the disposal of containers:

"Upon emptying the containers of Sodium Bisulfate into the process, determine the integrity of the plastic liners found inside the fiberboard drum. If no evidence of leakage is found, the fiberboard drums may be disposed of as regular trash (ie. to trash dumpster). Dispose of all plastic liners as chemical waste in empty fiberboard drum (eg. those which have been determined to be leakers) and make arrangements for transport to the Central Landfill Chemical Trench when a sufficient number have accumulate.

Thank you for your attention to this matter and feel free to contact me if you have further questions.

DON'T SAY IT --- *Write It!*

DATE 5-18-83

TO Gary

FROM N. P. Simonds

We will generate about 20-30 empty drums every two to three weeks.

Dutch,

I spoke with Tom Hendrix about a problem from Purex similiar to this. Let's handle this the same way, eg. Keep this Disposal Request open and as long as it is the same material for disposal, just keep a running tally on additional sheets. I will have H.P. Simonds contact transportation when he has a number of drums ready for shipment.

Call me if you have any problems with this.

"TO MAKE LIFE LAST, PUT SAFETY FIRST"

Gary

DISPOSAL PACKET NUMBER

P83-027

Vol. 6-1 5-55 ...

E-87917

REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

1-21

I. GENERATION: The Generator should complete Part I and forward this form to: WS&DT 202-S/200 West Rockwell

A. Generator's Name: W. R. Buchanan Phone: 3-2181 Address: 234-5/200W Company: RHO

B. Custodian's Name: B. R. Fitzpatrick Phone: 3-2283 Address: 234-5/200W Company: RHO

C. Waste Description: (If more than five items, attach additional sheets)

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One) Sol.	Liq.	Gas	Hazard Class
1. SEE ATTACHED SHEETS							
2.							
3.							
4.							
5.							

D. Have appropriate labels been affixed to containers? YES Not required

E. Have efforts been made to recycle (e.g., excess) waste? WASTE OF NO USE

F. Has waste been treated in any manner? NO If so, how?

G. Storage Location: 234-5 LAB/200W RHO

H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: HAS BEEN SURVEYED

Generator's Signature: W R Buchanan Date: 12-3-82

II. APPROVAL

A. Approved for disposal by Name: G. R. Cox Phone: 3-3679 Address: 202-S/200-W Co.: Rockwell

Date: 2/16/83 Signature: G. R. Cox

B. Packaging Requirements (specify): As specified on attached sheets. EHW will go to the new storage facility in 200-West area until disposed of offsite.

C. Disposal Location: X Chemical Trench, Asbestos Trench,

(check one) 212-P (Storage), as specified Other

III. TRANSPORTATION/DISPOSAL

Transporter(s) Name: L G Davis Phone: 6-6654 Address: 1171 Company RHO

B. Date Transported/Disposed: Chemical Trench 6-1-88

C. Transporter(s) Signature: Lane G. Davis
D E Phelps

0000018

SC-6700-174.1 (N-1-82)

X= ~~save~~ +

21

Note: Those items whic require separate packa will go to the Central Landfill

ROOM 133 - OK

X	~~Tetrachloroethylene~~	~~1 pt.~~ +
X	~~Potassium Carbonate~~	~~1 lb.~~ +
X	~~Potassium Carbonate, Liquid~~	~~1 qt.~~ +
X	~~8 - Quinolinol~~	~~1/4 lb.~~ +
X	~~Kodak D-19 Developer~~	~~22 lb.~~ +
X	~~Kodak D-8 Developer~~	~~45 lb.~~ +

Room 134 - O.K.

X	~~H_2SO_4~~	~~1 gal.~~ +
X	~~HCl~~	~~1 gal.~~ +
X	~~HNO_3~~	~~2 gal.~~ +
	Hydroiodic Acid	10 pts. — separate package
	Tetrachloroethylene	1 pt. — EHW

Room 135 - O.K.

	Oxalic Acid (Corrosive)	1 lb. — separate package
	Ferrous Ammonium Sulfate	1 lb. — #3
	Sodium Hydroxide (Corrosive)	1 lb. — separate package
X	~~Dowex Ion Exchange Resin~~	~~3 lbs.~~ +
X	~~Dowex 1-X8 Exchange Resin~~	~~2 lbs.~~ +
X	~~AG 50W-X8 Exchange Resin~~	~~12 lbs.~~ +

141-A CABINET WITH SLIDING DOORS - O.K.

	Aluminum Chloride — don't mix with organics may explode on opening	1 lb. — separate package
	Aluminum Nitrate — see nitrates	1 lb. — separate package
	Ammonium Acetate	2 lbs. — #3
	Ammonium Bifluoride	1 lb. — #3
	Ammonium Molybdate	2 lbs. — #3
	Ammonium Phosphate	1 lb. — #3
	Ammonium Sulfate	2 lbs. — #3
	Ascorbic Acid Powder	9 lbs. — #3
	5-Amino-2 Naphtalene Sulfonic Acid	250 g. — EHW
	Sodium Meta Bisulfate	12 lbs. — #2
	Sodium Acetate	1 lb. — #3
	Ferric Chloride	1 lb. — #3
	Cerric Nitrate	1 lb. — #3
	Potassium Iodide	~~1 lb.~~ #2
	Silver Nitrate - very reactive, caustic	4 oz. — EHW
	Sulfamic Acid	100 g. — #4
	Hydroxylamine Hydrochloride	115 g. — #4
	Phenol Red Sodium Salt	15 g. — EHW
	Sodium Carbonate	1 lb. — #3
	Ferrous Ammonium Sulfate	2 lb. — #3

REFRIGERATOR ACROSS FROM ROOM 157 — O.K.

Hypo-phosphorous Acid (reacts w/oxidizers forms phosphine)	3 pts.	separate package
~~Butyl Alcohol~~	~~1 pt.~~	#1
.5m TTA in Xylene	1 qt.	EHW
X ~~Valeric Acid~~	~~1 qt.~~	
~~TIOA in Xylene~~	~~1 qt.~~	#1
Dibutyl Butylphosphonate (reacts w/oxidizers)	125 ml.	#4
Nitrobenzoene	1 pt.	EHW
Xylene	1 pt.	EHW
Collodion	250 ml.	#4
Toluene	1 pt.	EHW
Methyl Isobutyl Ketone	1 pt.	#4
Hydrozine in H_2O	125 ml.	EHW
Tri-Sil Z	25 ml.	#3
Agle Sulanilic Acid in 50% Acetic Acid	1 pt.	#4
Ferrous Sulfamate	50 ml.	#3
~~Triethanolumine~~	~~1 pt.~~	#1
$KMnO_4$ (Potassium Permanganate) oxidizer	1 qt.	#3
P (KH_2SO_4)	1 qt.	#3
1-Naphthylamine-7-Sulfomic Acid 50% Acetic Acid	1 pt.	EHW
Li 10-Phenanthroline Ferrous Sulfate Complex	125 ml.	#4

Room 143 CABINET #1 — O.K.

~~Sodium Bromate~~	~~1 lb.~~	#2
Sodium Bisulfate	1 lb.	#3
Sodium Bisulfate Monohydrate	3 lbs.	#3
Sodium Carbonate	1 lb.	#3
~~Sodium Metabisulfate~~	~~1 lb.~~	#2
Sodium Chloride	6 lb.	#3
Sodium Chromate	1 lb.	#3
~~Sodium Dichromate~~	~~4 lbs.~~	#2
~~Sodium Dithionite~~	~~2 lbs.~~	#2
~~Sodium Flouride~~	~~8 lbs.~~	#2
~~Sodium Hydrosulfate~~	~~1 lb.~~	#2
Sodium Iodide	~~1/4 lb.~~	#2
Sodium Nitrate	15 lb.	#3
Sodium Phosphate	~~2 lbs.~~	#2
Sodium Oxalate	~~1 lb.~~	#2
Sodium Metasilicate	4 lbs.	#2
Sodium Sulfate	2 lbs.	#2
Sulfamic Acid	5 lbs.	#4
Sodium Tartrate	1/4 lbs.	#3
Sodium Thiosulfate	1 lb.	#3
O-tolidine Dihydrochloride	1 lb.	#4
Trioctylphosphine	25 g.	EHW
Urea	1 lb.	#3

Room 143 CABINET #1-O.K.(CONT'D)

~~Brierite $CaSO_4$~~	~~20 lbs.~~ +
Ascarite	12 lbs.—#4
Acid Potassium Phthalate	1/4 lbs.#3
~~Salicylic Acid~~	~~2 lbs.~~ #1
~~Ag-1 X8 Anion Resin~~	~~6 lbs.~~ +

Room 143 CABINET #2 —O.K.

~~Barium Chloride~~	~~8 lbs.~~ #2
~~Cerium Nitrate~~	~~1/4 lb.~~ #2
Benzion Anti-Oxime	25 g.—EHW
~~Arsenic Trioxide~~	~~1/4 lb.~~ +
~~Ceric Sulfate~~	~~1 lb.~~ +
Cuprous Chloride	1 lb.—#3
Glycolic Acid	1/4 lb.—#4
Mercuric Chloride	1/4 lb.— EHW
Ferrous Ammonium Sulfate	6 lbs.—#3
Lithium Flouride	2 lbs.—#3
Hydroxylamine Hydrochloride HH_2OH-HCl	8 lbs.—#4
Magnesium Chloride	1 lb.—#3
Magnesium Perchlorate	1 lb.—#5 Separate package
~~Sodium Iodide~~	~~1/4 lb.~~ #2
~~Ferric Ammonium Sulfate~~	~~6 lbs.~~ #2
~~N_4N - A Methyl P-NitroSoaniline~~	~~25 g.~~ #1
~~Lanthanum Nitrate~~	~~100 g.~~ #2
Diethylene Triamine Penta-acetic Acid	1/4 lb.—#4
P - (Dimethylamino) - Benzaldehyde	300 g.—EHW
~~Mercuric Thiocyonate~~	~~1 lb.~~ #2
Nickel Nitrate	1 lb.—#3
~~Potassium Sodium Tartrate~~	~~6 1/4 lbs.~~ #2
Potassium Bromate	1 1/4 lb.—#3
~~Potassium Bromide~~	~~1 lb.~~ #2
~~Potassium~~ Carbonate	~~1 lb.~~ #2
~~Potassium Chloride~~	~~1 lb.~~ #2
Potassium Flouride	1 lb.—#3
Potassium Iodide	250 g.—#3
Potassium Hydrogen Phthalate	1/4 lb.—#3
Potassium Persulfate	1 lb.—#3
~~Potassium~~ Phosphate	~~2 lbs.~~ #2
~~Salicylic Acid~~	~~2 lbs.~~ #1
Silver Peroxide	100 g.—EHW
~~Sodium~~ Arsenite	~~1 lb.~~ #2
Sodium Bicarbonate	~~1 lb.~~ #2

ROOM 143 CABINET #3 —O.K.

Bromine reacts with reducers	1 lb.—#3
Sodium Oxalate	1 lb.—#2
Acid Ansenious	1 lb.—separate package

Room 141-A METAL CABINET —O.K.

	Potassium Nitrate Crystals	3 lbs. — #3
	Potassium Chloride	1 lb. — #3
	Potassium Carbonate	1 lb. — #3
	~~Cupferron~~	~~1 oz.~~ #2
	Cupric Nitrate	1/4 lb. — #3
	Ferric Nitrate	1 lb. — #3
	Hydroxylamine Hydrochloride	1 lb. — #4
	Amadac - F	50 g. — EHW
	N-Phenylbenzohydroxamic Acid	25 g. — EHW
x	~~8-Quinolinol~~	~~1 oz.~~ +
x	~~8-Hydroxyquinoline~~	~~1/4 lb.~~ +
	Tetrapropylammonium Hydroxide	25 g. — #3
	~~Ammonium Iodide~~	~~1/4 lb.~~ #2
	Ferric Nitrate	1/4 lb. — #3
	~~Formaldehyde~~	~~1 pt.~~ #1
	~~Sodium Chloride~~	~~1 lb.~~ #2
	Sodium Oxalate	1 lb. — #3
	~~Sodium Flouride~~	~~1 lb.~~ #2
	1,10 Phenonthroline	120 g. — EHW
x	~~Flouride Adjustment Buffer~~	~~1 lb.~~ +
	~~Cupric Sulfate~~	~~5 lbs.~~ #2
+	~~Orion Std. Solutions~~	~~8 pts.~~ +

Room 141-A ICE BOX — O.K.

	Dibutyl Butylphosphonate reacts w/oxidizers	200 ml. — #4
	Dichloridimethylsilane reacts w/oxidizer	200 ml. — #4
	Hydrazine 35%	500 ml. — EHW
	DBBP Di butyl butyl phosphonate	500 ml. — #4
x	~~Ammonium Bifloride~~	~~1 lb.~~ +
	$KMnO_4$ (Potassium Permanganate)	250 ml. — #3
	~~Sodium Acetate~~	~~250 ml.~~ #2
	Hydrogen Peroxide	250 ml. — down the sink
	N-Tridecane	125 ml. — #4
	Formic Acid	250 ml. — #4
	~~N-Butyl Alcohol~~	~~250 ml.~~ #1
	~~Chloroform~~	~~250 ml.~~ #1
	Petroleum Ether	25 ml. — separate package
	CCl_4	50 ml. — EHW
	~~Formaldehyde~~	~~250 ml.~~ #1
	Nitrobenzene	1 kg. — EHW
	Formic Acid	250 ml. — #4
	Hydrazine 65% in H_2O	500 ml. — EHW
	~~Ferric Ammonium Sulfate~~	~~500 ml.~~ #2
	Hydroxylamine Nitrate 15% Ag Sol.	500 ml. — EHW
	.5m TTA in xylene	1 gal. — EHW
	~~Chloroform~~	~~1 gal.~~ #1
	1% Oxine in Xylene	250 ml. — #1

Room 141-A - O.K.

x	~~H_2SO_4~~	~~5 gal.~~ +
x	~~HF~~	~~4 gal.~~ +
x	~~H_3PO_4~~	~~1 gal~~ +
x	~~Hypophosphorous Acid 50%~~	~~10 pt.~~ +
x	~~HCl~~	~~8 gal.~~ +
x	~~Acetic Acid~~	~~2 gal.~~ +
x	~~HNO_3~~	~~1 gal.~~ +
	Tetrachloroethylene	1 pt. — EHW

Room 151 FLAMMABLE CABINET (NEAR) O.K.

Nitrobenzene	6 pts. — EHW
~~Dibutyl Phosphate~~	~~1 pt.~~ #1
Ceric Sulfate in one Normal H_2SO_4	1 pt. — #3
1 SoAmyl Alcohol	1 pt. — #4
~~1~~ 4-Dioxane	~~1 pt.~~ #1
Amyl Acetate reacts w/oxidizer	1 pt. — #4
2 Ethylhexylhydrogen Phosphite	125 ml. — EHW
Propylene Carbonate	~~1 gal.~~ #2
~~CCl_4~~	~~3 gal.~~ #1
'ethymethocylate	1 gal. — #4
TEP Tributylphosphate	1 gal. — #4
Tetrachlorodethylene	1 pt. — EHW
Butylstearate reacts w/oxidizer	2 gal. — #4
~~1, 1, 2, 2-Tetrabromoethane~~	~~1 gal.~~ #1

FLAMMABLE CABINET NEXT TO ROOM 139 - O.K.

	150 Amyl Alcohol	1 pt. — #4
	~~Butylacetate~~	~~5 gal.~~ #1
	~~Xylene~~	~~4 pts.~~ #1
x	~~Isopropyl Alcohol~~	~~2 gal.~~ +
x	~~Methanol~~	~~36 pts.~~ +
x	~~Acetone~~	~~36 pts.~~ +
	Methylisobutyl Ketone	5 pts. — #4

141-A CABINET WITH SLIDING DOORS (CONT'D) OK.

	~~Sodium Sulfite~~	~~1 lb.~~ #2
X	~~Orion Tisab III~~	~~250 ml.~~ +
X	~~Silver Oxide~~	~~150 g.~~ +
	~~Salicylic~~ Acid	~~9 lbs.~~ #1
	Bromo Oresol Purple Sodium Salt	5 g. — #3
X	~~Cation Exchange Resin Ag 50W-X8 100-200 Mesh Hydrogen Form~~	~~1 lb.~~ +
X	~~An Ion Exchange Resin Biorex 9 50-100 mesh Chloride Form~~	~~10 lb.~~ +
	~~Sodium Bisulfate Monohydrate~~	~~10 lbs.~~ #2
	Ammonium Citrate	2 lbs. — #3
X	~~Brierite~~ (~~$CaSe_4$~~)	~~10 lbs.~~ +

Room 155 O.K.

	Phosphorous Pentoxide	1 lb. — #3
X	~~Ferrous Ammonium Sulfate~~	~~1 lb.~~ +
	Silver Nitrate	1/4 lb. — EHW
	~~Ammonium Oxalite~~	~~1 lb.~~ #2
	Sodium Hydroxide	1 lb. #3
	~~Fuming HNO_3 Pure~~	~~1/2 gal.~~ — separately packaged
X	~~HF~~	~~1 gal.~~ +
X	~~H_2SO_4~~	~~4 gal.~~ +
X	~~HCl~~	~~5 gal.~~ +
	.25m Lead Nitrate	1 qt. — EHW

Room 154 - O.K.

	Sodium Acetate	1 lb. — #3
	Magnesium Perchlorate - explosive oxidizer	3 lb. — separate package
	Ascarite	3 lb. — #4
	Hydroiodic Acid	20 pts. — separate package

Room 152 - O.K.

X	~~HNO_3~~	~~3 gal.~~ +

Room 145 - O.K.

Ammonium Oxalate 5-lbs. — #3

Note #1 must go offsite, move to M.H. Litzinger Memorial Blo

234-5 7 Plant Waste

Extremely Harzardous Waste

Formaldehyde - 1 pint, 250 ml •
Chloroform - 250 ml, 1 gallon •
Nitrobenzene - 1 Kg., 6 pints, 1 pint EHW
Hydrazine - 65% in H_2O 500 ml, 125 ml EHW
1 foot of absorbent

Xylene - 4 pints •
1% Oxine in Xylene - 250 ml •
Carbon tetrachloride - 1 gallon •
TIOA in Xylene - 1 quart •

1

requires separate packaging

Oxidizers:

Cerric Nitrate - 1 lb. #3
Potassium Nitrate Crystals - 3 lb. #3
$KMnO_4$ - 250 ml #3
Potassium Bromate - 1¼ lb. #3
Bromine - 1 lb. #3

Hydrogen Peroxide - 250 ml - sink disposal
Sodium Nitrate - 13 lbs. #3
Magnesium Perchlorate - 1 lb. #3
Nickel Nitrate - 1 lb. #3
Fuming HNO_3 - ½ gallon Packaged separately
.25 Lead Nitrate - 1 quart #3

1,1,2,2-Tetrabromoethane - 1 gallon •

Reacts with oxidizers:

Butylacetate - 5 gallons •
N-Butyl Alcohol - 250 ml •
Dibutyl Phosphate - 1 pint •
Triethanolamine - 1 pint •

Hypophosphorus Acid 50% - 10 pints, 3 pints
Salicylic Acid - 1 lb., 9 lb., 2 lb.
1,4-Dioxane - 1 pint •
Butyl Alcohol - 1 pint •
150 Amyl Alcohol - 1 pint •

1

~~Reacts with reducers~~
~~Methylisobutyl Ketone - 5 pints~~

Potassium Persulfate - 1 lb. #3

Explosive:

Cupric Nitrate ¼ lb.
Ferric Nitrate 1 lb., ¼ lb

Petroleum Ether - 25 ml.
Formic Acid - 250 ml., 250 ml

0000025

2 234-5 Z Plant Waste

Toxic:

Potassium Iodide - 1 lb.
Potassium Chloride - 1 lb.
Potassium Carbonate - 1 lb.
Potassium Sodium Tartrate - 6¼ lb.
Potassium Bromide - 1 lb.
Potassium Carbonate - 1 lb.
Potassium Phosphate - 2 lb.

Cupric Sulfate - 5 lb.
Ferric Amm Sulfate - 500 ml, 5 lb.
Ammonium Iodide - ¼ lb.
Barium Chloride - 1 lb.
Cerium Nitrate - ¼ lb.
Lanthanum Nitrate - 100 g.
Mercuric Thiocyonate - 1 lb.
Ammonium Oxalite - 1 lb.
~~Valeric Acid - 1 qt.~~

Sodium Meta Bisulfate - 12 lb., 1 lb.
Sodium Sulfite - 1 lb.
Sodium Bisulfate Monohydrate - 10 lb.
Sodium Fluoride - 1 lb., 7 lbs.
Sodium Acetate - 250 ml
Sodium Chloride - 1 lb.
~~Sodium Oxalate - 1 lb., 1 lb.~~
~~Sodium Bromate - 1 lb.~~
~~Sodium Dichromate - 1 lb.~~
~~Sodium Dithionite - 4 lb.~~
Sodium Hydrosulfate - 1 lb.
Sodium Iodide - ¼ lb, ¼ lb.
Sodium Phosphate - 1 lb.
Sodium Metasilicate - 3 lb.
Sodium Sulfate - 1 lb.
Sodium Arsenite - 1 lb.
Sodium Bicarbonate - 1 lb.
~~Sodium Hydroxide - 1 lb.~~

requires separate packaging

Organics

Ferrous Sulfamate - 50 ml.
Hydroiodic Acid - 10 pints, 20 pints
~~Complete~~ 2
Amadac-F - 50 g.
N-Pheneylbenzohydroxamic Acid - 25 g
Fluoride Adjustment Buffer - 1 lb.
Ceric Sulfate in 1N H_2SO_4 - 1 pint
Ethylhexylhydrogen Phosphite - 125 ml.

10-Phenanthroline Ferrous Sulfate Complex - 125 ml
O-toluidine Dihydrochloride - 1 lb.
Acid Potassium Phthalate - ¼ lb
~~Complete~~
Benzion ~~Anti-Toxine~~ - 75 g.
~~Complete~~
N,N-A Methyl P-Nitrosoaniline - 25 g
Acid Ansonious - 1 lb.
~~Complete~~ 2
Methylmethocylate - 1 gallon organic

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ORGANIC CHEMICALS FOR DISPOSAL #1

- Xylene - 4 pints
- 1% Oxine in Xylene - 250 mL
- Carbon Tetrachloride - 3 gallon
- TIOA in Xylene - 1 quart
- Formaldehyde - 1 pint, 250 mL
- Chloroform - 250 mL, 1 gallon
- 1, 1, 2, 2 - Tetrabromoethane - 1 gallon
- Butylacetate - 5 gallons
- N-Butyl 7 Alcohol - 250 mL
- Dibutyl Phosphate - 1 pint
- Triethanolamine - 1 pint
- Salicylic Acid - 1 lb, 9 lb, 2 lb
- 1, 4 - Dioxane - 1 pint
- Butyl Alcohol - 1 pint
- 150 Amyl Alcohol - 1 pint
- Benzion Anti-Oxime - 25 g.
- N-N-A Methyl P-Nitrosoaniline - 25 g.

INORGANIC CHEMICALS FOR DISPOSAL #2

- Potassium Iodide - 1 lb
- Potassium Chloride - 1 lb
- Potassium Carbonate - 1 lb
- Potassium Sodium Tartrate - 6¼ lb.
- Potassium Bromide - 1 lb
- Potassium Carbonate - 1 lb
- Potassium Phosphate - 2 lb
- Cupric Sulfate - 5 lb
- Ferric Ammonium Sulfate - 500 mL, 6 lb
- Ammonium Iodide - ½ lb
- Barium Chloride - 8 lb
- Cerium Nitrate - ½ lb
- Lanthanum Nitrate - ½ lb
- Mercuric Thiocyonate - 1 lb
- Ammonium Oxalite - 1 lb
- Sodium MetaBisulfate - 12 lb, 1 lb
- Sodium Bisulfate Monohydrate - 10 lbs
- CupFerrion - 1 oz.
- Propylene Carbonate - 1 gallon
- Sodium Bicarbonate - 1 lb
- Sodium Arsenite - 1 lb
- Sodium Sulfate - 1 lb
- Sodium Metasilicate - 3 lb
- Sodium Phosphate - 1 lb
- Sodium Iodide - ½ lb, ½ lb
- Sodium Hydrosulfate - 1 lb
- Sodium Dithionite - 4 lb
- Sodium Dichromate - 4 lb
- Sodium Bromate - 1 lb
- Sodium Oxalate - 1 lb, 1 lb
- Sodium Chloride - 1 lb
- Sodium Acetate - 250 mL
- Sodium Fluoride - 1 lb, 7 lbs
- Sodium Sulfite - 1 lb

#3 Inorganic Chemicals for Disposal

Rm 135 – Ferrous Ammonium Sulfate – 1lb.
Rm 14HA – Ammonium Acetate – 2lbs.
Ammonium BiFlouride – 1lbs.
Ammonium Molybdate – 2lbs
Ammonium Phosphate – 1lb.
Ammonium Sulfate – 2 lb.
Ascorbic Acid Powder – 9lb.
Sodium Acetate – 1lb.
Ferric Chloride – 1lb.
Cerric Nitrate – 1lb.
Sodium Carbonate – 1lb.
Ferrous Ammonium Sulfate – 2lb.
Tri-Sil Z – 25ml.
Ferrous Sulfamate – 50ml.
Potassium Permangate – 1 quart
$P(KH_2SO_4)$ 1 quart
Rm. 141-A Potassium Nitrate – 3lb.
Potassium Chloride – 1lb.
Potassium Carbonate – 1lb.
Cupric Nitrate – ¼lb.
Ferric Nitrate – 1lb., ¼lb.
Sodium Oxalate – 1lb.
Rm 141-A Potassium Permangate 250ml.
Rm. 141-A Bromo Oresol Purple Sodium – 5gram
Ammonium Citrate – 2lbs.
tetra propylammonium Hydroxide 25grams

Rm. 143 – Sodium Bisulfate – 1l
Sodium Bisulfate Monohydrate – 3lb.
Sodium Carbonate – 1lb.
Sodium Chloride – 6lb.
Sodium Chromate – 1lb.
Sodium Nitrate – 15lb.
Sodium Tartrate – ¼lb.
Sodium Thiosulfate – 1lb.
Urea – 1lb.
Acid Potassium Phthalate ¼lb.
Cuprous Chloride – 1lb.
Ferrous Ammonium Sulfate – 6lb.
Lithium Flouride – 2lb.
Magnesium Chloride – 1lb.
Nickel Nitrate – 1lb.
Potassium Bromate – 3lb.
Potassium Flouride – 1lb.
Potassium Iodide – 250g.
Potassium Hydrogen Phthalate – ¼lb.
Potassium Persulfate – 1lb
Bromine – 1lb.
Rm 151 – Cerric Sulfate in H_2SO_4 – 1pint
Rm. 155 – Phosphorus Pentoxide – 1lb.
Sodium Hydroxide – 1lb.
Rm. 154 – Sodium Acetate – 1lb.
Rm. 145 – Ammonium Oxalate – 5lbs.

#4 Organic Chemicals for Disposal

Rm. 154 Ascarite - 3 lb.

Rm. 141-A Sulfamic Acid - 100 grams (top of drum)
Hydroxylamine Hydrochloride - 115 grams
Dibutyl Butylphosphonate - 125 ml.
Collodion - 250 ml.
Methyl Isobutyl Ketone - 1 pint
Agle Sulanilic Acid in Acetic Acid - 1 pint
Li-O-Phenanthroline Ferrous Sulfate - 125 ml.

Rm. 143 Sulfamic Acid - 5 lbs (top of drum)
O-Tolidine Dihydrochloride - 1 lb.
Ascarite - 12 lbs.
Glycolic Acid - 1/4 lb. (top of drum)
Hydroxylamine Hydrochloride - 8 lbs.
Diethylene Triamine Penta acetic Acid - 1/4 lb.

Rm 141-A Hydroxylamine Hydrochloride - 1 lb.
Dibutyl Butyl phosphonate - 200 ml., 500 ml.
Dichloridimethylsilane - 200 ml.
N-Tridecane - 125 ml.
Formic Acid - 250 ml., 250 ml. (bottom of barrel)
I-So Amyl Alcohol - 1 pint
Amyl Acetate - 1 pint
Methymethocylate - 1 gallon
Tributylphosphate - 1 gallon
Butylsteorate - 2 gallons

Rm 139 150 Amyl Alcohol - 1 pint
Methylisobutyl Ketone - 5 pints

X= ~~save~~ +

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Note: Those items which require separate packa will go to the Central Landfill

ROOM 133 - OK

X	~~Tetrachlorethylene~~	~~1 pt.~~ +
X	~~Potassium Carbonate~~	~~1 lb.~~ +
X	~~Potassium Carbonate, Liquid~~	~~1 qt.~~ +
X	~~8-Quinolinol~~	~~1/4 lb.~~ +
X	~~Kodak D-19 Developer~~	~~22 lb.~~ +
X	~~Kodak D-8 Developer~~	~~45 lb.~~ +

Room 134 — O.K.

X	~~H_2SO_4~~	~~1 gal.~~ +
X	~~HCl~~	~~1 gal.~~ +
X	~~HNO_3~~	~~2 gal.~~ +
	Hydroiodic Acid	10 pts. — separate package
	Tetrachloroethylene	1 pt. — EHW

Room 135 - O.K.

	Oxalic Acid (Corrosive)	1 lb. — separate package
•	Ferrous Ammonium Sulfate	1 lb. — #3
•	Sodium Hydroxide (Corrosive)	1 lb. — separate package
X	~~Dowex 1-X8 Exchange Resin~~	~~3 lbs.~~ +
X	~~Dowex 1-X8 Exchange Resin~~	~~2 lbs.~~ +
X	~~AG SOW-X8 Exchange Resin~~	~~12 lbs.~~ +

141-A CABINET WITH SLIDING DOORS — O.K.

	Aluminum Chloride — don't mix with organics may explode on opening	1 lb. — separate package
	Aluminum Nitrate — see nitrates	1 lb. — separate package
•	Ammonium Acetate	2 lbs. — #3
	Ammonium Bifluoride	1 lb. — #3
•	Ammonium Molybdate	2 lbs. — #3
	Ammonium Phosphate	1 lb. — #3
	Ammonium Sulfate	2 lbs. — #3
	Ascorbic Acid Powder	9 lbs. — #3
	5-Amino-2 Naphtalene Sulfonic Acid	250 g. — EHW
	~~Sodium Meta Bisulfate~~	~~12 lbs.~~ #2
	Sodium Acetate	1 lb. — #3
	Ferric Chloride	1 lb. — #3
	Cerric Nitrate	1 lb. — #3
	~~Potassium~~ Iodide	~~1 lb.~~ #2
	Silver Nitrate - very reactive, caustic	4 oz. — EHW
	Sulfamic Acid	100 g. — #4
	Hydroxylamine Hydrochloride	115 g. — #4
	Phenol Red Sodium Salt	15 g. — EHW
	Sodium Carbonate	1 lb. — #3
	Ferrous Ammonium Sulfate	2 lb. — #3

REFRIGERATOR ACROSS FROM ROOM 157 — O.K.

Hypo-phosphorous Acid (reacts w/oxidizers forms phosphine)	3 pts.	separate package
~~Butyl Alcohol~~	~~1 pt.~~	#1
.5m TTA in Xylene	1 qt.	EHW
~~Valeric Acid~~	~~1 qt.~~	
~~TIOA in Xylene~~	~~1 qt.~~	#1
Dibutyl Butylphosphonate (reacts w/oxidizers)	125 ml.	#4
Nitrobenzoene	1 pt.	EHW
Xylene	1 pt.	EHW
Collodion	250 ml.	#4
Toluene	1 pt.	EHW
Methyl Isobutyl Ketone	1 pt.	#4
Hydrozine in H_2O	125 ml.	EHW
Tri-Sil Z	25 ml.	#3
Agle Sulanilic Acid in 50% Acetic Acid	1 pt.	#4
Ferrous Sulfamate	50 ml.	#3
~~Triethanolumine~~	~~1 pt.~~	#1
$KMnO_4$ (Potassium Permanganate) oxidizer	1 qt.	#3
P (KH_2SO_4)	1 qt.	#3
1-Naphthylamine-7-Sulfomic Acid 50% Acetic Acid	1 pt.	EHW
Li 10-Phenanthroline Ferrous Sulfate Complex	125 ml.	#4

Room 143 CABINET #1 - O.K.

~~Sodium Bromate~~	~~1 lb.~~	#2
Sodium Bisulfate	1 lb.	#3
Sodium Bisulfate Monohydrate	3 lbs.	#3
Sodium Carbonate	1 lb.	#3
~~Sodium Metabisulfate~~	~~1 lb.~~	#2
Sodium Chloride	6 lb.	#3
Sodium Chromate	1 lb.	#3
~~Sodium Dichromate~~	~~4 lbs.~~	#2
~~Sodium Dithionite~~	~~2 lbs.~~	#2
~~Sodium Flouride~~	~~8 lbs.~~	#2
~~Sodium Hydrosulfate~~	~~1 lb.~~	#2
~~Sodium Iodide~~	~~1/4 lb.~~	#2
Sodium Nitrate	15 lb.	#3
~~Sodium Phosphate~~	~~2 lbs.~~	#2
~~Sodium Oxalate~~	~~1 lb.~~	#2
~~Sodium Metasilicate~~	~~4 lbs.~~	#2
~~Sodium Sulfate~~	~~2 lbs.~~	#2
Sulfamic Acid	5 lbs.	#4
Sodium Tartrate	1/4 lbs.	#3
Sodium Thiosulfate	1 lb.	#3
O-tolidine Dihydrochloride	1 lb.	#4
Trioctylphosphine	25 g.	EHW
Urea	1 lb.	#3

Room 143 CABINET #1-O.K.(CONT'D)

~~Drierite $CaSO_4$~~	~~20 lbs.~~ +
Ascarite	12 lbs. — #4
Acid Potassium Phthalate	1/4 lbs. #3
~~Salicylic Acid~~	~~2 lbs.~~ #1
~~Ag-1 X8 Anion Resin~~	~~6 lbs.~~ +

Room 143 CABINET #2 — O.K.

~~Barium Chloride~~	~~8 lbs.~~ #2
~~Cerium Nitrate~~	~~1/4 lb.~~ #2
Benzion Anti-Oxime	25 g. — EHW
~~Arsenic Trioxide~~	~~1/4 lb.~~ +
~~Ceric Sulfate~~	~~1 lb.~~ +
Cuprous Chloride	1 lb. — #3
Glycolic Acid	1/4 lb. — #4
Mercuric Chloride	1/4 lb. — EHW
Ferrous Ammonium Sulfate	6 lbs. — #3
Lithium Flouride	2 lbs. — #3
Hydroxylamine Hydrochloride HH_2OH-HCl	8 lbs. — #4
Magnesium Chloride	1 lb. — #3
Magnesium Perchlorate	1 lb. — #5 separate package
~~Sodium Iodide~~	~~1/4 lb.~~ #2
~~Ferric Ammonium Sulfate~~	6 lbs. #2
~~N,N - A Methyl P-NitroSoaniline~~	~~25 g.~~ #1
~~Lanthanum Nitrate~~	~~100 g.~~ #2
Diethylene Triamine Penta-acetic Acid	1/4 lb. — #4
P - (Dimethylamino) - Benzaldehyde	300 g. — EHW
~~Mercuric Thiocyonate~~	~~1 lb.~~ #2
Nickel Nitrate	1 lb. — #3
~~Potassium Sodium Tartrate~~	~~6 1/4 lbs.~~ #2
Potassium Bromate	1 1/4 lb. — #3
~~Potassium Bromide~~	~~1 lb.~~ #2
~~Potassium Carbonate~~	~~1 lb.~~ #2
~~Potassium Chloride~~	~~1 lb.~~ #2
Potassium Flouride	1 lb. — #3
Potassium Iodide	250 g. — #3
Potassium Hydrogen Phthalate	1/4 lb. — #3
Potassium Persulfate	1 lb. — #3
~~Potassium Phosphate~~	~~2 lbs.~~ #2
~~Salicylic Acid~~	~~2 lbs.~~ #1
Silver Peroxide	100 g. — EHW
~~Sodium Arsenite~~	~~1 lb.~~ #2
~~Sodium Bicarbonate~~	~~1 lb.~~ #2

ROOM 143 CABINET #3 — O.K.

Bromine reacts with reducers	1 lb. — #3
Sodium Oxalate	1 lb. #2
Acid Ansenious	1 lb. — separate package

Room 141-A METAL CABINET — O.K.

Potassium Nitrate Crystals	3 lbs.	#3
Potassium Chloride	1 lb.	#3
Potassium Carbonate	1 lb.	#3
~~Cupferron~~	~~1 oz.~~	#2
Cupric Nitrate	1/4 lb.	#3
Ferric Nitrate	1 lb.	#3
Hydroxylamine Hydrochloride	1 lb.	#4
Amadac - F	50 g.	EHW
N-Phenylbenzohydroxamic Acid	25 g.	EHW
x ~~8-Quinolinol~~	~~1 oz.~~	+
x ~~8-Hydroxyquinoline~~	~~1/4 lb.~~	+
Tetrapropylammonium Hydroxide	25 g.	#3
~~Ammonium Iodide~~	~~1/4 lb.~~	#2
Ferric Nitrate	1/4 lb.	#3
~~Formaldehyde~~	~~1 pt.~~	#1
~~Sodium Chloride~~	~~1 lb.~~	#2
Sodium Oxalate	1 lb.	#3
~~Sodium~~ Flouride	~~1 lb.~~	#2
1,10 Phenonthroline	120 g.	EHW
x ~~Flouride Adjustment Buffer~~	~~1 lb.~~	+
Cupric Sulfate	~~5 lbs.~~	#2
+ ~~Orion Std. Solutions~~	~~8 pts.~~	+

Room 141-A ICE BOX — O.K.

Dibutyl Butylphosphonate reacts w/oxidizers	200 ml.	#4
Dichloridimethylsilane reacts w/oxidizer	200 ml.	#4
Hydrazine 35%	500 ml.	EHW
DBBP Di butyl butyl phosphonate	500 ml.	#4
x ~~Ammonium Bifloride~~	~~1 lb.~~	+
$KMnO_4$ (Potassium Permanganate)	250 ml.	#3
~~Sodium Acetate~~	~~250 ml.~~	#2
Hydrogen Peroxide	250 ml.	down the sink
N-Tridecane	125 ml.	#4
Formic Acid	250 ml.	#4
~~N-Butyl Alcohol~~	~~250 ml.~~	#1
~~Chloroform~~	~~250 ml.~~	#1
Petroleum Ether	25 ml.	separate package
CCl_4	50 ml.	EHW
~~Formaldehyde~~	~~250 ml.~~	#1
Nitrobenzene	1 kg.	EHW
Formic Acid	250 ml.	#4
Hydrazine 65% in H_2O	500 ml.	EHW
~~Ferric Ammonium Sulfate~~	~~500 ml.~~	#2
Hydroxylamine Nitrate 15% Ag Sol.	500 ml.	EHW
.5m TTA in xylene	1 gal.	EHW
~~Chloroform~~	~~1 gal.~~	#1
1% Oxine ~~in Xylene~~	250 ml.	#1

Room 141-A -O.K.

X	~~H_2SO_4~~	~~5 gal.~~ +
X	~~HF~~	~~4 gal.~~ +
X	~~H_3PO_4~~	~~1 gal~~ +
X	~~Hypophosphorous Acid 50%~~	~~10 pt.~~ +
X	~~HCl 3 (HCl)~~	~~8 gal~~ +
X	~~Acetic Acid~~	~~2 gal.~~ +
X	~~HNO_3~~	~~1 gal.~~ +
	Tetrachloroethylene	1 pt. — EHW

Room 151 FLAMMABLE CABINET (NEAR) O.K.

Nitrobenzene	6 pts. — EHW
~~Dibutyl Phosphate~~	~~1 pt.~~ #1
Ceric Sulfate in one Normal H_2SO_4	1 pt. — #3
1 SoAmyl Alcohol	1 pt. — #4
~~1-4~~-Dioxane	~~1 pt.~~ #1
Amyl Acetate reacts w/oxidizer	1 pt. — #4
2 Ethylhexylhydrogen Phosphite	125 ml. — EHW
~~Propylene Carbonate~~	~~1 gal.~~ #2
CCl_4	~~3~~-gal. #1
Methymethocylate	1 gal. — #4
TBP Tributyl phosphate	1 gal. — #4
Tetrachloroethylene	1 pt. — EHW
Butylsteorate reacts w/oxidizer	2 gal. — #4
~~1, 1, 2, 2-Tetrabromoethane~~	~~1 gal.~~ #1

FLAMMABLE CABINET NEXT TO ROOM 139 -O.K.

	150 Amyl Alcohol	1 pt. — #4
	~~Butylacetate~~	~~5 gal.~~ #1
	~~Xylene~~	~~4 pts.~~ #1
X	~~Isopropyl Alcohol~~	~~2 gal.~~ +
X	~~Methanol~~	~~36 pts.~~ +
X	~~Acetone~~	~~36 pts.~~ +
	Methylisobutyl Ketone	5 pts. — #4

141-A CABINET WITH SLIDING DOORS (CONT'D) O.K.

	~~Sodium Sulfite~~	~~1 lb.~~ #2
X	~~Orion Tisab III~~	~~250 ml.~~ ~~+~~
X	~~Silver Oxide~~	~~150 g.~~ ~~+~~
	~~Salicylic Acid~~	~~.9 lbs.~~ #1
	Bromo Oresol Purple Sodium Salt	5 g. — #3
X	~~Cation Exchange Resin Ag-50W-X8 100-200 Mesh Hydrogen Form~~	~~1 lb.~~ ~~+~~
X	~~An Ion Exchange Resin Biorex-9 50-100 mesh Chloride Form~~	~~10 lb.~~ ~~+~~
	~~Sodium Bisulfate Monohydrate~~	~~10 lbs.~~ #2
	Ammonium Citrate	2 lbs. — #3
X	~~Driecite~~ ~~($CaSe_4$)~~	~~10 lbs.~~ ~~+~~

Room 155 O.K.

	Phosphorous Pentoxide	1 lb. — #3
X	~~Ferrous Ammonium Sulfate~~	~~1 lb.~~ ~~+~~
	Silver Nitrate	1/4 lb. — EHW
	~~Ammonium Oxalite~~	~~1 lb.~~ #2
	Sodium Hydroxide	1 lb. #3
	~~Fuming HNO_3 Fone~~	~~1/2 gal.~~ — separately packaged
X	~~HF~~	~~1 gal.~~ ~~+~~
X	~~H_2SO_4~~	~~4 gal.~~ ~~+~~
X	~~HCl~~	~~5 gal.~~ ~~+~~
	.25m Lead Nitrate	1 qt. - EHW

Room 154 - O.K.

	Sodium Acetate	1 lb. — #3
	Magnesium Perchlorate - explosive oxidizer	3 lb. — separate package
	Ascarite	3 lb. — #4
	Hydroiodic Acid	20 pts. — separate package

Room 152 - O.K.

X	~~HNO_3~~	~~3 gal.~~ ~~+~~

Room 145 - O.K.

Ammonium Oxalate 5-lbs. — #3

#4 Organic Chemicals for Disposal
Central Landfill

Rm.154 Ascarite-3lb.

Rm.141-A Sulfamic Acid-100 grams (top of drum)
Hydroxylamine Hydrochloride-115 grams
Dibutyl Butylphosphonate-125ml.
Collodion-250ml.
Methyl Isobutyl Ketone-1pint
Agle Sulanilic Acid in Acetic Acid-1pint
Li-O-Phenanthroline Ferrous Sulfate-125ml.

Assume 55-gal drum

Rm.143 Sulfamic Acid-5lbs (top of drum)
O-Tolidine Dihydrochloride-1lb.
Ascarite-12lbs.
Glycolic Acid-¼lb. (top of drum)
Hydroxylamine Hydrochloride-8lbs.
Diethylene Triamine Penta acetic Acid-¼lb.

Rm141-A Hydroxylamine Hydrochloride-1lb.
Dibutyl Butylphosphonate-200ml., 500ml.
Dichloridimethylsilane-200ml.
N-Tridecane-125ml.
Formic Acid-250ml., 250ml. (bottom of barrel)
I-So Amyl Alcohol-1pint
Amyl Acetate-1pint
Methy methocylate-1 gallon
Tributylphosphate-1 gallon
Butylsteorate-2 gallons
Rm.134 I-So Amyl Alcohol-1pint
Methylisobutyl Ketone-5pints

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#4 Organic Chemicals for Disposal
Central Landfill

Rm.154 Ascarite-3lb.

Rm.141-A Sulfamic Acid- 100 grams (top of drum)
Hydroxylamine Hydrochloride-115 grams
Dibutyl Butylphosphonate-125ml.
Collodion - 250ml.
Methyl Isobutyl Ketone-1pint
Agle Sulanilic Acid in Acetic Acid-1pint
Li-O-Phenanthroline Ferrous Sulfate-125ml.

Assume 55-gal drum

Rm.143 Sulfamic Acid-5lbs (top of drum)
O-tolidine Dihydrochloride -1lb.
Ascarite- 12 lbs.
Glycolic Acid- ¼ lb. (top of drum)
Hydroxylamine Hydrochloride-8lbs.
Diethylene Triamine Penta acetic Acid-¼lb.

Rm141-A Hydroxylamine Hydrochloride-1lb.
Dibutyl Butyl phosphonate- 200ml., 500ml.
Dichloridimethylsilane-200ml.
N-Tridecane—125ml.
Formic Acid- 250ml., 250ml. (bottom of barrel)
I- So Amyl Alcohol -1pint
Amyl Acetate - 1pint
Methy methocylate -1 gallon
Tributylphosphate- 1 gallon
Butylsteorate-2 gallons

Rm.139 ISO Amyl Alcohol- 1pint
Methylisobutyl Ketone- 5pints

0000028

Chemicals Requiring Separate Packaging (Onsite Disposal)

Rm. 135 Oxalic Acid - 1lb.
Sodium Hydroxide - 1lb.
Rm 141-A Aluminum Chloride - 1lb.
Aluminum Nitrate - 1lb.
Hypo-phosphorus Acid - 3 pints
Rm. 143 Magnesium Perchlorate - 1 lb.
Acid Arsenious - 1lb.
Rm. 141-A Petroleum Ether - 25ml.
Rm. 154 Magnesium Perchlorate - 3lb.
Rm 134 Hydroiodic Acid - 10 pints
Rm. 154 Hydroiodic Acid - 20 pints

Chemicals Requiring Separate Packaging (Onsite Disposal)
Central Landfill

		Est. burial volume ft^3
Rm. 135	Oxalic Acid - 1lb.	.03
	Sodium Hydroxide - 1lb.	.03
Rm 141-A	Aluminum Chloride - 1lb.	.03
	Aluminum Nitrate - 1lb.	.03
	Hypo-phosphorus Acid - 3 pints	.05
Rm. 143	Magnesium Perchlorate - 1 lb.	.03
	Acid Arsenious - 1lb.	.03
Rm. 141-A	Petroleum Ether - 25ml.	.01
Rm. 154	Magnesium Perchlorate - 3lb.	.05
Rm 134	Hydroiodic Acid - 10 pints	.30
" 154	Hydroiodic Acid - 20 pints	[illegible]

Each packaged separately.

0000040

Extremely Hazardous Waste

To be packaged separate from other columns	Package as is (separate other col.
Rm. 134 - tetrachloroethylene - 1 pint	Rm 141-A - Silver Nitrate - 4 oz.
Rm. 141-A - 5 amino 2 naphtalene Sulfonic Acid - 250 grams	Rm 143 - Mercuric Chloride - 1/4 lb.
Phenol Red Sodium Salt - 15 gram	Rm. 143 - Silver Peroxide - 100 gra
.5 m TTA in Xylene - 1 quart	Rm 141-A - Hydroxylamine Nitrate 15% Aq Solution
Nitrobenzene - 1 pint	Rm. 155 - Silver Nitrate - 1/4 lb.
Xylene - 1 pint	.25 m Lead Nitrate - 1 quart
Toluene - 1 pint	
Hydrazine in H_2O - 125 ml.	
1-Naphthylamine-7-Sulfonic Acid - 1 pint	
Rm. 143 Trioctylphosphine - 25 gram	
Benzion Anti Oxime - 25 gram	
P-(Dimethylamino) Benzaldehyde - 300 gram	
Rm. 141-A Amadac-F - 50 grams	
N-Phenylbenzohydroamic Acid - 25 grams	
1, 10-Phenonthroline - 120 grams	
Hydrazine 35% - 500 ml.	
Carbon tetrachloride - 50 ml.	
Nitrobenzene - 1 Kg.	
Hydrazine 65% - 500 ml.	
.5 TTA in xylene - 1 gallon	
Tetrachloroethylene - 1 pint	
Rm. 151 - Nitrobenzene - 6 pints	
2-Ethylhexyl hydrogen Phosphite - 125 ml.	
Tetrachloroethylene - 1 pint	

Offsite Disposal

Extremely Hazardous Waste

To be packaged separate from other columns	Package as is (separate other colu
Rm. 134 - tetrachloroethylene - 1 pint	Rm 141-A - Silver Nitrate - 4oz.
Rm. 141A - 5 amino 2 naphtalene Sulfonic Acid - 250 grams	Rm 143 - Mercuric Chloride - 1/4 lb.
Phenol Red Sodium Salt - 15 gram	Rm. 143 - Silver Peroxide - 100 gram
.5 m TTA in Xylene - 1 quart	Rm 141-A - Hydroxylamine Nitrate 15% Aq Solution
Nitrobenzene - 1 pint	Rm. 155 - Silver Nitrate - 1/4 lb.
Xylene - 1 pint	.25 m Lead Nitrate - 1 quart
Toluene - 1 pint	
Hydrazine in H_2O - 125 ml.	
1-Naphthylamine-7-Sulfonic Acid - 1 pint	see 55-gal drum
Rm. 143 Trioctyl phosphine - 25 gram	see 30 gal drum
Benzion Anti Oxime - 25 gram	
P-(Dimethylamino) Benzaldehyde - 300 gram	
Rm. 141-A Amadac-F - 50 grams	
N-Phenylbenzohydroamic Acid - 25 grams	
1,10-Phenon throline - 120 grams	
Hydrazine 35% - 500 ml.	
Carbon tetrachloride - 50 ml.	
Nitro benzene - 1 Kg.	
Hydrazine 65% - 500 ml.	
.5 TTA in xylene - 1 gallon	
Tetrachloroethylene - 1 pint	
Rm. 151 - Nitrobenzene - 6 pints	
2-Ethylhexyl hydrogen Phosphite - 125 ml.	
Tetrachloroethylene - 1 pint	

0000042

E-8741

REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

I. GENERATION: The Generator should complete Part I and forward this form to: WS&DT 202-S/200 West Rockwell

A. Generator's Name: W. R. Buchanan Phone: 3-2181 Address: 234-5/200W Company: RHO

B. Custodian's Name: B. R. Fitzpatrick Phone: 3-2283 Address: 234-5/200W Company: RHO

C. Waste Description: (If more than five items, attach additional sheets)

	Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One) Sol.	Liq.	Gas	Hazard Class
1	SEE ATTACHED SHEETS							
2.								
3.								
4								
5.								

D. Have appropriate labels been affixed to containers? YES Not required

E. Have efforts been made to recycle (e.g., excess) waste? WASTE OF NO USE

F. Has waste been treated in any manner? NO If so, how?

G. Storage Location 234-5 LAB/200W RHO

H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: HAS BEEN SURVEYED

Generator's Signature W R Buchanan Date: 12-3-82

II. APPROVAL

A. Approved for disposal by Name: G. R. Cox Phone: 3-3679 Address 202-S/200-W Co.: Rockwell

Date: 2/16/83 Signature: G. R. Cox

B. Packaging Requirements (specify): As specified on attached sheets. FHW will go to the new storage facility in 200-West area until disposed of offsite.

C. Disposal Location (check one) X Chemical Trench, Asbestos Trench, 212-P (Storage), as specified Other

III. TRANSPORTATION/DISPOSAL

A. Transporter(s) Name: [illegible] Phone: 6-6654 Address: 1171 Company RHO

B. Date Transported/Disposed: Chemical Trench 6-1-88

C. Transporter(s) Signature [illegible]

D E Phelps

000224 700-174.1 (N

Offsite Disposal

Extremely Hazardous Waste

To be packaged separate from other columns

Rm. 134 - Tetrachloroethylene - 1 pint

Rm. 141A - 5 amino 2 naphtalene Sulfonic Acid - 250 grams
Phenol Red Sodium Salt - 15 gram
.5 m TTA in Xylene - 1 quart
Nitrobenzene - 1 pint
Xylene - 1 pint
Toluene - 1 pint
Hydrazine in H_2O - 125 ml.
1-Naphthylamine-7-Sulfonic Acid - 1 pint

Rm. 143 Trioctylphosphine - 25 gram
Benzion Anti Oxime - 25 gram
P-(Dimethylamino) Benzaldehyde - 300 gram

Rm. 141-A Amadac-F - 50 grams
N-Phenylbenzohydroamic Acid - 25 grams
1,10-Phenon throline - 120 grams
Hydrazine 35% - 500 ml.
Carbon tetrachloride - 50 ml.
Nitrobenzene - 1 Kg.
Hydrazine 65% - 500 ml.
.5 TTA in xylene - 1 gallon
Tetrachloroethylene - 1 pint

Rm. 151 - Nitrobenzene - 6 pints
2-Ethylhexyl hydrogen Phosphite - 125 ml.
Tetrachloroethylene - 1 pint

Package as is (separate other co

Rm 141-A - Silver Nitrate - 4 oz.
Rm 143 - Mercuric Chloride - 1/4 lb.
Rm. 143 - Silver Peroxide - 100 gra
Rm 141-A - Hydroxylamine Nitrate 15% Aq Solution
Rm. 155 - Silver Nitrate - 1/4 lb.
.25 m Lead Nitrate - 1 quart

#4 Organic Chemicals for Disposal
Central Landfill

Rm.154 Ascarite-3%

Rm.141-A Sulfamic Acid-100 grams (top of drum)
Hydroxylamine Hydrochloride-115 grams
Dibutyl Butylphosphonate-125ml.
Collodion-250ml.
Methyl Isobutyl Ketone-1pint
Agle Sulanilic Acid in Acetic Acid-1pint
Li-70-Phenanthroline Ferrous Sulfate-125ml.

Rm.143 Sulfamic Acid-5lbs (top of drum)
O-tolidine Dihydrochloride-1lb.
Ascarite-12lbs.
Glycolic Acid-¼lb. (top of drum)
Hydroxylamine Hydrochloride-8lbs.
Diethylene Triamine Penta acetic Acid-¼lb.

Rm141-A Hydroxylamine Hydrochloride-1lb.
Dibutyl Butyl phosphonate-200ml., 500ml.
Dichloridimethyl silane-200ml.
N-Tridecane-125ml.
Formic Acid-250ml., 250ml. (bottom of barrel)
I-So Amyl Alcohol-1pint
Amyl Acetate-1pint
Methyl methocylate-1 gallon
Tributyl phosphate-1 gallon
Butyl steorate-2 gallons

Rm139 I-So Amyl Alcohol-1pint
Methylisobutyl Ketone-5pints

000226

Chemicals Requiring Separate Packaging (Onsite Disposal)
Central Landfill

Rm. 135 Oxalic Acid - 1lb.
Sodium Hydroxide - 1lb.
Rm 141-A Aluminum Chloride - 1lb.
Aluminum Nitrate - 1lb.
Hypo-phosphorus Acid - 3 pints
Rm. 143 Magnesium Perchlorate - 1 lb.
Acid Arsenious - 1lb.
Rm. 141-A Petroleum Ether - 25ml.
Rm. 154 Magnesium Perchlorate - 3lb.
Rm 134 Hydroiodic Acid - 10 pints
Rm. 154 Hydroiodic Acid - 20 pints

E-87417

REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE.

I. GENERATION: The Generator should complete Part I and forward this form to: WS&DT 202-S/200 West Rockwell

A. Generator's Name: W. R. Buchanan Phone: 3-2181 Address: 234-5/200W Company: RHO

B. Custodian's Name: B. R. Fitzpatrick Phone: 3-2283 Address: 234-5/200W Company: RHO

C. Waste Description: (If more than five items, attach additional sheets)

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One) Sol.	Liq.	Gas	Hazard Class
1. SEE ATTACHED SHEETS							
2.							
3.							
4.							
5.							

D. Have appropriate labels been affixed to containers? YES Not required

E. Have efforts been made to recycle (e.g., excess) waste? WASTE OF NO USE

F. Has waste been treated in any manner? NO If so, how?

G. Storage Location 234-5 LAB/200W RHO

H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: HAS BEEN SURVEYED

Generator's Signature W R Buchanan Date: 12-3-82

II. APPROVAL

A. Approved for disposal by Name: G.R. Cox Phone: 3-3679 Address 202-S/200-W Co.: Rockwell

Date: 2/16/83 Signature: G. R. Cox

B. Packaging Requirements (specify): As specified on attached sheets; EHW will go to the new storage facility in 200-West area until disposed of offsite.

C. Disposal Location X Chemical Trench, Asbestos Trench,

(check one) 212-P (Storage), as specified Other

III. TRANSPORTATION/DISPOSAL

A. Transporter(s) Name: [illegible] Phone: 6-6654 Address: 1171 Company RHO

B. Date Transported/Disposed: Chemical Trench 6-1-88

C. Transporter(s) Signature: [illegible]

D E Phelps

000228

BC-6700-174.1 (N

Offsite Disposal
Extremely Hazardous Waste

To be packaged separate from other columns

Rm. 134 - tetrachloroethylene - 1 pint
Rm. 141A - 5 amino 2 naphtalene Sulfonic Acid - 250 grams
Phenol Red Sodium Salt - 15 gram
.5 m TTA in Xylene - 1 quart
Nitrobenzene - 1 pint
Xylene - 1 pint
Toluene - 1 pint
Hydrazine in H_2O - 125 ml.
1-Naphthylamine-7-Sulfonic Acid - 1 pint
Rm. 143 Trioctylphosphine - 25 gram
Benzion Anti Oxime - 25 gram
P-(Dimethylamino) Benzaldehyde - 300 gram
Rm. 141-A Amadac-F - 50 grams
N-Phenylbenzohydroamic Acid - 25 grams
1,10-Phenonthroline - 120 grams
Hydrazine 35% - 500 ml.
Carbon tetrachloride - 50 ml.
Nitro benzene - 1 Kg.
Hydrazine 65% - 500 ml.
.5 TTA in xylene - 1 gallon
Tetrachloroethylene - 1 pint
Rm. 151 - Nitrobenzene - 6 pints
2-Ethylhexyl hydrogen Phosphite - 125 ml.
Tetrachloroethylene - 1 pint

Package as is (separate other c

Rm 141-A - Silver Nitrate - 4 oz.
Rm 143 - Mercuric Chloride - 1/4 lb.
Rm. 143 - Silver Peroxide - 100 gra
Rm 141-A Hydroxylamine Nitrate 15% Aq Solution
Rm. 155 - Silver Nitrate - 1/4 lb.
.25 m Lead Nitrate - 1 quart

#4 Organic Chemicals for Disposal
Central Landfill

Rm.154 Ascarite-3lb.

Rm.141-A Sulfamic Acid- 100 grams (top of drum)
Hydroxylamine Hydrochloride-115 grams
Dibutyl Butylphosphonate- 125ml.
Collodion - 250ml.
Methyl Isobutyl Ketone- 1pint
Agle Sulanilic Acid in Acetic Acid - 1pint
Li-O-Phenanthroline Ferrous Sulfate-125ml.

Rm.143 Sulfamic Acid- 5lbs (top of drum)
C-tolidine Dihydrochloride -1lb.
Ascarite- 12lbs.
Glycolic Acid - ¼lb. (top of drum)
Hydroxylamine Hydrochloride-8lbs.
Diethylene Triamine Penta acetic Acid-¼lb.

Rm141-A Hydroxylamine Hydrochloride-1lb.
Dibutyl Butyl phosphonate- 200ml., 500ml.
Dichloridimethylsilane-200ml.
N-Tridecane—125ml.
Formic Acid- 250ml., 250ml. (bottom of barrel)
i- So Amyl Alcohol -1pint
Amyl Acetate - 1pint
Methy methocylate -1 gallon
Tributylphosphate- 1 gallon
Butylsteorate-2 gallons

Rm139 50% Amyl Alcohol- 1pint
Methylisobutyl Ketone- 5pints

000230

Chemicals Requiring Separate Packaging (Onsite Disposal)
Central Landfill

Rm. 135	Oxalic Acid - 1lb.
	Sodium Hydroxide - 1lb.
Rm 141-A	Aluminum Chloride - 1lb.
	Aluminum Nitrate - 1lb.
	Hypo-phosphorus Acid - 3 pints
Rm. 143	Magnesium Perchlorate - 1 lb.
	Acid Arsenious - 1lb.
Rm. 141-A	Petroleum Ether - 25ml.
Rm. 154	Magnesium Perchlorate - 3lb.
Rm 134	Hydroiodic Acid - 10 pints
Rm. 154	Hydroiodic Acid - 20 pints

DISPOSAL PACKET NUMBER

P83-028

..71 anifest

REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

PNL-83-001

1-27

I. GENERATION: The Generator should complete Part I and forward this form to: WS&DT, 202-S/200 West, Rockwell

A. Generator's Name: Jeene M. Hobbs Phone: 376-1631 Address: 3762/300 Area Company: PNL

B. Custodian's Name: Fred Burton Phone: 375-2031 Address: LSL-II/3000Area Company: PNL

C. Waste Description: (If more than five items, attach additional sheets)

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One) Sol.	Liq.	Gas	Hazard Class
1 50:50 Methanol Water Mixture	7 gal.	1 gal-glass	7		X		flammable liquid
2 25:25:25:25 Methanol, water, Benzene, hexane mix	1 gal.	1gal-glass	1		X		flammable liquid
3 50:50 Benzene -Hexane Mix	1 gal.	1 gal-glass	1		X		flammable liquid
4 Crude Oil	1/2 gal.	1 gal-glass	1		X		flammable liquid
* 5 50:50 PCS-acetonitrile mixture	14 gal.	1 gal-glass	14		X		flammable liquid

D. Have appropriate labels been affixed to containers? _____ Not required {Labels will be affixed after packaging if applicabl

E. Have efforts been made to recycle (e.g., excess) waste? N/A

F. Has waste been treated in any manner? NO XXXXXXXX Please give packaging instructions

G. Storage Location 332 Building/300 Area

H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: _____

Generator's Signature: Jeene M Hobbs Date: 26 JANUARY 83

*PCS is a proprietary xylene base scintillation solution.

II. APPROVAL

A. Approved for disposal by Name: G.R. Cox Phone: 3-3679 Address 202-S/200-W Co.: Rockwell

Date: January 28, 1983 Signature: G.R. Cox

B. Packaging Requirements (specify): _____

C. Disposal Location: #1,2,4 Chemical Trench, _____ Asbestos Trench, _____

(check one) _____ 212-P (Storage), #3&5 store at chemical trench on pallets with plastic covering for offsite shipment and disposal. Other Now 2727-5.

III. TRANSPORTATION/DISPOSAL

Transporter(s) Name L.G. Davis Phone: 65857 Address: 1171 Company R.H.O

B. Date Transported/Disposed: 6-2-85

C. Transporter(s) Signature: Lane G. Davis

0000046

BC-6700-174.1 (N-1-82)

DISPOSAL PACKET NUMBER

P83-029

REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

PNL - 83 - 009

3|7

I. GENERATION: The Generator should complete Part I and forward this form to: WS&DT, 202-S/200 West, Rockwell

A. Generator's Name: Jeene Hobbs Phone: 6-1631 Address: 3762/300 Area Company: PNL

B. Custodian's Name: Fred Burton Phone: 5-2031 Address: LSL-2/3000 Area Company: PNL

C. Waste Description: (If more than five items, attach additional sheets)

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One) Sol.	Liq.	Gas	Hazard Class
1.25:25:25:25 methanol, water, benzene, hexane	.5 gal mix	glass	5		X		flammable liq (EHW)
2.							
3.tetrahydrofuran	12gal	glass	12		X		flammable liq
4.ethyl ether	1 gal	glass	1		X		flammable liq
5.isopropyl ether	10 #	2 glass 3 metal	5		X		flammable liq (EHW)

D. Have appropriate labels been affixed to containers? _____ Not required _____ The lab packs will be labeled w/flammable Liquid labels and waste labels.

E. Have efforts been made to recycle (e.g., excess) waste? no NA

F. Has waste been treated in any manner? no If so, how? _____

G. Storage Location: 332 Bldg/300 Area

H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: _____

Generator's Signature: Jeene Hobbs *Jeene M Hobbs* Date: 4 May 1983

II. APPROVAL

A. Approved for disposal by Name: G.R.Cox Phone: 3-3679 Address 202-S/200-W Co.: Rockwell

Date: May 18, 1983 Signature: *G. R. Cox*

B. Packaging Requirements (specify): #1,3,4,5,6,9,10 will be shipped offsite in 55 gallon drums. #7,8,12 will go to Central Landfill.

C. Disposal Location: X Chemical Trench, _____ Asbestos Trench,

(check one) _____ 212-P (Storage), 222-S (offsite) Other

III. TRANSPORTATION/DISPOSAL

A. Transporter(s) Name: L.G. Ollis Phone: 66654 Address: 1171 Company RHO

B. Date Transported/Disposed: 6-2-83

C. Transporter(s) Signature: *Lance H Davis*

0000096

BC-6700-174.1 (N-1-82)

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One) Sol.	Liq.	Gas	Hazard Class
*6. 50:50 PCS-acetonitrile mixture	7 gal	glasss	7		X		flammable Liq (EHW)
7. Dioxane	1 3/4 gal	glass	4		X		Flammable (DW) 0.8
8. Bromine	2 qt	glass in metal	2		X		Corrosive 0.8
# 9. CO_{2m} Met	1 gal	glass	1		X		flammable & strong base poison (EHW)
10. methylene glycol monomethyl ether	1 gal	glass	1		X		(EHW)
11.							
12. perchloric acid	1 pt	glass	1		X		Oxidizer 0.1
13.							
14.							
15.							
16.							
17.							
18. *PCS is a proprietary xylene based scintillation solution.							
19. #CO_2 trapping agent							
20.							
21.							
22.							
23.							
24.							
25.							
26.							
27.							
28.							
29.							
30.							
31.							
32.							
33.							
34.							0000057

DISPOSAL PACKET NUMBER

P83-030

REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

I. GENERATION. The Generator should complete Part I and forward this form to: WERDT 202-S 200 West Rockwell

A. Generator's Name: Jeene Hobbs Phone: 6-1631 Address: 3762/300 Area Company: PNL

B. Custodian's Name: Mark Engelhard Phone: 5-2719 Address: PSL/3000Area Company: PNL

C. Waste Description: (If more than five items, attach additional sheets)

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One) Sol.	Liq.	Gas	Hazard Class
1. Nitric Acid 90%	3#	glass in foam	3		X		Oxidizer
2. Phosphoric Acid 85%	30 pt	glass	6		X		corrosive material
3. Hydrochloric Acid 37%	66#	glass	11		X		corrosive material
4. Glacial Acetic Acid	25#	glass	5		X		corrosive material
5. Nitric Acid	15#	glass	3		X		corrosive/oxidizer

D. Have [illegible] been affixed to containers? _____ Not required _____ They will be.

E. Have efforts been made to recycle (e.g., excess) waste? no

F. Have [illegible] been treated in any manner? no If so, how? _____

G. [illegible] PSL/3000Area will be transferred to 332 for disposal

H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been [illegible] to the best of my knowledge." Survey Card Number: _____

Generator's Signature: Jeene Hobbs Jeene M Hobbs Date: 2 June 83

II. APPROVAL

A. Approved for disposal by Name: _____ Phone: _____ Address _____ Co.: _____

Date: _____ Signature: _____

B. Packaging Requirements (specify): _____

C. [illegible] Location: _____ Chemical Trench, _____ Asbestos Trench,

[illegible] _____ 212-P (Storage), _____ Other

[illegible] 4654 Address: 1111 Company: RHO

000264

Generic Name	Quantity	Type of Container	Number of Containers	(Check one) Sol.	Liq.	Gas	Hazard Class
6. Magnesium Oxide	1#	glass	1	X			
7. Hydrofloric Acid 52%	20#	plastic	2		X		corrosive material
8. Bromine	1#	glass in cardboard(?)	1	X			corrosive material
9. Sulfuric Acid	9#	glass	1	X			corrosive material
10. Mixture:7% HF, 20% HNO_3	1/2 gal	plastic	1	X			corrosive material
11. 5% HCl, 68% water							
12.							
13.							
14							
15.							
16.							
17							
18							
19							
20							
21							
22.							
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32							
33							
34.							

000265

SC-6750-174 2 (N-1-82)

DISPOSAL PACKET NUMBER

P83-031

1/1

REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

2-37

I. GENERATION: The Generator should complete Part I and forward this form to: WS&DT
202-S/200 West
Rockwell

A. Generator's Name: J.A. McIntyre Phone: 6-6131 Address: 747 Bldg Company: HEHF

B. Custodian's Name: same Phone: _____ Address: _____ Company: _____

C. Waste Description: (If more than five items, attach additional sheets)

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One) Sol.	Liq.	Gas	Hazard Class
1. Dioctyl Sebacate (can react w/oxidizer)	46 lbs.	Tin	2	x			
2.							
3.							
4.							
5.							

describing material

D. Have appropriate labels been affixed to containers? x Not required _____

E. Have efforts been made to recycle (e.g., excess) waste? no

F. Has waste been treated in any manner? yes If so, how? liquid made solid by vermiculite

G. Storage Location: 747 Bldg

H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: _____

Generator's Signature: [signature] Date: 4/13/83

II. APPROVAL

A. Approved for disposal by Name: G.R. Cox Phone: 3-3679 Address: 202-S/200-W Co.: Rockwell

Date: May 10, 1983 Signature: [signature]

B. Packaging Requirements (specify): Absorb liquid

C. Disposal Location: X Chemical Trench, _____ Asbestos Trench,

(check one) _____ 212-P (Storage), _____ Other

III. TRANSPORTATION/DISPOSAL

Transporter(s) Name: L. A. Davis Phone: 6-6659 Address: 1071 Company: RHO

Date Transported/Disposed: 6-6-83

C. Transporter(s) Signature: [signature]

Chemical Trench 6-6-83 [signature]

000009 BC-6700-174.1 (N-1-82)

DISPOSAL PACKET NUMBER

P83-032

REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

3-33

GENERATION: The Generator should complete Part I and forward this form to: WS&DT, 202-S/200 West, Rockwell

A. Generator's Name: PUREX Oper. Phone: 3-2833 Address: 202-A/200E Company: Rockwell Hanford

B. Custodian's Name: R.A Polk Phone: 3-2323 Address: 202-A/200E Company: Rockwell Hanford

C. Waste Description: (If more than five items, attach additional sheets)

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One) Sol.	Liq.	Gas	Hazard Class
1. FERROUS SULFAMATE	125 LB	FIBER DRUM	17	✓			—
2. HYDRAZINE	EMPTY	30 GAL METAL DRUM	3	✓			
3. HYDROXYLAMINE Nitrate	MT	55-GAL METAL DRUM	12	✓			
4. PAINTERS WASTE		55-GAL METAL DRUMS	3	✓			
5. RAGS, Thinner Etc	325 LB						

D. Have appropriate labels been affixed to containers? Yes Not required —

E. Have efforts been made to recycle (e.g., excess) waste? Yes

F. Has waste been treated in any manner? NO If so, how? —

G. Storage Location: 202-A, PUREX, 200-EAST, DOCK #3

H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: NA

Generator's Signature: R.A. Polk Date: 5/23/83

II. APPROVAL

A. Approved for disposal by Name: G.R. Cox Phone: 3-3679 Address 202-S/200W Co.: Rockwell

Date: June 6, 1983 Signature: Harry R. Cox

B. Packaging Requirements (specify): Acceptable as listed

C. Disposal Location: X Chemical Trench, ____ Asbestos Trench,

(check one) ____ 212-P (Storage), ____ Other

III. TRANSPORTATION/DISPOSAL

A. Transporter(s) Name: J.W. Cox Phone: 66654 Address: 1171 Company RHO

B. Date Transported/Disposed: ____

C. Transporter(s) Signature: John W. Cox

0000109

BC-6700-174.1 (N-1-82)

DISPOSAL PACKET NUMBER

P83-033

REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

4/13

I. GENERATION: The Generator should complete Part I and forward this form to: WS&DT 202-S/200 West Rockwell

A. Generator's Name: R.A.Polk Phone: 3-2323 Address: 202-A/200-E Company: Rockwell

B. Custodian's Name: R.A.Polk Phone: 3-2323 Address: 202-A/200-E Company: Rockwell

C. Waste Description: (If more than five items, attach additional sheets)

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One) Sol.	Liq.	Gas	Hazard Class
1.							
2. See Attached List							
3.							
4.							
5.							

D. Have appropriate labels been affixed to containers? _____ Not required X

E. Have efforts been made to recycle (e.g., excess) waste? N/A

F. Has waste been treated in any manner? N/A If so, how? _____

G. Storage Location: 202-A/200-East Loading Dock

H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: N/A

Generator's Signature: (Open Request) Date: June 20, 1983

II. APPROVAL

A. Approved for disposal by Name: G.R. Cox Phone: 3-3679 Address: 202-S/200-W Co.: Rockwell

Date: June 20, 1983 Signature: G.R. Cox

B. Packaging Requirements (specify): Empty Containers - Open Request

C. Disposal Location: X Chemical Trench, _____ Asbestos Trench,

(check one) _____ 212-P (Storage), _____ Other

III. TRANSPORTATION/DISPOSAL Open Request for material noted - document numbers only

Transporter(s) Name: J.W. Cox Phone: 6-6654 Address: 1171 Company RHO

Date Transported/Disposed: _____

C. Transporter(s) Signature: John Wayne Cox

0000156

BC-6700-174.1 (N-1-82)

84-8000-10110-001

DON'T SAY IT --- *Write It!*

4-13

TO R.A. Polk/Shift Manager 202-A

DATE June 20, 1983

FROM Gary R. Cox/Hazardous Waste Cooridinator

Re: Empty Container Disposal From Chemical Operations At Purex.

A review of the empty chemical containers emanating from Purex Operations (listed on your letter of May 27-PS-017-83) indicates that the following disposal options are available: A.) The Sugar, Soda Ash, QuickSorb, Limestone, and Tartaric bags may be disposed of as trash in the dumpsters; B.) The Sodium Nitrate, Sodium Nitrite, Sulfamic Acid, Calcium Nitrate, Oxalic Acid, Ferrous Sulfamate, Potassium Permanganate, Hydrogen Peroxide, and Oxalic may be disposed of together in the designated dumpster to be placed at the 202-A loading dock; C.) The Hydrazine and Hydroxylamine Nitrate must be disposed of separately to the Central Landfill. Since these are 55 gallon metal/plastic drums, this should present no problems.

Attached you will find a copy of the approved-open disposal request for these materials. This will allow you to call Transportation (Dennis Poor) as needed to effect disposal.

cc: H. Boynton
D. Poor

"TO MAKE LIFE LAST, PUT SAFETY FIRST"

0000157

REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

4/13

I. GENERATION: The Generator should complete Part I and forward this form to: WS&DT, 202-S/200 West, Rockwell

A. Generator's Name: R.A.Potk Phone: 3-2323 Address: 202-A/200-E Company: Rockwell

B. Custodian's Name: R.A.Potk Phone: 3-2323 Address: 202-A/200-E Company: Rockwell

C. Waste Description: (If more than five items, attach additional sheets)

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One) Sol.	Liq.	Gas	Hazard Class
1.							
2.							
3.							
4.							
5.							

D. Have appropriate labels been affixed to containers? _____ Not required X

E. Have efforts been made to recycle (e.g., excess) waste? N/A

F. Has waste been treated in any manner? N/A If so, how? _____

G. Storage Location: 202-A/200-East Loading Dock

H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: N/A

Generator's Signature: (Open Request) Date: June 20, 1983

II. APPROVAL

A. Approved for disposal by Name: G.R. Cox Phone: 3-3679 Address: 202-S/200-W Co.: Rockwell

Date: June 20, 1983 Signature: G.R. Cox

B. Packaging Requirements (specify): Empty Containers - Open Request

C. Disposal Location: X Chemical Trench, _____ Asbestos Trench,

(check one) _____ 212-P (Storage), _____ Other

III. TRANSPORTATION/DISPOSAL Open Request for material noted - document numbers only

A. Transporter(s) Name: _____ Phone: _____ Address: _____ Company _____

B. Date Transported/Disposed: _____

C. Transporter(s) Signature: _____

0000158

BC-6700-174.1 (N-1-82)

Internal Letter

Rockwell International

Date: May 27, 1983

No: PS-017-83

TO: (Name, Organization, Internal Address)
G. R. Cox, EA&M
202-S/200-West
373-3679

FROM: (Name, Organization, Internal Address, Phone)
R. A. Polk
202-A/200-East
373-2323

Subject: Disposal Requirements of Empty Chemical Containers.

In our previous meeting with you at PUREX we discussed the disposal requirements of empty chemical containers. You requested a listing of the type of container and what chemical it held. At the present time we now have the following chemicals that are used at PUREX; more could be added later.

1. Sugar - Paper Bag - trash
2. Soda Ash - Paper Bag - no prob. trash
3. Quick Sorb - Paper Bag - trash
4. Sodium Nitrate - Paper Bag oxidizer
5. Sodium Nitrite - Paper Bag oxidizer
6. Sulfamic Acid - Paper Bag reacts w/acid
7. Limestone - Paper Bag - trash to form SC
8. Calcium Nitrate - Fiber Barrel oxid
9. Oxalic Acid - Fiber Barrel toxic oral
10. Ferrous Sulfamate - Fiber Barrel no prob.
11. Hydrazine - Metal Barrel - reducer +
12. HN - Metal Barrel, some plastic drums re
13. Pot Permanganate - tiny Metal Barrel oxi
14. Hydrogen Peroxide - Plastic Barrel oxid
15. Oxalic - Plastic Bag no problems
16. Tartaric - Burlap Bag - no problems - tras

Your suggestions and recommendations for disposal of these containers in an expediant and reasonable cost to meet the required guidelines would be appreciated.

R. A. Polk

R. A. Polk, Shift Manager
PUREX Services & UO_3 Operations

RAP/cas

cc: B. F. Campbell
J. D. McIntosh
S. M. Nielson

Lb/file

0000159

DISPOSAL PACKET NUMBER

P83-034

✓

REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

I. GENERATION: The Generator should complete Part I and forward this form to: WS&DT 202-S/200 West Rockwell

2-11

A. Generator's Name: RW Higbee Phone: 32950 Address: WESF Company: Rockwell

B. Custodian's Name: J C Fulton Phone: 32924 Address: WESF Company: Rockwell

C. Waste Description: (If more than five items, attach additional sheets)

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One) Sol.	Liq.	Gas	Hazard Class
1. Turco 4502	125 lb	55 gal drum	1	X			Oxidizer
2.							Corrosive Mat
3.							
4.							
5.							

D. Have appropriate labels been affixed to containers? yes Not required _____

E. Have efforts been made to recycle (e.g., excess) waste? yes

F. Has waste been treated in any manner? yes If so, how? wrapped in plastic (steel drum)

Storage Location: 225-B HVAC room

H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: 68303004

Generator's Signature: RW Higbee Date: 3/17/83

II. APPROVAL

A. Approved for disposal by Name: G.R. Cox Phone: 3-3679 Address 202-S/200-W Co.: Rockwell

Date: 3/24/83 Signature: [signature] R Cox

B. Packaging Requirements (specify): As is

C. Disposal Location: X Chemical Trench, _____ Asbestos Trench,

(check one) _____ 212-P (Storage), _____ Other

III. TRANSPORTATION/DISPOSAL

Transporter(s) Name: H J Mapley Phone: 66654 Address: 1171 Company RHO

B. Date Transported/Disposed: 6/2/83 Chemical Trench

C. Transporter(s) Signature: H J Mapley DE Phelps

= 75892

0000060 BC-6700-174.1 (N-1-82)

REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

I. GENERATION: The Generator should complete Part I and forward this form to: WS&DT, 202-S/200 West, Rockwell

A. Generator's Name: RW Higbee Phone: 32950 Address: WESF Company: Rockwell

B. Custodian's Name: JC Fulton Phone: 32924 Address: WESF Company: Rockwell

C. Waste Description: (If more than five items, attach additional sheets)

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One) Sol.	Liq.	Gas	Hazard Class
1. Turco 4502	125 lb	55 gal drum	1	X			Oxidizer
2.							Corrosive Mat
3.							
4.							
5.							

D. Have appropriate labels been affixed to containers? yes Not required _____

E. Have efforts been made to recycle (e.g., excess) waste? yes

F. Has waste been treated in any manner? yes If so, how? wrapped in plastic (steel drum)

G. Storage Location: 225-B HVAC room

H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: 68303006

Generator's Signature: RW Higbee Date: 3/17/83

II. APPROVAL

A. Approved for disposal by Name: G.R. Cox Phone: 3-3679 Address 202-S/200-W Co.: Rockwell

Date: 3/24/83 Signature: G R Cox

B. Packaging Requirements (specify): As is

C. Disposal Location: X Chemical Trench, _____ Asbestos Trench,

(check one) _____ 212-P (Storage), _____ Other

III. TRANSPORTATION/DISPOSAL

A. Transporter(s) Name: _____ Phone: _____ Address: _____ Company _____

B. Date Transported/Disposed: _____

C. Transporter(s) Signature: _____

6-22-83? 0000061

BC-6700-174.1 (N-1-82)

REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

I. GENERATION: The Generator should complete Part I and forward this form to: WS&DT 202-S/200 West Rockwell

A. Generator's Name: RW Higbee Phone: 32950 Address: WESF Company: Rockwell

B. Custodian's Name: J C Fulton Phone: 32924 Address: WESF Company: Rockwell

C. Waste Description: (If more than five items, attach additional sheets)

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One) Sol.	Liq.	Gas	Hazard Class
1. Turco 4502	125 lb	55 gal drum	1	X			Oxidizer
2.							Corrosive Mat
3.							
4.							
5.							

D. Have appropriate labels been affixed to containers? yes Not required _____

E. Have efforts been made to recycle (e.g., excess) waste? yes

F. Has waste been treated in any manner? yes If so, how? wrapped in plastic (steel drum)

G. Storage Location: 225-B HVAC room

H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: B8303006

Generator's Signature: RW Higbee Date: 3/17/83

II. APPROVAL

A. Approved for disposal by Name: G.R. Cox Phone: 3-3679 Address 202-S/200-W Co.: Rockwell

Date: 3/24/83 Signature: G R Cox

B. Packaging Requirements (specify): As is

C. Disposal Location: X Chemical Trench, _____ Asbestos Trench,

(check one) _____ 212-P (Storage), _____ Other

III. TRANSPORTATION/DISPOSAL

A. Transporter(s) Name: H J Mapley Phone: 66654 Address: 1171 Company RHO

B. Date Transported/Disposed: 6/22/83 Chemical Trench

C. Transporter(s) Signature: H J Mapley D E Philps

= 75892

000206

BC-6700-174.1 (N-1-82)

DISPOSAL PACKET NUMBER

P83-035

REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

4-7 [illegible]

4-5

I. GENERATION: The Generator should complete Part I and forward this form to: WS&DT, 202-S/200 West, Rockwell

A. Generator's Name: J. M. Peterson Phone: 376-6731 Address: Rm. 107, Fed. Bldg. Company: DOE-RL

B. Custodian's Name: Same Phone: Same Address: Company: Same

C. Waste Description: (If more than five items, attach additional sheets)

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One) Sol.	Liq.	Gas	Hazard Class
1. Sulfuric Acid	24 oz.	Bottles	3		X		Corosive
2. Potassium Hydroxide Solution	8 oz.	Bottle	1		X		Corrosive
3. Sulfate Solution	8 oz.	Bottle	1		X		Corrosive
4.							
5.							

D. Have appropriate labels been affixed to containers? Yes Not required

E. Have efforts been made to recycle (e.g., excess) waste? N/A

F. Has waste been treated in any manner? No If so, how?

G. Storage Location Room 107, Federal Building

H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: N/A

Generator's Signature: Jim M. Peterson Date: 6/15/83

II. APPROVAL

A. Approved for disposal by Name: Gary R. Cox Phone: 3-3679 Address: 202-S/200 W Co.: Rockwell

Date: June 16, 1983 Signature: Gary R. Cox

B. Packaging Requirements (specify): Pack in orginal containers

C. Disposal Location: X Chemical Trench, Asbestos Trench,

(check one) 212-P (Storage), Other

III. TRANSPORTATION/DISPOSAL

A. Transporter(s) Name: H. J. Maley Phone: 666 54 Address: 1171 Company: RHO

B. Date Transported/Disposed: 6-22-83

C. Transporter(s) Signature: H. J. Maley 6-22-83

DE Phelps Chemical Trench

0000129

BC-6700-174.1 (N-1-82)

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER

4-5
4-7

TO:		FROM:	
T/S/D FACILITY	Central Land Fill	Generator	DOE-RL
E.P.A. ID Code No.		E.P.A. ID Code No.	WA7890003767
Address	Rockwell Hanford Operations	Address	Federal Bldg.
Destination	Central Land Fill	Origin	Richland, WA
Phone	373-3679	Phone	376-6731

[illegible]	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	[illegible]	EPA [illegible]	WEIGHT	LABELS REQUIRED (or Exemption No.)
3	Sulfuric Acid	Corrosive	UN1830	--	24 oz.	Corrosive
1	Potassium Hydroxide Solution	Corrosive	UN1814	--	8 oz.	Corrosive
1	Sodium Hydrogen Sulfate Solution	Corrosive	UN2337	--	3 oz.	Corrosive

PLACARDS REQUIRED

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding
$_____ Per _____

[illegible]

(Signature of Consignor)

FREIGHT CHARGES
PREPAID ☐ COLLECT ☐

RECEIVED subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY _____
E.P.A. ID Code No. _____
Address _____
Destination _____

EMERGENCY RESPONSE INFORMATION

CONTACT Name Patrol Emergency
Phone 311

National Response Center 1-800-424-8802
in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date _____

TRANSPORTER #1 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature _____ Date _____

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.

T/S/D FACILITY Signature _____ Date _____

COPY

0000130

HAZARDOUS WASTE MANIFEST

THIS SHIPPING ORDER must be legibly filled in, in Ink, in Indelible Pencil, or in Carbon, and retained by the Agent.

MANIFEST DOCUMENT NUMBER

TO: T/S/D FACILITY Central Land Fill	FROM: Generator DOE-RL
E.P.A. ID Code No.	E.P.A. ID Code No. WA7890008767
Address Rockwell Hanford Operations	Address Federal Bldg.
Destination Central Land Fill	Origin Richland, WA
Phone 373-3679	Phone 376-6731

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Hazard Id. No.	EPA Hazard Waste	WEIGHT	LABELS REQUIRED (or Exemption No.)
3	Sulfuric Acid	Corrosive	UN1830	--	24 oz.	Corrosive
1	Potassium Hydroxide Solution	Corrosive	UN1814	--	8 oz.	Corrosive
1	Sodium Hydrogen Sulfate Solution	Corrosive	UN2837	--	8 oz.	Corrosive

PLACARDS REQUIRED

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding $_____ Per _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

Signature of Consignor

FREIGHT CHARGES PREPAID ☐ COLLECT ☐

RECEIVED subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destinated as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY _____
E.P.A. ID Code No. _____
Address _____
Destination _____

EMERGENCY RESPONSE INFORMATION

CONTACT Name Patrol Emergency
Phone 811

National Response Center 1-800-424-8802 in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature [signature] Date 6/15/83

TRANSPORTER #1 [illegible] E.P.A. ID No. _____
Address [illegible]
City [illegible] State [illegible] Zip [illegible] Phone [illegible]

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature [signature] Date 1-22/83

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State ____ Zip ____ Phone ____

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.

T/S/D FACILITY Signature [signature] Chemical Branch Date 6-22-83

TRANSPORTER #1 COPY 000204

HAZARDOUS WASTE

DISPOSAL PACKET NUMBER

P83-036

REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

3-43

I. GENERATION: The Generator should complete Part I and forward this form to: WS&DT 202-S/200 West Rockwell

A. Generator's Name: D.D. ROUNTRY Phone: 3 2108 Address: 202 S/200W Company: ROCKWELL

B. Custodian's Name: E P THOMPSON Phone: 3 2394 Address: 2719WA 200W Company: ROCKWELL

C. Waste Description: (If more than five items, attach additional sheets)

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One) Sol.	Liq.	Gas	Hazard Class
1. 2,4-D AMINE	50	5.0 GALLON METAL	50				*
2. 2,4-D AMINE	3	55 GALLON METAL	3				*
3. BANVEL	29	2.5 GALLON PLASTIC	29				*
4. R-11	5	5.0 GALLON PLASTIC	5				*
5. MISCELLANEOUS PAPER, RAGS, ETC	1	55 GALLON METAL	1				⊗

D. Have appropriate labels been affixed to containers? YES Not required _____

E. Have efforts been made to recycle (e.g., excess) waste? NO

F. Has waste been treated in any manner? YES If so, how? * TRIPLE-RINSED CONTAINERS ⊗ WASTE PACKAGED IN PLASTIC and CONTAINED IN METAL DRUM

G. Storage Location: 275-EA WAREHOUSE

H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: NOT APPLICABLE

Generator's Signature DD Rountry Date: 6-10-83

II. APPROVAL

A. Approved for disposal by Name: G.R. Cox Phone: 3-3679 Address 202-S/200 W Co.: Rockwell

Date: June 9, 1983 Signature: [signature] R. Cox

B. Packaging Requirements (specify): All empty containers except #5

C. Disposal Location: X Chemical Trench, _____ Asbestos Trench,

(check one) _____ 212-P (Storage), _____ Other

III. TRANSPORTATION/DISPOSAL

Transporter(s) Name: SS Webb Phone: 373-2351 Address: 2707 W Company RHO

Date Transported/Disposed: June 27, 1983

C. Transporter(s) Signature: Steven Scott Webb

D E Phelps Chemical Trench

00001

EC-700-174.1 (N-1-82)

DISPOSAL PACKET NUMBER

P83-037

✓

REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

PNL-83-017

3-41

GENERATION: The Generator should complete Part I and forward this form to: WS&DT, 202-S/200 West, Rockwell

A. Generator's Name: Jeene Hobbs Phone: 6-1631 Address: 3762/300 Area Company: PNL

B. Custodian's Name: Mike Brown Phone: 5-2067 5-3791 Address: CEL/3000 Area PSL/3000 Area Company: PNL

C. Waste Description: (If more than five items, attach additional sheets)

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One) Sol.	Liq.	Gas	Hazard Class
1. Bagasse	3 or 4 tons in 20 bales &			X			
2.		2 bags					
3	The USDA representative must be present when this is buried. It must						
4	be covered with at least 3 feet of soil. Contact ~~XXXXX~~						Mike Brown
5	before scheduling disposal. This waste can go in the Central Landfill. A dump truck with a cover will be needed to haul the waste to the landfill.						

D. Have appropriate labels been affixed to containers? _____ Not required X

E. Have efforts been made to recycle (e.g., excess) waste? no

F. Has waste been treated in any manner? no If so, how?

G. Storage Location CEL/ 3000 Area outside

H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number:

Generator's Signature: Jeene Hobbs *Jeene M Hobbs* Date: 7 June 83

II. APPROVAL

A. Approved for disposal by Name: G.R. Cox Phone: 3-3679 Address: 202-S/200-W Co.: Rockwell

Date: June 8, 1983 Signature: *G. R. Cox*

B. Packaging Requirements (specify): As Noted above

C. Disposal Location: X Chemical Trench, _____ Asbestos Trench,

(check one) _____ 212-P (Storage), _____ Other

III. TRANSPORTATION/DISPOSAL

Transporter(s) Name: TW Toberg Phone: 376-6654 Address: 1171 Bldg Company Rockwell

Date Transported/Disposed: 7-25 83

C. Transporter(s) Signature: DE Phelps

0000125

BC-6700-174.1 (N-1-82)

United States Department of Agriculture

Animal and Plant Health Inspection Service

Federal Bldg.
Hyattsville, MD
20782

3-4)

June 3, 1983

Mike Brown
Battelle Northwest
6th Street Warehouse
Richland, WA 99352

Dear Mr. Brown:

This letter will serve as authorization for burial of the sugarcane bagasse which you imported under permit # 15-380. The sugarcane bagasse is to be buried at the Hanford Nuclear Reservation under three feet of earth and in accordance with all applicable Federal, State, and Local regulations.

The movement of the bagasse may be supervised by Terry Ely, Plant Protection and Quarantine Officer.

Sincerely,

M. JoAnne Spires

M. JoAnne Spires
Supervisory Program Assistant
Permit Unit
National Program Planning Staff
Plant Protection and Quarantine

Gary - Please attached to bagasse disposal request - Thanks -

Jeane

Dennis Poor, please attach with D.R.

RECEIVED
JUN 7 1983
INDUSTRIAL SAFETY

0000126

DISPOSAL PACKET NUMBER

P83-038

PNL-83-016

REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

3-31

I. GENERATION: The Generator should complete Part I and forward this form to: WS&DT 202-S/200 West Rockwell

A. Generator's Name: Jeene Hobbs Phone: 6-1631 Address: 3762/300 Company: PNL

B. Custodian's Name: Bill Rossitor Phone: 6-5946 Address: 324/300 Company: PNL

C. Waste Description: (If more than five items, attach additional sheets)

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One) Sol.	Liq.	Gas	Hazard Class
1. FeOH	735 gal	fiberboard plastic	13	X			
2. floor sweepings	230 gal	metal	6	X			
3. (contains $CaCO_3$, silica, LiOH)		in 2 - 55 gal drums & 4 - 30 gal drums					
4. 75# cupric nitrate	75#	metal	2	X			Oxidizer
5. (metal cans packed in double	plastic bags	in a 30 gal drum)					

D. Have appropriate labels been affixed to containers? _____ Not required _____ They will be

E. Have efforts been made to recycle (e.g., excess) waste? no

F. Has waste been treated in any manner? no If so, how? _____

G. Storage Location: 324/300 Area and JAJones warehouse/3000 area
Contact Bill Rossitor for exact location before picking up for disposal.

H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: _____

Generator's Signature: Jeene Hobbs *Jeene M Hobbs* Date: 26 May 83

II. APPROVAL

A. Approved for disposal by Name: G.R.Cox Phone: 3-3679 Address: 202-S/200-W Co.: Rockwell
Date: June 6, 1983 Signature: *Gary R. Cox*

B. Packaging Requirements (specify): As noted above is acceptable

C. Disposal Location: X Chemical Trench, _____ Asbestos Trench,
(check one) _____ 212-P (Storage), _____ Other

III. TRANSPORTATION/DISPOSAL

A. Transporter(s) Name: Thompson Phone: 66654 Address: 2171 Company RHO

B. Date Transported/Disposed: D.E. Phelan 7-27-83

C. Transporter(s) Signature: *[illegible]*

0000107

BC-6700-174.1 (N-1-82)

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

Is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER: PNL-M-83-030 3-31

This document corresponds to disposal request numbered PNL-83-016.

TO:	FROM:
T/S/D FACILITY Rockwell Hanford Operations	Generator Battelle PNL
E.P.A. ID Code No. WA7-89-[illegible] 000-8967	E.P.A. ID Code No. WA7-89-000-8967
Address Richland, Wa 99352	Address Richland, Wa 99352
Destination Central Landfill - Chemical trench	Origin 324/300 Area & JAJones Warehouse/3000 Are
Phone Gary Cox 37373679	Phone Jeene Hobbs 376-1631

[illegible]	[illegible] PROPER SHIPPING NAME	HAZARD CLASS	[illegible]	[illegible]	WEIGHT	LABELS REQUIRED (or Exemption No.)
1	Waste cupric nitrate	oxidizer	NA1479	(	110	oxidizer controlled
~~6~~ 9	Floor Sweepings ($CaCO_3$, LiOH, silica)	none	none	none	2370	none
~~7~~ 12	Waste Ferric Hydroxide	none	none	none	[illegible]	none

PLACARDS REQUIRED none

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding $_____ Per _____

[illegible]

Signature of Consignor

FREIGHT CHARGES PREPAID ☐ COLLECT ☐

RECEIVED subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract), agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY none
E.P.A. ID Code No. _____
Address _____
Destination _____

EMERGENCY RESPONSE INFORMATION

CONTACT Name Battelle Industrial Safety
Phone JM Hobbs 376-1631

National Response Center 1-800-424-8802
In D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature Jeene Hobbs Date 9 June 83

TRANSPORTER #1 _____ E.P.A. ID No. _____
Address _____
City _____ State ____ Zip ____ Phone ____

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature _____ Date _____

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State ____ Zip ____ Phone ____

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.

T/S/D FACILITY Signature _____ Date _____

T/S/D F COPY 0000108

HAZARDOUS WASTE MANIFEST

THIS SHIPPING ORDER must be legibly filled in, in ink, in indelible Pencil, or in Carbon, and retained by the Agent.

MANIFEST DOCUMENT NUMBER: PNL-M-83-030

This document corresponds to disposal request numbered PNL-83-016.

TO:	FROM:
T/S/D FACILITY Rockwell Hanford Operations	Generator Battelle PNL
E.P.A. ID Code No. WA7-89-~~8787~~ 000-8967	E.P.A. ID Code No. WA7-89-000-8967
Address Richland, Wa 99352	Address Richland, Wa 99352
Destination Central Landfill - Chemical trench	Origin 324/300 Area & JAJones Warehouse/3000 Are
Phone Gary Cox 37373679	Phone Jeene Hobbs 376-1631

No. of Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Hazardous Waste Ident. No.	EPA Hazardous Waste Ident. No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
1	Waste cupric nitrate	oxidizer	NA1479		1 Drum 110 lb	oxidizer controlled
~~2~~ 8	Floor Sweepings ($CaCO_3$, LiOH, silica)	none	none	none	3 pallets 2370	none
~~13~~ 12	Waste Ferric Hydroxide	none	none	none	5220	none
		4 pallets	3 plastic Drums		1200	
			9 Fiber Drums		4020	
					5220	

PLACARDS REQUIRED none

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding $_____ Per _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

Signature of Consignor

FREIGHT CHARGES PREPAID ☐ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY none
E.P.A. ID Code No.
Address
Destination

EMERGENCY RESPONSE INFORMATION

CONTACT Name Battelle Industrial Safety
Phone JM Hobbs 376-1631

National Response Center 1-800-424-8802 in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature Jeene Hobbs Jeene M Hobbs Date 9 June 83

TRANSPORTER #1 _____ E.P.A. ID No. _____
Address _____
City _____ State ____ Zip ____ Phone ____

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature _____ Date _____

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State ____ Zip ____ Phone ____

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature [illegible] Date 7/4/83

TREATMENT/STORAGE/DISPOSAL FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.

T/S/D FACILITY Signature [illegible] Date 7-17-83

TRANSPORTER #1 COPY

000205

13.0 PNL-83-016

REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

3-31

I. GENERATION: The Generator should complete Part I and forward this form to: WS&DT, 202-S/200 West, Rockwell

A. Generator's Name: Jeene Hobbs Phone: 6-1631 Address: 3762/300 Company: PNL

B. Custodian's Name: Bill Rossitor Phone: 6-5946 Address: 324/300 Company: PNL

C. Waste Description: (If more than five items, attach additional sheets)

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One) Sol.	Liq.	Gas	Hazard Class
1. FeOH	735 gal	fiberboard plastic	13	X			
2. floor sweepings	230 gal	metal	6	X			
3. (contains $CaCO_3$, silica, LiOH) in 2 - 55 gal drums & 4 - 30 gal drums							
4. 75# cupric nitrate	75#	metal	2	X			Oxidizer
5. (metal cans packed in double plastic bags in a 30 gal drum)							

D. Have appropriate labels been affixed to containers? _____ Not required _____ They will be

E. Have efforts been made to recycle (e.g., excess) waste? no

F. Has waste been treated in any manner? no If so, how? _____

G. Storage Location: 324/300 Area and JAJones warehouse/3000 area
Contact Bill Rossitor for exact location before picking up for disposal

H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: _____

Generator's Signature: Jeene Hobbs Jeene M Hobbs Date: 26 May 83

II. APPROVAL

A. Approved for disposal by Name: G.R. Cox Phone: 3-3679 Address: 202-S/200-W Co.: Rockwell
Date: June 6, 1983 Signature: Gary R. Cox

B. Packaging Requirements (specify): As noted above is acceptable

C. Disposal Location: X Chemical Trench, _____ Asbestos Trench,
(check one) _____ 212-P (Storage), _____ Other

III. TRANSPORTATION/DISPOSAL

A. Transporter(s) Name: Thompson Phone: 66654 Address: 2171 Company RHO

B. Date Transported/Disposed: D. E. Phelps 7-27-83

C. Transporter(s) Signature: [illegible]

000207

BC-6700-174.1 (N-1-82)

WSD FACILITY [illegible]

DISPOSAL PACKET NUMBER

P83-039

✓

REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

PNL-83-012

3-21

I. GENERATION: The Generator should complete Part I and forward this form to: WS&DT 202-S/200 West Rockwell

A. Generator's Name: Jeene Hobbs Phone: 6-1631 Address: 3762/300 Area Company: PNL

B. Custodian's Name: Bill Rossitor Phone: 6-5946 Address: 324/300 Area Company: PNL

C. Waste Description: (If more than five items, attach additional sheets)

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One) Sol.	Liq.	Gas	Hazard Class
1. Empty Drums(Previous contents will be listed)							
2. FeCH	46	55 gal steel					
3. ~~Caustic soda beads~~	~~2~~	~~55 gal steel no lids~~					
4. Cerium nitrate	3	30 gal steel					
5. Neodymium nitrate	1	55 gal fiberboard					

D. Have appropriate labels been affixed to containers? _____ Not required X

E. Have efforts been made to recycle (e.g., excess) waste? NA

F. Has waste been treated in any manner? NA If so, h

G. Storage Location: 324/300 Area (Contact [illegible] itor for pickup and disposal)

H. "I hereby certify that this material has been released by Radi[illegible] (if applic[illegible]) and that Part One of this form has been completed to the best of my knowledge." Survey Card

Generator's Signature: Jeene Hobbs Jeene M Hobbs Date: 20 May 83

II. APPROVAL

A. Approved for disposal by Name: Gary R. Cox Phone: 3-3679 Address: 202-S/200-W Co.: Rockwell

Date: June 2, 1983 Signature: Gary R. Cox

B. Packaging Requirements (specify): Empty Drums - verify

C. Disposal Location: X Chemical Trench, _____ Asbestos Trench,

(check one) _____ 212-P (Storage), _____ Other

III. TRANSPORTATION/DISPOSAL

A. Transporter(s) Name: J.H. Armstrong Phone: 66654 Address: 1171 Company RHO

B. Date Transported/Disposed: 8-11-83 Chemical Trench.

C. Transporter(s) Signature: [illegible]

0000102

BC-6700-174.1 (N-1-8[illegible])

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One) Sol.	Liq.	Gas	Hazard Class
6. Empty Drums Cont							
7. Alumium hydroxide	1	55 gal fiberboard					3-2
8. Ferric phosphate	11	55 gal fiberboard					
9. Zirconium nitrate	1	55 gal fiberboard					
10. Lithium hydroxide	1	55 gal fiberboard					
11.							
12.							
13.							
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33.							
34.							

0000103

BC-6700-174.2 (N-1-82)

DISPOSAL PACKET NUMBER

P83-040

3.3

REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

I. GENERATION: The Generator should complete Part I and forward this form to: WS&DT 202-S/200 West Rockwell

4-39

A Generator's Name: J.M. Bishop Phone: 6-3518 Address: 313 Bldg/300 Area Company: UNC

B Custodian's Name: J.M. Bishop Phone: 6-3518 Address: 313 Bldg/300 Area Company: UNC

C Waste Description. (If more than five items, attach additional sheets)

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One) Sol.	Liq.	Gas	Hazard Class
Asbestos Gloves	~ 240 pr	Double Bag	16	✓			
Asbestos covered Pipes	~ 18 ea	Double Wrapped	18	✓			
Asbestos Gloves	~ 200 pr	Cardboard Box	19	✓			
Asbestos Insulation	~ 14 ea	Double Bag	14	✓			
Asbestos Coat	~ 8 ea	Double Bag	1	✓			

D [illegible] ate labels been affixed to containers? Yes Not required

E [illegible] been made to recycle (e.g., excess) waste? No

F [illegible] been treated in any manner? NO If so, how?

G [illegible] location 313 Dock Load lugger

H [illegible] certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: 07429 [signature]

Generator Signature: Jerry M. Bishop Date: 8-17-83

II. APPROVAL

A Approved for disposal by Name: G.R. Cox Phone: 3-3679 Address: 222-T/200-W Co.: Rockwell

Date: August 24, 1983 Signature: [signature] R. Cox

B Packaging Requirements (specify): Double Bagged and wetted

C Disposal Location: _____ Chemical Trench, X Asbestos Trench.

(check one) _____ 212-P (Storage), _____ Other

III. TRANSPORTATION/DISPOSAL

A Transporter(s) Name: H.J. Mafey Phone: 66654 Address: 1171 Garage Company R.H.O.

B. Date Transported/Disposed: 9-7-83

C. Transporter(s) Signature: H.J. Mafey 9-7-83

D E Phelps Asbestos Trench

BC-6700-174.1 (N-1-82)

000193

HAZARDOUS WASTE MANIFEST

THIS SHIPPING ORDER must be legibly filled in, in ink, in Indelible Pencil, or in Carbon, and retained by the Agent.

MANIFEST DOCUMENT NUMBER: 4-39

TO:		FROM:	
T/S/D FACILITY	ROCKWELL	Generator	J.M. Bishop
E.P.A. ID Code No.	WA-D290002967	E.P.A. ID Code No.	WA-TR 90008967
Address	Central Asbestos 1410 E 11	Address	KNC 300 Area
Destination	ROCKWELL	Origin	3131 333 Rld.
Phone	3-3516	Phone	6-3516

Shipping Unit	DOT PROPER SHIPPING NAME	HAZARD CLASS	Hazard Class No.	EPA Hazard Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
68	Asbestos (asbestos	ORM-C	None	None	800lbs	NONE
	Material double wrapped					
	in Plastic)					

PLACARDS REQUIRED

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding $ _____ Per _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement: The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges. _____ (Signature of Consignor)

FREIGHT CHARGES: PREPAID ☐ COLLECT ☐

RECEIVED subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment. Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY _____

E.P.A. ID Code No. _____

Address _____

Destination _____

EMERGENCY RESPONSE INFORMATION

CONTACT Name H Boynton

Phone 3-3516

National Response Center 1-800-424-8802 in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature Jerry M. Bishop Date 9-7-83

TRANSPORTER #1 [illegible] E.P.A. ID No. _____

Address 1171 [illegible]

City [illegible] State Wa Zip 99324 Phone 66654

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature [illegible] Date 9-7-83

TRANSPORTER #2 [illegible] E.P.A. ID No. _____

Address 1171 [illegible]

City [illegible] State Wa Zip 99324 Phone 66654

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature [illegible] Date 9-7-83

TREATMENT/STORAGE/DISPOSAL FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.

T/S/D FACILITY Signature [illegible] Date [illegible]

TRANSPORTER #1 COPY

000194