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STATE OF WASHINGTON
DEPARTMENT OF ECOLOGY

7601 W. Clearwater, Suite 102 • Kennewick, Washington 99336 • (509) 546-2990

January 21, 1994

Mr. James D. Bauer
U.S. Department of Energy
P.O. Box 550 MSIN: A5-15
Richland, WA 99352-0550



Dear Mr. Bauer:

Re: First Notice of Deficiency: 224-T Transuranic Waste Storage and Assay Facility (TRUSAF) Dangerous Waste Permit Application (S-2-2, M-20-23)

This letter transmits the Washington State Department of Ecology's (Ecology) First Notice of Deficiency (NOD) on the above referenced RCRA Part B permit application (Revision 0, dated June 30, 1992). The deficiencies were generated during a review of the application for compliance with final facility standards under the Washington State Dangerous Waste Regulations (Chapter 173-303 WAC).

A RCRA compliance inspection was conducted on November 18 and 22, 1993, which focused on the unit as an interim status waste storage facility. During the inspection, violations of the WAC 173-303 were documented, and a voluntary compliance letter was issued on December 13, 1993. Included in the letter was a compliance schedule and a Certificate of Compliance to be completed and returned to Ecology by March 18, 1994. While the letter addresses interim status compliance issues, the attached NOD addresses similar issues as related to final facility standards in an effort to ensure the above referenced permit application can ultimately be deemed complete.

In accordance with the review time periods for RCRA Part B permit applications established by the Hanford Federal Facility Agreement and Consent Order (Tri-Party Agreement), please respond to the attached deficiencies with a NOD Response Table no later than May 23, 1994.

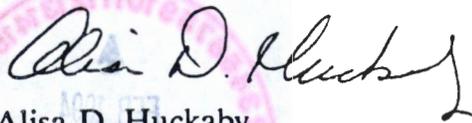
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If you or your staff have any questions or concerns regarding this notice, please call me at (509) 736-3034. Should you have any questions or require clarification on any of the items in the December 13, 1993, compliance letter, please do not hesitate to call me at the above number or Laura Russell, RCRA Compliance Inspector, at (509) 736-3024.

Sincerely,



Alisa D. Huckaby
Nuclear and Mixed Waste Management Program

AH:sr

cc: (w/ enclosure)
Cliff Clark, USDOE
Dan Saueressig, WHC
Dan Duncan, EPA
Administrative Record, H6-08

cc: (w/o enclosure)
Sue Price, WHC
Doug Sherwood, EPA

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**224-T TRUSAF PART B PERMIT APPLICATION PLAN REVISION 0, JUNE 1992, DOE/RL-91-51
FIRST NOTICE OF DEFICIENCY
JANUARY 21, 1993**

DEFICIENCY NUMBER

DEFICIENCY

1. Part A Section. During site visits on August 17 and September 14, 1993, Backlog Waste drums were noted in the receiving area of the unit. It was explained, on both occasions, that the drums were to be x-rayed and assayed at the unit, but not accepted for storage. This activity is not described on the Part A. Revise the Part A and include a description of this activity.
2. Part A Section. During the review of various revisions of Form 3, Part A, it was noted that a tank car was indicated, on page 26 of 26, Rev. 2, dated June 24, 1992, as a typical container and that a 55-gallon drum was indicated, on page 26 of 26, Rev. 2, dated June 24, 1992, of the Part A included in the application. Explain the discrepancy and identify which version of Revision 2 is correct.
3. Part A Section. During the review of the Part A included within the application, the estimated annual quantities of waste were noted. Comparing the amounts of the Part A with the amounts of wastes reported on several annual reports, the validity of the estimated waste quantities is questioned. For example, Forms 4 and 5 of the 1990 Generator Annual Dangerous Waste Report and the 1990 Waste Management Facility Annual Dangerous Waste Report (respectively) identify approximately 446 kilograms (approximately 981 pounds) of D002 waste as having been directed to the unit and the Part A Form identifies an estimated annual quantity of 500 pounds. Similarly, Forms 4 and 5 of the 1990 Generator Annual Dangerous Waste Report and the 1990 Waste Management Facility Annual Dangerous Waste Report (respectively) identify approximately 1,877 kilograms (approximately 4,129 pounds) of D008 waste as having been directed to the unit and the Part A Form identifies an estimated annual quantity of 1,000 pounds. Similarly, Form 5 of the 1992 Waste Management Facility Annual Dangerous Waste Report identifies approximately 570 kilograms (approximately 1,254 pounds) of D018/D040 wastes as having been directed to the unit and the Part A Form identifies an estimated annual quantity of 500 pounds. It is the reviewer's understanding that the estimated annual quantities identified on Form 3 of the Part A represent maximum annual quantities. If this understanding is correct, modify the Part A to accurately reflect annual quantities.
4. Part A Section. It has been noted that the operator certification of page 20 of 26 does not read the same as WAC 173-303-810(13). It has also been noted that the Part A Dangerous Waste Permit Forms (Forms 1 and 3)(ECY 030-31) do not read the same as WAC 173-303-810(13). The reviewer requests that in the event that the referenced forms are revised prior to the revision of the 224-T TRUSAF Form 3, the most current revision of ECY 030-31 be utilized.

5. **Part A Form or Part B Application.** The Part A, Forms 1 and 3 submitted with the Part B Application do not appear to identify all permits or construction approvals received or applied for under other programs as required on the Federal EPA Form 3510. Although Forms 1 and 3 do not appear to require this information, the information (the number of each presently effective permit issued to the facility for each program or, if there have been previously filed applications without permit issuance) is requested either on the Part A Form or within the Part B Application. The requested information will assist the agency during the SEPA review process as well as during the Part B Application review.
6. **Part A Section, 4-2/13-14, and 11.13.** Due to the different storage management practices observed as differentiating between transuranic and mixed wastes, the calculations showing how the 2,000 55-gallon drum capacity was derived is requested. The calculations should include and identify implicit assumptions such as, number of drums in stacking, dimensions of drums (diameter), dimensions of storage areas of each floor, dimensions of aisle space, etc.
7. **Part A Section.** As explained below under comment 1-2/9-10, until such time that it is demonstrated that storage of dangerous or mixed waste has not been conducted in the radiologically contaminated process cells, the process cells A through F are considered to exist as part of this unit. Therefore, the process cells, as such, are required to be identified on the Part A as areas where storage may be occurring.
8. **Part A and Sections 3.2.10, 4.1.4.1, and 4.1.4.2.** The text within Section 3.2.10 states that "[S]hock-sensitive or peroxide-forming chemicals that could present a serious explosive hazard are not allowed in the 224-T TRUSAF." The characteristic waste D003 is identified on the Part A application as a dangerous waste that may be handled at the unit. By definition, D003 wastes may "present a serious explosive hazard." It is the reviewer's understanding that the WIPP facility will not accept federally defined D001, D002, or D003 wastes. Either delete the D003 waste type from the Part A, or explicitly identify, in the above referenced sections, under what conditions D003 waste will be accepted. Similarly, from a review of WAC 173-303-9903, it appears that other potentially reactive P and U waste codes have been included on the Part A Application. Those noted include: U006, U020, U023, U033, U096, U160, U133, U163, U189, U205, U233, U234, P006, P009, P065, P074, P081, and P112. The reasons for the reactive designations assigned to the wastes was also noted. For several of the waste codes (P065, P081, P009 and U205) the current designation was due to the reactive nature of the chemical. It is requested that the P and U waste codes identified on the Part A application be re-evaluated for appropriate inclusion or exclusion. In those cases where the above identified reactive waste codes are to remain on the Part A application, the above referenced sections must explicitly identify under what conditions these wastes will be accepted.
9. **Part B Application.** It is the reviewer's understanding that not all sections of the application will be enforceable and that those sections that are will be superseded by the conditions of the Permit for the Treatment, Storage and Disposal of Dangerous Waste for the Hanford Facility if they are inconsistent. Assuming this understanding is correct, the reviewer requests that your

suggestions of which sections of the application will be "permit conditions" (enforceable) and which sections will be considered general information be identified. Pending issuance of the above referenced permit, this deficiency may remain "open," if necessary.

10. 1-1/20-24 (Section 1.1), 1-3/6-9 (Section 1.2.2), 2-16/35-39 (Section 2.8.1), and 4-1/5-9 (Section 4.0). It is the reviewer's understanding that the Draft Permit for the Treatment, Storage and Disposal of Dangerous Waste addresses this issue. It is the reviewer's preference that such statements be identified as interpretations and that all applicable parties' interpretations be included. If this preference is not agreeable to the applicable parties, it would be the reviewer's preference to delete such statements. Pending issuance of the above referenced permit, this deficiency may remain "open," if necessary.
11. 1-1/29 (Section 1.1). Include the phrase "and references therein (Ecology 1989)" after the WAC cite.
12. 1-1/15-19 (Section 1.1) and Appendix 7A (page 7). The "Hanford Site Solid Waste Acceptance Criteria" states that "[T]he concentration limit (100 nCi/g of waste matrix) for TRU waste applies to the item at the time it is declared waste." The referenced permit application definition differentiates from the "Hanford Site Solid Waste Acceptance Criteria" by the phrase "at the time of assay." Explain the differentiation. Also, describe how the differentiation might impact designation between low level and transuranic mixed waste.
13. 1-1/47-48 (Section 1.1). It is the reviewer's understanding that the retrieved containers will be sampled to confirm characterization. Please confirm if this understanding is correct. If the containers are not to be sampled to confirm characterization prior to their acceptance at 224-T TRUSAF, please describe how these containers will be stored in the unit.
14. 1-1/48-49 (Section 1.1) and 2-3/20-25 (Section 2.1.3). Please explain what is meant by the statement that the existing burial records provide detailed information on the content of the containers to be retrieved. How do the records for these containers compare to records currently generated? The statements referenced in Chapter 2 imply that the waste to be retrieved has been "properly characterized." It is the reviewer's understanding that the wastes, in part, pre-date RCRA. Revise the Chapter 2 statements to accurately reflect the type of characterization associated with the records.
15. 1-2/6-8 (Section 1.1). The text states that the three floors of the 224-T TRUSAF unit are sealed completely from the eastern third of the building, which contains six radiologically contaminated process cells. Identify on which engineering diagrams of Appendix 4A this complete sealing is shown. If the diagrams do not currently exist in Appendix 4A, please submit the appropriate documentation.
16. 1-2/8 (Section 1.1). Define and/or describe what a radiologically contaminated process cell is.

17. 1-2/9-10 (Section 1.1) and 2-4/7-10 (Section 2.1.3). Delete the statement that the process cells are "not a part of this permit application." Until such time that it is demonstrated that storage of dangerous or mixed waste has not been conducted in the cells, the radiologically contaminated process cells A through F are considered to exist as part of this unit. Storage is interpreted to be an ongoing process as opposed to disposal, which is intended to be the final step in handling dangerous waste. This interpretation is based on EPA's existing regulatory definitions of "storage" and "disposal." "Storage" occurs when waste is held for a temporary period at the end of which the waste is treated, stored, or disposed elsewhere. Thus "storage" always implies that there will be future management of the waste after the storage period is over. Any facility in the state of Washington which is storing dangerous or mixed waste that was placed onsite on or before January 31, 1986, or January 1987 respectively, is an active storage facility and is subject to the provisions of RCRA, even if no dangerous or mixed waste was placed onsite after January 31, 1986, or January 1987 respectively.
18. 1-5/13-24 (Section 1.4). The definition provided for contractor differs from the Draft Permit for the Treatment, Storage and Disposal of Dangerous Waste in that the contractors are not specifically provided. In the response table, please confirm if the operations and engineering contractor is Westinghouse Hanford Company (WHC). Similarly, in the response table, please confirm if the research and development contractor is Pacific Northwest Laboratory (PNL).
19. Section 1.4. To be consistent with the Draft Permit for the Treatment, Storage and Disposal of Dangerous Waste, if applicable, please identify which types of contractors are considered to be "co-operators." Pending issuance of the Permit for the Treatment, Storage and Disposal of Dangerous Waste for the Hanford facility, this deficiency may remain "open," if necessary.
20. 1-5/26-30 (Section 1.4). The definition provided for "dangerous or hazardous waste" differs from the Draft Permit for the Treatment, Storage and Disposal of Dangerous Waste. Delete the definition and replace it with the definition of "dangerous waste" found in the definitions section of the referenced permit. Pending issuance of the Permit for the Treatment, Storage and Disposal of Dangerous Waste for the Hanford facility, this deficiency may remain "open," if necessary.
21. 1-6/1-17 (Section 1.4). The definition provided for "Hanford Facility" differs from the Draft Permit for the Treatment, Storage and Disposal of Dangerous Waste's legal and physical description of the Facility. Delete the definition and replace it with the definition of "facility" found in the definitions section of the referenced permit. Pending issuance of the Permit for the Treatment, Storage and Disposal of Dangerous Waste for the Hanford facility, this deficiency may remain "open," if necessary.
22. 1-6/28-35 (Section 1.4). The definition provided for "treatment, storage, or disposal unit" differs from the Draft Permit for the Treatment, Storage and Disposal of Dangerous Waste's definition for "unit." Delete the definition and replace it with the definition of "unit" found in the definitions section of the referenced permit. Pending issuance of the Permit for the Treatment, Storage and Disposal of Dangerous Waste for the Hanford facility, this deficiency may remain "open," if necessary.

23. 1-6/49-51 (Section 1.5) and 1-7/1-5 (Section 1.5). The exception to WAC 173-303-830 as described on page 1-7, lines 1-5 varies greatly from the notification submittal requirements of WAC 173-303-830. Identify if a formal agreement currently exists between Department of Ecology and Department of Energy to submit the required notifications as proposed. If no formal agreement currently exists, delete the referenced exception.
24. 2-3/19-20 (Section 2.1.3). Identify specific "Hanford Facility waste acceptance criteria" which is applicable to this unit and the waste to be stored at this unit.
25. 2-3/45-47 (Section 2.1.3) and 2-4/4-7 (Section 2.1.3). The referenced texts indicate that the radiologically contaminated process cells have been sealed. Provide drawings and/or documentation which supports the statements and identifies how the cells have been sealed.
26. 2-4/26-27 (Section 2.1.3) and 2-12/9-10 (Section 2.5.1). The text indicates that each floor is sloped. The reviewer could not verify this statement during a review of the engineering drawings contained in Appendix 4A. Identify which drawing shows the referenced slope of the floor. In addition, if the degree of slope is not calculated and identified on the drawing, propose to incorporate it within the application with the description of secondary containment.
27. 2-5/7 (Section 2.1.3). A bullet identifying the six radiologically contaminated process cells should be added, until such time that it is shown that storage of dangerous or mixed waste is not occurring in the cells.
28. 2-5/17 (Section 2.1.3.1), 4-4/23-25 (Section 4.1.1.4), and 4-4/29-30 (Section 4.1.1.5). The text states that the real-time radiography room contains no floor drains. The reviewer was unable to find a piping/drain/line/etc. drawing within the application. Drawing H-2-36395 does show pipings/drains/lines/etc., but it is the reviewer's interpretation that the pipings/drains/lines/etc. shown, only represent the pipings previously located outside of the unit. A drawing which shows the pipings/drains/lines/etc. beneath the first floor is required so that the statement can be verified.
29. 2-5/30 (Section 2.1.3.2), 4-4/23-25 (Section 4.1.1.4), and 4-4/29-30 (Section 4.1.1.5). The text states that there are no floor drains in the airlock. The reviewer was unable to find a piping/drain/line/etc. drawing within the application. Drawing H-2-36395 does show pipings/drains/lines/etc., but it is the reviewer's interpretation that the pipings/drains/lines/etc. shown, only represent the pipings previously located outside of the unit. A drawing which shows the pipings/drains/lines/etc. beneath the first floor is required so that the statement can be verified.
30. 2-5/30-31 (Section 2.1.3.2), 4-4/23-25 (Section 4.1.1.4), and 4-4/29-30 (Section 4.1.1.5). The text states that the floor drains in the transuranic waste assayer room have been sealed. The reviewer was unable to locate a drawing or a description of the sealing. A

drawing or a detailed description of the sealing is required in order to evaluate the adequacy of the design and operation of the secondary containment system as described in Section 4.1.1.3.

31. 2-5/40-41 (Section 2.1.3.3), 4-4/23-25 (Section 4.1.1.4), and 4-4/29-30 (Section 4.1.1.5). The text states that there are no floor drains in the assay control room and storage unit operations office. The reviewer was unable to find a piping/drain/line/etc. drawing within the application. Drawing H-2-36395 does show pipings/drains/lines/etc., but it is the reviewer's interpretation that the pipings/drains/lines/etc. shown, only represent the pipings previously located outside of the unit. A drawing which shows the pipings/drains/lines/etc. beneath the first floor is required so that the statement can be verified.
32. Section 2.1.3.4. During a September 14, 1993, unit visit, the lack of elevator curbing was noted. The reviewer was unable to locate an as-built drawing (which includes foundation specifications) or a description of the elevator within the application. A drawing or a detailed description of the elevator foundation is required in order to evaluate the adequacy of the design and operation of the secondary containment system as described in Chapter 4.0.
33. Section 2.1.3.6.1. The text does not identify if the receiving area contains floor drains. A drawing which shows the pipings/drains/lines/etc. beneath the first floor is required in order to evaluate the adequacy of the design and operation of the secondary containment system as described in Chapter 4.0.
34. Section 2.1.3.6.2. The text does not identify if the temporary staging area contains floor drains. A drawing which shows the pipings/drains/lines/etc. beneath the first floor is required in order to evaluate the adequacy of the design and operation of the secondary containment system as described in Chapter 4.0.
35. Section 2.1.3.6.3. The text does not identify if the first floor storage module areas contain floor drains. A drawing which shows the pipings/drains/lines/etc. beneath the first floor is required in order to evaluate the adequacy of the design and operation of the secondary containment system as described in Chapter 4.0.
36. 2-6/50-52 (Section 2.1.3.6.3). The text describes that transuranic mixed waste modules are separated from other modules with temporary plastic-chain barriers. During an August 17, 1993, and a September 14, 1993, unit visit, the described plastic-chain barriers were not noted. Confirm if this operational function is currently being implemented. In addition, please identify the purpose of the chain link barriers.
37. Sections 2.1.3.6.4, 2.1.3.6.5, and 4.1.4.3. It is stated that incompatible dangerous waste is separated by being placed in different rooms on the second and third floors respectively. It is the reviewer's interpretation that only two rooms exist on the second floor and one room on the third floor. Describe the confirmation process by which it is determined that all wastes contained within each room are compatible with the wastes stored in the same room. In addition, please include a description of how the

confirmation process addresses "non-certifiable" drums or those drums put "on hold" (i.e., those drums stored in modules labelled "Oxidizer Failed X-Ray," "Return to Generator Acids," "X-Ray Cannot Penetrate Acids," "Hold Cannot Penetrate," "PNL Almost Certified Hold/Return OMW," "Caustic Cannot Penetrate," etc.) concerning compatibility.

38. **New Section.** A section similar to Sections 2.1.3.1 through 2.1.3.6 should be added for the radiologically contaminated process cells. The section should also describe what potential dangerous waste activities may be occurring in the cells (i.e., storage of dangerous or mixed waste). At any time as information becomes available about the process cells, the application/permit may be revised/modified. Until such time that it is demonstrated that storage of dangerous or mixed waste has not been occurring in the process cells, the process cells are considered a part of this unit.
39. 2-8/23 (Section 2.2) and Drawing H-13-000075. The 224-T Building Record of Survey indicates that the radiologically contaminated process cells A through F are not included as within the legal boundaries of the unit. Until such time that it is demonstrated that storage of dangerous or mixed waste has not been conducted in the cells, the radiologically contaminated process cells A through F are considered to occur within the legal boundaries of the unit. Re-survey the building to include the radiologically contaminated process cells A through F and re-submit the Record of Survey.
40. 2-8/34-36 (Section 2.3.1). The referenced text identifies that the 224-T TRUSAF design meets the criteria of "Standard Design Criteria - 4.1." It is the reviewer's understanding that the 224-T TRUSAF unit is considered to be a Safety Class 3. For clarification, indicate the Safety Class designation for this unit within the text of the application. In addition, the "Transuranic Waste Storage and Assay Facility Hazard Identification and Evaluation" (SD-WM-SAR-025 Rev. 0), identifies that the HVAC system is not "seismically hardened or tornado resistant." The same document discusses the potential loss of the HVAC system. Please include a similar description/discussion of the HVAC system in the application. Also, it is the reviewer's understanding that a structural evaluation of the unit was done in August 1992 and a report dated February 12, 1993, was issued. The reviewer requests that either a copy of the report be included as an appendix or the results of the report be summarized in Section 2.3.1.
41. 2-12/10-11 (Section 2.5.1). The text states that due to sloping floors and curbed doorways, secondary containment is provided for each floor. Either add a qualifier that secondary containment is proposed to be provided as described by Section 4.1.1.3 or delete the statement that secondary containment exists. In addition, as indicated above for deficiencies 2-4/26-27 and 2-12/9-10, the slope of the floor has not yet been verified. If the floor is found not to be sloped, modify the text accordingly.
42. Section 2.5.2. Due to the unknowns associated with the radiologically contaminated process cells, add a description to this section which identifies potential air quality degradation by mixed or dangerous wastes associated with the entry into and/or the activities related to the process cells.

43. 2-13/15 (Section 2.5.6), 3-1/17 (Section 3.1), 3-3/33 (Section 3.2), 4-1/43-46 (Section 4.1.1.1), 6-8/11-14 (Section 6.5.1), etc. Throughout the application, "U.S. Department of Transportation (DOT)-approved or equivalent 17C or 17H 55-gallon containers or other DOT-approved packages and overpacks" are described as the type of containers to be utilized at this unit. The "Hanford Site Solid Waste Acceptance Criteria" (WHC-EP-0063-3) identifies transuranic waste containers in Section 3.4.2 to exclude DOT Type 17H drums unless "written approval of SWE is obtained in advance of packaging the waste." Identify if SWE's written approval of DOT Type 17H is automatic. Also, identify if the usage of DOT Type 17H drums satisfies the requirements of Section 3.4.2. If DOT Type 17H drum usage criteria exists, include a description of the applicable criteria.
44. Section 2.5.8. During the operation of the unit, there may be an occasion to generate dangerous wastes. For example, during the proposed sealing, it may be necessary to generate dangerous waste. In addition, during site visits on September 14 and October 8, 1993, a satellite accumulation area for personal protective equipment-related waste was noted on the second floor. Include a statement that under normal operating conditions, if waste is generated, processes will be utilized to treat, detoxify, recycle, reclaim, or recover waste material to the extent economically feasible. In addition, include a description of wastes generated during normal operating procedures.
45. 2-14/13-16 (Section 2.6). The buffer zones as identified in Section 2.6 reference WAC 173-303-640. It is assumed that buffer zones are only associated with tanks and tank systems. Buffer zones are also associated with container management. Refer to WAC 173-303-630(8) and (9). As the Part A identifies the management of D001, D003 and potentially incompatible waste types, include a discussion of provisions taken or to be taken to address container management of ignitable or reactive wastes and incompatible wastes.
46. 2-14/29-48 (Section 2.7.1) and 2-15/1-40 (Section 2.7.1). Confirm if the spill and discharge notification procedures identified are in agreement with those of the Draft Permit for the Treatment, Storage and Disposal of Dangerous Waste's immediate reporting requirements. Where discrepancies occur, the procedures should be changed to agree with the draft permit requirements. For example, the draft permit currently requires immediate verbal reporting to occur within two hours of the permittees becoming aware of the release and the procedures of the application commit to an indeterminate "immediately" reporting an undefined "detectable spill." As another example, the specific informational criteria of 2-15/10-16 is not identical to that of the draft permit. As another example, the draft permit currently requires the reporting of radioactive substance releases and 2-14/45 only addresses the release of "dangerous waste." As another example, the draft permit currently identifies an immediate response telephone number of 509/736-3000 and the application identifies the number of 509/546-2990. Pending issuance of the Permit for the Treatment, Storage and Disposal of Dangerous Waste for the Hanford facility, this deficiency may remain "open," if necessary.
47. 2-15/32-40 (Section 2.7.1). Confirm if the spill or release during transportation procedures identified are consistent and in agreement with those of the Draft Permit for the Treatment, Storage and Disposal of Dangerous Waste's immediate reporting

requirements. Where discrepancies occur, the procedures should be changed to agree with the draft permit requirements. Pending issuance of the Permit for the Treatment, Storage and Disposal of Dangerous Waste for the Hanford facility, this deficiency may remain "open," if necessary.

48. 2-16/26-28 (Section 2.8.1). The Draft Permit for the Treatment, Storage and Disposal of Dangerous Waste currently addresses the manifest system and identifies under what conditions dangerous waste shall be manifested. Therefore, delete the referenced sentence. Pending issuance of the Permit for the Treatment, Storage and Disposal of Dangerous Waste for the Hanford facility, this deficiency may remain "open," if necessary.
49. 2-17/40-4 (Section 2.8.1) and 2-17/45-46 (Section 2.8.1). The Draft Permit for the Treatment, Storage and Disposal of Dangerous Waste currently addresses the manifest system conditions. Manifesting requirements may be applicable to onsite generators. The manifest conditions applicable to onsite generators should be described. Pending issuance of the Permit for the Treatment, Storage and Disposal of Dangerous Waste for the Hanford facility, this deficiency may remain "open," if necessary.
50. 2-18/6-10 (Section 2.8.1). If the Permit for the Treatment, Storage and Disposal of Dangerous Waste is issued, a permit modification, via WAC 173-303-830, would be the mechanism to change procedures identified in the permit. Therefore, compare the proposed procedures for receiving shipments to applicable manifesting conditions of the permit and identify exactly which procedures may be changed by the use of an engineering change notice. Pending issuance of the Permit for the Treatment, Storage and Disposal of Dangerous Waste for the Hanford facility, this deficiency may remain "open," if necessary.
51. 2-18/24 (Section 2.8.1), 2-18/43 (Section 2.8.1), 2-19/1 (Section 2.8.1), 2-19/6 (Section 2.8.1), 2-19/9 (Section 2.8.1), 2-19/12 (Section 2.8.1), and 2-19/17 (Section 2.8.1). The Draft Permit for the Treatment, Storage and Disposal of Dangerous Waste currently addresses the manifest system conditions. Manifesting requirements may be applicable to onsite generators. If so, delete the word "onsite" or modify the statement to reflect that the EPA Uniform Hazardous Waste Manifest will be utilized onsite as applicable. Pending issuance of the Permit for the Treatment, Storage and Disposal of Dangerous Waste for the Hanford facility, this deficiency may remain "open," if necessary.
52. 2-19/19 (Section 2.8.1). The text proposes to maintain manifests, transfer forms, notices, and information on file for "five years or until closure of the 224-T TRUSAF, whichever is least." The Draft Permit for the Treatment, Storage and Disposal of Dangerous Waste may require a retention period of documents for a minimum of ten years. Modify the text accordingly to agree with the conditions of the draft permit. Pending issuance of the Permit for the Treatment, Storage and Disposal of Dangerous Waste for the Hanford facility, this deficiency may remain "open," if necessary.
53. 2-19/19 (Section 2.8.1). The text proposes to maintain manifests, transfer forms, notices and information "on file," but does not identify a location where the referenced items will be maintained. Identify the location.

54. Section 2.8.2. Include a cite of WAC 173-303-370(4) and reference the definition's "significant discrepancy" criteria as that to be utilized in attempting reconciliation of the discrepancy. Also, cite WAC 173-303-370(4)(b) and propose to submit a letter report, which includes a copy of the applicable manifest or shipping paper, within 15 days of discovery of a significant discrepancy.
55. 2-20/1-6 (Section 2.8.2). The bullet represents an action rather than an alternative. Either delete it or re-write it as an alternative.
56. 2-20/4 (Section 2.8.2). Re-write the sentence stating that Ecology and the EPA Regional Administrator will be notified of non-reconciliation within 15 days of discovery of a significant discrepancy.
57. 2-20/5 (Section 2.8.2). Delete the wording "offsite noncompliant." The Draft Permit for the Treatment, Storage and Disposal of Dangerous Waste currently addresses the manifest discrepancy reporting requirements which may be applicable to onsite shipments utilizing tracking forms. Also, a significant discrepancy may occur which may not represent noncompliance. Pending issuance of the Permit for the Treatment, Storage and Disposal of Dangerous Waste for the Hanford facility, this deficiency may remain "open," if necessary.
58. Section 2.8.3.1. During visits to the unit on September 14 and October 8, 1993, several postings/signs were noted on the walls which included the following: "Oxidizer Failed X-Ray," "Return to Generator Acids," "X-Ray Cannot Penetrate Acids," "Hold Cannot Penetrate," "PNL Almost Certified Hold/Return OMW," "Caustic Cannot Penetrate," etc. The distinction between manifest discrepancies and waste acceptance without confirmation and verification is required in this section. Although the unit is not designed to store certain materials, without waste acceptance confirmation and verification, acceptance of these materials may be occurring.
59. 2-20/16-20 (Section 2.8.3.1). During visits to the unit on September 14 and October 8, 1993, Backlog Wastes were noted in the first floor receiving area. During these visits, it was explained to the reviewer that the real-time radiography x-ray system (RTR) and the transuranic waste assayer (TWA) may be utilized for wastes which will not be accepted at the unit for storage. If this understanding is correct, the statement that materials that the unit is not designed to store "are not offloaded from the vehicle" is incorrect. The usage of the RTR, the TWA and the unit's facilities should be described in this section.
60. Chapter 3.0. The chapter describes the waste acceptance process based on process knowledge, but does not describe the questions which arise from the wastes being assayed and x-rayed. Identify which wastes received at the facility are x-rayed and assayed and identify the various storage/management scenarios currently being utilized and to be utilized in the future, which deal with non-certifiable wastes. The description should include such information that identifies if the waste is re-evaluated for designation purposes, if the waste is re-evaluated for compatibility purposes, and how the various waste types are managed.

61. Chapter 3.0 If storage of dangerous waste is confirmed to be occurring in the radiologically contaminated process cells (cells A through F), propose to modify this chapter accordingly to include waste characteristics descriptions associated with the wastes stored in the areas currently not included.
62. Chapter 3.0. The "Transuranic Waste Storage and Assay Facility Hazard Identification and Evaluation" (SD-WM-SAR-025 Rev. 0) and as amended by Engineering Change Notice 121576 identifies that TRUSAF "also plans to receive drums that require no overview." The document further explains that the wastes, requiring no overview, "are received as certified waste containers that are sent to TRUSAF for storage only," and that the containers will be from off-site Waste Isolation Pilot Plant - Waste Acceptance Criteria (WIPP-WAC) certified generators and will be sent directly to the interim storage area. This approach is inconsistent with the procedures described in the application. Identify if any of the procedures as described in the application can be interpreted to allow the "no overview" procedures referenced above.
63. 3-1/37-39 (Section 3.1). It is stated that "[I]n all cases, the waste is dry . . ." Quantify the allowance for residual liquids. In addition, identify if dangerous waste has been received at this unit containing more than the allowed residual liquid. The concern that due to lack of confirmation, liquid(s) generated during transport, etc., packaged liquids may be directed to this unit. Due to administrative process times, there is concern that the necessity for the waste to be stored at a RCRA Treatment, Storage and/or Disposal (TSD) facility may drive its acceptance at this unit. Confirm the accuracy of the above referenced statement.
64. 3-2/1-3 (Section 3.1). The text states that it is the generator's responsibility to "completely and correctly identify the dangerous constituents of their waste." WAC 173-303-300(1) requires the "facility owner or operator to confirm his knowledge about a dangerous waste before he stores, treats, or disposes of it." In addition, WAC 173-303-300(3) requires the owner or operator of an off-site facility to confirm that each dangerous waste received at the facility matches the identity of the waste specified on the accompanying manifest or shipping paper. While complete and correct identification of the dangerous waste may be recognized on-site as the generator's responsibility, regulatorily, the TSD owner or operator is required to confirm the knowledge prior to accepting the waste for storage, treatment or disposal. Include the appropriate regulatory cites and describe the owner/operator's confirmation responsibilities.
65. 3-3/29-36 (Section 3.2). During visits to the unit on September 14 and October 8, 1993, it was explained to the reviewer that the RTR and TWA may be utilized for wastes which will not be accepted at the unit for storage. Identify which types of containers that will be allowed for x-raying and assaying at this unit.
66. 3-4/11-21 (Section 3.2). The referenced text explains the rationale for not opening waste containers at the unit. As stated under comment 3-2/1-3, WAC 173-303-300 requires confirmation of waste identity prior to acceptance for storage. It is the reviewer's

understanding that the Draft Permit for the Treatment, Storage and Disposal of Dangerous Waste may address waste analysis requirements for the site. Pending issuance of the Permit for the Treatment, Storage and Disposal of Dangerous Waste for the Hanford facility, this deficiency may remain "open," if necessary.

67. 3-4/22-24 (Section 3.2). As stated above under comment 3-2/1-3, WAC 173-303-300 requires the "facility owner or operator to confirm his knowledge about a dangerous waste before he stores, treats, or disposes of it." While it is clearly the generator's responsibility to correctly designate his waste (WAC 173-303-070), it is the TSD's responsibility to confirm that knowledge prior to accepting the waste for storage. Either delete the sentence or cite WAC 173-303-070 and 300 and include a statement describing the facility owner or operator's responsibilities.
68. 3-4/26-30 (Section 3.2) or Chapter 3.0. As a percentage of transuranic waste stored at this unit is ultimately destined for disposal at the Waste Isolation Pilot Plant (WIPP) in Carlsbad, New Mexico and for various reasons cannot be certified, the reviewer requests a description of transuranic waste characterization be included. The reviewer also requests that the description include a description of the transuranic waste certification program/process and the regulatory and programmatic drivers of the process (i.e., DOE Order 5820.2A, DOE/WIPP 069, WAC-EP-0063 and WAC certification plan(s)). A description of how transuranic wastes, which cannot be certified for the various reasons, are managed at the unit is requested to be included in detail to evaluate the management practices as they relate to compliance with WAC 173-303 requirements.
69. 3-4/34-36 (Section 3.2). As described above under comment 2.8.3.1 from the postings/signs noted on the walls at the unit, there appears to be an acceptance of waste for storage where discrepancies between process knowledge and assay and x-ray analysis exist. To further explain, it appears that waste may be accepted for storage by the Solid Waste Engineering organization after which the waste is subjected to x-ray and assay "analysis." During this analysis, it may be determined that the waste cannot be certified, must be returned to generator, etc. The reviewer requests that this x-ray and/or assay "determination" be described in detail. The reviewer requests that examples be provided which would require the wastes to be managed differently (i.e., the x-ray and/or assay identification of free liquids, aerosol cans, non-penetrable features, etc.). The reviewer considers the above referenced differential management of certain wastes to possibly represent incomplete knowledge of materials and processes.
70. 3-4/36-40 (Section 3.2) and 3-5/29-33 (Section 3.2.2). The referenced text describes the generator's responsibilities for certifying the composition of the wastes and the Solid Waste Engineering organization's responses to incomplete and/or inaccurate generator-supplied information. Please identify what procedures are followed if incorrect information, found during x-ray and/or assay analysis, is identified. In addition, identify under what conditions the waste would be re-evaluated for dangerous waste designation purposes (including transuranic waste being re-evaluated for mixed waste designation purposes).
71. 3-4/52 (Section 3.2.1). Delete the word "solely."

72. 3-5/29-33 (Section 3.2.2), 3-5/21 (Section 3.2.2), and 3-5/43-46 (Section 3.2.3). In those cases where the information provided by the generator is found to be inaccurate (by assay and/or x-ray analysis) and the generator's 90-day accumulation period has been exceeded, it is the reviewer's understanding that the waste is approved for storage at the unit. The text implies that such "waste disposal analysis" discrepancies will be resolved prior to accepting waste for storage. The text describes a determination of accuracy. Please describe how it is determined if the information is correct. Include a description which identifies the various scenarios by which waste may be accepted for storage at this unit.
73. Sections 3.2.3 and 3.2.10. The referenced sections imply that a determination of storage locations is made during the waste acceptance process. It is requested that this determination be described in detail and that the description identify how compatibility is evaluated in relation to which particular floor and/or storage module the waste will be stored on and/or in. Also, it is the reviewer's understanding that the Solid Waste Information and Tracking System (SWITS) does not currently identify the locations of drums within the 224-T TRUSAF unit and that parameters of the system do not address the compatibility determination/evaluation. If there is a system which currently tracks this information, please identify that system.
74. 3-6/1-6 (Section 3.2.4). An example of the referenced assessments is requested. Specifically, an example of an assessment whereby an uncertifiable waste or shipment has been accepted for storage at the 224-T TRUSAF unit. The reviewer's interest lies with the associated follow-up and how the non-certifiable waste issue is resolved.
75. 3-6/31 (Section 3.2.4). Define "noncompliant." Does the inability to certify the waste qualify as "noncompliant?"
76. Section 3.2.4. Transuranic waste appears to have been omitted from discussion within this section. It is the reviewer's understanding that it is this particular waste type that is required to be certified prior to disposal at the WIPP facility. It is also the reviewer's understanding that it is this particular waste type that is being managed differentially by storing it in various storage arrays or modules without confirmation and potentially without the appropriate designation. Due to the uncertifiable uniqueness of certain waste types and the possibility of the waste actually being a mixed transuranic waste, a detailed description of the management of the transuranic waste as it applies to this section is required to be included within this section.
77. 3-6/48-49 (Section 3.2.4). Is the referenced checklist standardized? An example of such a checklist is requested.
78. 3-7/13-15 (Section 3.2.4). Please identify which criteria from the "Hanford Site Solid Waste Acceptance Criteria" are considered/evaluated for transuranic, mixed, and low level mixed wastes received at the 224-T TRUSAF unit.

79. Pages 3-7 and 3-8 (Section 3.2.4). The assessment team's oversight and certification process is described during which a checklist is generated and completed. Identify if the process includes/addresses more than one waste stream. In addition, if the generator's waste stream changes, is the oversight and certification process conducted again prior to acceptance of a new waste type?
80. 3-8/44-45 (Section 3.2.4). Identify where in Chapter 12 it is indicated how long these documents will be retained/maintained. Also, identify the physical location where these documents will be retained/maintained.
81. Sections 3.2.5, 3.2.6, 3.2.7, 3.2.8, 3.2.9, and 3.2.10. Two main items of concern to address in these sections are: 1) the lack of waste confirmation prior to acceptance (via sampling by the receiving TSD unit) which addresses the various generators and the various waste streams, and 2) the acceptance and management of non-certifiable wastes (after x-ray and assay analysis). It is the reviewer's understanding that the Draft Permit for the Treatment, Storage and Disposal of Dangerous Waste will address waste analysis requirements. For item number 1 above, pending issuance of the Permit for the Treatment, Storage and Disposal of Dangerous Waste for the Hanford facility, this issue may remain "open." Regarding item number 2 above, it is the reviewer's opinion that item number 1 should be resolved prior to attempting resolution of item number 2.
82. 3-9/15-17 (Section 3.2.6). It is indicated that analytical testing is sometimes required before transport of waste to the unit. Please identify what percentage of time this testing is required and provide an example or describe under what conditions the testing would be required.
83. 3-9/30-33 (Section 3.2.7). Is there a number available for how often this has been required for 224-T TRUSAF? Again, an identification of what percentage of time this testing/sampling is required is requested.
84. Sections 3.2.7 and 3.2.8. From a review of the physical descriptions of wastes stored at this unit, it appears that the majority of waste is "debris-like" in nature. A physical description of a typical waste(s) is(are) requested to be included. In addition, where sampling (at the point of generation) has been required, a description of how this "debris-like" material is sampled for designation purposes is requested. In addition, if the wastes were to be sampled for confirmation purposes, a description of the sampling approach for this typical "debris-like" waste is requested to be provided in the response table.
85. 3-9/44 (Section 3.2.7). Please identify under what conditions a composite sample would be collected of the "debris-like" waste types stored at this unit. If applicable, please describe how such a composite sample would be collected.
86. An Additional Section. If sampling is conducted for confirmation purposes, a detailed description of sampling methods, equipment, quality assurance/quality control procedures, etc. will be required. Pending issuance of the Permit for the Treatment,

Storage and Disposal of Dangerous Waste for the Hanford facility and the resolution of the comment regarding Sections 3.2.5 through 3.2.10, this issue may remain "open," if necessary.

87. 3-10/19-23 (Section 3.2.8). Describe in detail how it is determined if an improper designation has been made. Specifically, identify if assay and x-ray analysis results are included in the determination. As described above under comment 3-5/29-33 and 3-5/43-46, there is a concern that exceedance of the generator's 90-day accumulation period may not allow for the sampling as described. Clarify when and under what conditions the sampling would be required and where the sampling would be performed.
88. 3-10/23 (Section 3.2.8). Define "waste coordinator."
89. Chapter 3 and 3-10/22-25 (Section 3.2.8). Two months of sampling, after discovery of an incorrect designation, is described to be required for correction purposes. The purpose of the confirmation requirement of WAC 173-303-300 is to ensure that the dangerous waste is managed properly. Although the two month sampling requirement addresses the initiation of the problem, it does not resolve or address potential dangerous waste mismanagement. A proposal which addresses and insures the proper management of wastes is required. In addition, explain why a two month period was selected for corrective measures rather than a shipment-based approach. Identify the frequency of repeat shipments (from the same generator) made to this unit within a two month period.
90. 3-10/40-44 (Section 3.2.9). It is the reviewer's understanding that each drum is weighed during the "administrative processing" of the drummed wastes. If this is correct, include a description of this action.
91. 3-11/2-6 (Section 3.2.9). Clarify if the text is referring only to the exterior inspection.
92. Section 3.2.9. Identify if there are additional requirements for wastes for which documentation is determined (by x-ray and assay analysis) to be inaccurate.
93. Section 3.3 and 4-3/16-34 (Section 4.1.1.2). The referenced section and text needs to be updated to reflect the current regulations regarding land disposal restrictions. There are incorrect citations to the land disposal restrictions which need to be clarified (i.e., the third-third rule was promulgated in 55 FR 22520 on June 1, 1990). In addition, the 1992 Report on Hanford Site Land Disposal Restrictions for Mixed Wastes (DOE-RL 1992) has been superseded with the 1993 submittal. The two-year national capacity variance expired on May 8, 1992, and was extended for debris until May 8, 1993. This extension has also expired. There was also an extension for debris which extended the case-by-case variance to May 8, 1994, for debris contaminated with third-third wastes. In addition, the 57 FR 37194, August 18, 1992, finalized a change in LDR standards for F001 - F005 (solvent) listed hazardous wastes. The storage of solvents is identified and this reference should be included. This section specifies that the Tri-

Party Agreement allows for the continued storage of this waste until sufficient treatment capacity is available in accordance with the schedules in the Tri-Party Agreement. The specific reference in the Tri-Party Agreement needs to be cited.

Clarify the May 8, 1992 variance. This was a nationwide capacity variance for contaminated debris through May 8, 1992. This variance which was published as the third-third rule on June 1, 1990, 55 FR 22520 has expired and therefore should be clarified in this section.

Clarify May 8, 1993, and May 8, 1994, case-by-case extensions. These case-by-case extensions were due to the generic case-by-case extension published on May 15, 1992, in 57 FR 20766 and the treatment standards for debris published on August 18, 1992, in 57 FR 37194. These rules extended the debris capacity variance to May 8, 1993, and specified treatment standards for hazardous debris. The May 8, 1994, extension was due to the renewal of the case-by-case extension which was published on May 13, 1993, in 58 FR 28506. This section should be rewritten to specify that this case-by-case extension was only for debris contaminated with third-third wastes.

Clarify and reference the 1993 Report on Hanford Site Land Disposal Restrictions for Mixed Wastes.

Clarify the reference to treatment standards for solvents: F001 - F005. These solvent treatment standards were finalized on August 18, 1992, in 57 FR 37194 Debris Rule which specified treatment standards for hazardous debris.

94. Table 3-3/6-7. The Toxicity Characteristic Leaching Procedure should correctly cite WAC 173-303-090(8).
95. Figure 3-2. The waste control procedures description does not include additional information obtained from assay and x-ray analysis. As this information potentially identifies inadequate characterization or designation, it is requested that additional procedures be added to the figure which identify waste control procedures for wastes which do not certify for WIPP and which identify incorrect characterization or designation.
96. Table 3-1. WL01 and WL02 wastes are identified as accepted at the unit for storage. Page 3-11, line 20, indicates that labpacks are not accepted for storage at this unit. Either delete the WL01 and WL02 codes from Table 3-1 or correct the referenced conflicting statement.
97. Chapter 4.0. If storage of dangerous waste is confirmed to be occurring in the radiologically contaminated process cells (cells A through F), propose to modify this chapter accordingly to include process information associated with the applicable wastes stored in the areas currently not included.

98. 4-1/35 (Section 4.1.1) and 4-2/17-27 (Section 4.1.1.2). Define "administratively processed," indicating at what point a waste container is considered to have been administratively processed, (specifically, when the waste drums may be removed from the portable secondary containment or when the waste drums are placed in their respective storage modules).
99. 4-2/15-17 (Section 4.1.1.2). Cite WAC 173-303-630 and specify that containers will be managed and labelled accordingly. Also, describe the labelling to be utilized. It should be noted that during an inspection of the drums on November 18, 1993, numerous drums were documented to not identify the major risks associated with the contents of the containers as required by WAC 173-303-630(3). In addition, drums for which lead lined gloves were identified as the contents and of which were not labelled were documented.
100. 4-2/19 (Section 4.1.1.2). Identify which containers are visually inspected weekly for degradation (those being administratively processed, those having been administratively processed, or both).
101. 4-2/21-27 (Section 4.1.1.2). It is the reviewer's understanding that each drum is weighed during the "administrative processing" of the drummed wastes. If this is correct, include a description of this action.
102. 4-2/26-27 (Section 4.1.1.2). Identify what the x-ray and assay systems verify. In addition, it is requested that an identification of WIPP certification criteria be provided in addition to criteria utilized by Westinghouse Hanford Company for waste management purposes. The distinction between confirmation of inaccurate "process knowledge" and confirmation of anticipated "process knowledge" is not differentiated. To further explain, it is the reviewer's understanding that the x-ray technician utilizes criteria to identify if a drum should be "put on hold." If the x-ray and assay analysis is to be utilized for confirmation purposes, the confirmation process should be identified and thoroughly described.
103. 4-2/29-32 (Section 4.1.1.2). Describe in detail how operations personnel determine which storage arrays or modules to place drums in. In particular, it is requested that the process by which compatibility is determined be described in detail. In addition, it is requested that the description include an identification of criteria evaluated concerning those drum "put on hold," or stored in the various arrays labelled "X-Ray Cannot Penetrate Acids," "Hold Cannot Penetrate," "Caustic Cannot Penetrate," etc. Similarly, it is the reviewer's understanding that the "on hold" storage areas differ between floors. It is requested that a detailed description of the criteria for the various "on hold" areas, differentiating by floor, be provided.
104. 4-2/29-39 (Section 4.1.1.2). During a visit to the unit on November 22, 1993, several drums were noted in the first floor storage area (labelled Storage Area No. 7) for which an assay had been completed but not an x-ray. The associated paperwork indicated that assay results indicated that the drum contents were low level waste. It was explained by the operator that the drums would not remain (in storage) at the TRUSAF unit and that as they did not contain transuranic waste, would not be x-rayed. Several concerns with the above described scenario are generated. First, the "administrative process" was not completed and the drums

were stored in a storage area. Second, the "administrative process" was not completed and the drums were stored in a storage area with no portable secondary containment. Third, having completed the assay portion of the "administrative process," there appears to be no intent to complete the x-ray portion of the "administrative process." Fourth, with the x-ray portion of the "administrative process," additional information may be provided to confirm or contradict the "process knowledge." It is the reviewer's understanding that the x-ray contradictions, in part, dictate an "on hold" status for the drums. Furthermore, it is these x-ray contradictions which may signal an incorrect dangerous waste designation. Therefore, the application must clearly define the "administrative process" and provide a description of how drum management will be conducted.

105. 4-2/41-44 (Section 4.1.1.2). The text indicates that drums may be stacked two containers high. During visits to the unit on September 14 and October 8, 1993, signs reading "MAX. Load 150 P.S.F. Dist'd Over This Floor Area" were noted on the second floor. In addition, the "Transuranic Waste Storage and Assay Facility Hazard Identification and Evaluation," (SD-WM-SAR-025 Rev. 0) identifies maximum floor first, second, third, and elevator floor loading limits and requires a structural analysis where the limits must be exceeded. Within the application, identify the maximum weight allowed per stack per floor/location. In addition, identify where in the process of selecting an appropriate storage module for the drums, the weight of the drums is taken into consideration for the above referenced structural limits. In addition, specify within the application that where the limits must be exceeded, a structural analysis will be made prior to the exceedance.
106. 4-3/37 (Section 4.1.1.3) and Figure 4-1. It is the reviewer's understanding that the floors have not been sealed at this time. Please revise the estimated completion date for the floor sealing as applicable. In addition, on Figure 4-1, the floor sealing task identifies that the floors will be sealed with an "approved sealant." Please identify the approving entity.
107. Figure 4-1. A description of the diking of all floor penetrations is requested. In addition, a definition of "floor penetrations" is requested to be provided. Please note that during an October 8, 1993, unit visit, several undiked cracks in the concrete were noted in the receiving area.
108. 4-3/38-41 (Section 4.1.1.3). The figures (Figures 4-2 through 4-4) referenced to show liquid collection areas and curbs at the doorways do not show these features. Please reference the appropriate diagrams/figures which do show these features.
109. 4-3/36-43 (Section 4.1.1.3) and Figures 4-2, 4-3, and 4-4. On the referenced figures, a minimum curb height of two inches is indicated. Upon completion of the floor sealing design, a detailed description of the design (i.e., curb height, epoxy/sealant physical and chemical properties, sealant maintenance requirements, new [if applicable] floor slope, etc.) is requested to be included in the application.

110. 4-3/45-48 (Section 4.1.1.3) and 4-4/1-2 (Section 4.1.1.3). Clarify if portable secondary containment systems will be utilized for waste packages containing free liquids during storage (i.e., within the storage modules/arrays). Also, clarify if portable secondary containment systems will be utilized for all waste packages (including transuranic waste packages) containing free liquids during storage.
111. 4-4/17-21 (Section 4.1.1.3). During an October 8, 1993, unit visit, several cracks in the concrete were noted in the receiving area. It is the reviewer's understanding that the sealant currently being considered for application, will fill the existing cracks. Revise the referenced text accordingly to identify what remedial measures will be taken to repair damaged and/or cracked sealant and/or concrete.
112. 4-4/26-27 (Section 4.1.1.4). How are waste packages managed of which confirmation of the nonexistence of liquids cannot be made (i.e., waste material cannot be penetrated due to lead linings/coatings)?
113. Section 4.1.1.7. During a November 18 and 22, 1993, inspection, a copy of a April 18, 1988, February 26, 1992, January 25, 1993, and February 2, 1993, inspection checksheet was obtained. Standing water on the third floor from the third floor ceiling cracks was documented on the April 18, 1988. No documentation of repair or follow-up was obtained. Standing water on the third floor from the third floor ceiling cracks was again documented on February 26, 1992. Again, standing water "throughout building" is documented on January 25, 1993. The follow-up for the January 25, 1993, and February 2, 1993, included a note on the inspection checksheets that the snow had melted and the roof is not leaking. Standing water in any portion of the unit is unacceptable and "run-on" into the unit must be prevented as required by WAC 173-303-630. Therefore, modify this section describing the "run-on" events and include a detailed description of how these events will be corrected (i.e., how the roof will be repaired).
114. 4-5/5-8 (Section 4.1.1.8). Clarify what is meant by the "released from the 224-T TRUSAF" statement. Specifically, does this mean contaminated water's occurrence outside of the building, into the elevator shaft, etc.?
115. 4-5/13-14 (Section 4.1.1.8). Explain what is meant by the term "liquid waste material."
116. 4-5/16-18 (Section 4.1.1.8). Describe how, and with what frequency, the base of the containers would be inspected for related corrosion/deterioration resulting from contact with water.
117. 4-5/32 (Section 4.1.1.8). Explain what degree of degradation would dictate management of water and clean-up materials as suspect waste.

118. 4-5/16-17 (Section 4.1.1.8). Describe how the containers on the floors will be inspected. In addition, identify the schedule and/or frequency of inspection.
119. 4-5/32 (Section 4.1.1.8). Define "degraded."
120. Section 4.1.2.1 and Appendix 4B. During a unit visit on December 9, 1993, it was noted that the x-ray system had been disassembled. It was explained that the x-ray system was being upgraded to improve the x-ray capabilities of the system. Please include a description of the upgrading and confirm if the information provided in the referenced section and appendix is accurate.
121. 4-5/44-52 (Section 4.1.2.1) and 4-6/1-7 (Section 4.1.2.1). The distinction between confirmation of inaccurate "process knowledge" and confirmation of anticipated "process knowledge" is not differentiated. As stated above under comment 4-2/26-27, detailed criteria for putting a container "on hold" is requested.
122. 4-6/6-7 (Section 4.1.2.1). The text indicates that transuranic mixed waste containers are not returned to the on or offsite generator. As stated above under comment 2.8.3.1, postings/signs indicating a return-to-generator status for certain wastes have been noted at the unit. Clarify the seeming discrepancy.
123. 4-6/42-43 (Section 4.1.4.2). Describe in detail how it would be determined that residual flammables or reactives had been "unexpectedly received."
124. 4-7/6-45 (Sections 4.2, 4.3, 4.5, 4.6, and 4.7). In the event that entry into the process cells identifies the existence of any of the identified units, the applicable section(s) will be required to be modified accordingly.
125. 5-1/4-6 (Section 5.0). Groundwater monitoring is not currently required at the 224-T TRUSAF unit. However, as previously indicated, if storage of dangerous waste is confirmed to be occurring in the radiologically contaminated process cells in units which may require groundwater monitoring, this chapter will be required to be modified accordingly. Propose to modify this chapter accordingly at such time when the applicability is determined. In addition, if a spill with potential for groundwater contamination occurs, groundwater monitoring will be required. In addition, if the unit cannot be "clean closed" and is closed as a disposal unit, groundwater monitoring will be required. Revise the text accordingly.
126. 6-1/22-24 (Section 6.1.1.1) and 6-1/38-42 (Section 6.1.1.2). It is the reviewer's understanding that security controls have changed from those described. Revise the description to reflect the current site security controls.

127. Chapter 6.0. If storage of dangerous waste is confirmed to be occurring in the radiologically contaminated process cells (cells A through F), propose to modify this chapter accordingly to include procedures to prevent hazards associated with the applicable areas currently not included.
128. Section 6.1.1.2. During a visit to the unit on December 9, 1993, new fencing installed around a portion of the unit was noted. It appears that the fencing mimics the unit survey of drawing H-13-000075. Considering the comment under 1-2/9-10 and 2-4/7-10, identify if fencing is to be installed around the remaining portion of the unit.
129. Section 6.2. Include a cite of WAC 173-303-320 regarding general inspection criteria and propose to conduct inspections as required.
130. 6-2/29-31 (Section 6.2.1). Include a provision that the inspection log will contain those elements of WAC 173-303-320(2)(d) and will be signed by the inspector.
131. 6-3/31-37 (Section 6.2.1.2). The frequency of inspection for the receiving area is not identified as being done on a more frequent schedule than from the inspection of the storage modules. Due to containerized drums being weighed, x-rayed and assayed within the receiving, the RTR, and the TWA areas, it is requested that these areas, which are subject to spills, be inspected daily when in use as specified by WAC 173-303-320(2)(c).
132. 6-3/32-34 (Section 6.2.2.1). Is the waste inventory inspection different from the weekly inspection described in Section 6.2.1.1? If so, include a description and a checklist, if applicable.
133. 6-3/51 (Section 6.2.2.1). During visits to the unit on September 14 and October 8, 1993, peeling paint and associated discolorations were noted on the ceilings of the second and third floors. Due to the noted condition of the ceilings, please include an inspection of the ceiling during the inspection of the concrete floor, walls and curbing.
134. 6-4/2-6 (Section 6.2.2.1) Identify how, how often, and under what conditions, the bottoms of the drums, located on the floor, would be inspected.
135. Section 6.3. Cite WAC 173-303-340 and state that the required equipment will be maintained at the unit to minimize the possibility of fire, explosion, or any unplanned sudden or nonsudden release of dangerous waste or dangerous waste constituents which could threaten the public health or the environment.

136. Section 6.3.1. Immediate access to an emergency communication device is required by WAC 173-303-340(2)(b) if there is ever just one employee on the premises while the unit is operating. Identify if this situation is applicable. If so, describe the equipment which would provide an immediate emergency communication to be made.
137. 6-5/49-51 (Section 6.3.1.4). Identify the source of the statement that the water pressure of 79 pounds per square inch is adequate for fire protection.
138. Section 6.3.2. Include a cite of WAC 173-303-340(3) and state that the aisle space will be maintained to allow the unobstructed movement of personnel, fire protection, spill control equipment, and decontamination equipment to any area of facility operation in an emergency. Also, during visits to the unit, the transuranic waste drum configurations were noted to be different from the dangerous waste drum configurations. Specifically, where WAC 173-303-630(5) requires a row of drums to be no more than two drums wide, the rows of transuranic wastes have been noted to be five drums wide. The concern of drum mismanagement regarding transuranic waste (which is potentially dangerous waste) placed in "on hold" storage modules arises in those situations where correct designation of drum contents may be in question. Please include a description of transuranic waste drum management practices and confirm if the current management practices comply with WAC 173-303-340(3).
139. 6-6/40-41 (Section 6.4.1). From the description of Chapter 4.0, the shipment is accepted for administrative processing rather than for storage. If the referenced statement is correct, modify Chapter 4.0 accordingly to clarify when the shipment has been accepted for storage.
140. 6-6/45 (Section 6.4.1). The sentence should read, "[W]hen the placement of containers"
141. 6-7/17-19 (Section 6.4.4). Is the elevator considered powered equipment? If so, include a description of what actions would be taken in the event of failure.
142. 6-8/31-37 (Section 6.5.2). The first sentence of the referenced paragraph states that incompatible waste forms are not allowed in the same container for storage at the unit. A qualifying statement should be included which differentiates between current and historic waste packaging practices. As an example, for those drums to be retrieved from the burial grounds, the waste packaging practices cannot be controlled.
143. 6-8/39-42 (Section 6.5.2). As indicated above under comment for Chapter 3.0, the application neither adequately describes how the compatibility evaluation is performed nor describes how a re-evaluation is performed upon confirmation of conflicting process knowledge information and x-ray and/or assay "analytical" information. In addition, it is noted in the "Tank Farms and Burial Grounds Environmental Status of March 25, 1988," performed by ICF Technology Inc., that the concern of problematic separation of incompatible wastes (page 2-13) was identified. Describe how this concern was addressed/resolved.

144. 6-8/42-51 (Section 6.5.2.). The neutralization scenario of the past is described. Identify if neutralization is currently conducted. If not, identify how the two types of wastes are managed for compatibility.
145. Figure 6-2. During a November 18 and 22, 1993 inspection of the unit, failure to maintain emergency equipment required under WAC 173-303-350(3)(e) in accordance with the facility contingency/emergency plan was documented. Figure 6-2 includes a footnote related to the entire list of items which indicates that "all kits might not contain items identified on the list." In an effort to avoid future violation of WAC 173-303-350(3)(e), it is required that all actual items maintained for contingency/emergency plan implementation be identified on this checklist without the noted disclaimer.
146. Figure 6-1.
- 1) How often are the fire extinguisher's expiration dates checked?
 - 2) Item #7 of the checksheet asks if flooring cracks are sufficiently impervious to contain leaks and spills. Describe the criteria by which a visual weekly inspection would allow this determination to be made.
 - 3) For containers placed on the floor (making that portion of the container not possible to inspect), identify if the bottoms of containers are inspected in any way.
 - 4) Due to the numerous stains on the ceiling noted during recent unit visits, it is requested that an additional item be included on the checksheet to document the condition of the ceilings during times when water has occurred in the facility from heavy precipitation events.
 - 5) For containers for which corrective action is required, the package identification number or some similar identifier is requested to be utilized and included on the checklist.
 - 6) It is requested that an additional item be included on the checksheet which identifies an inspection of the condition of the floor sealant.
 - 7) For Figure 6-1, a differentiation of which elements/items of the checksheet are weekly and which are monthly is requested. From the information supplied in Section 6.2.1.1, it appears that only the fire extinguisher check is a monthly item.
147. Additional Inspection Form. Due to the numerous drum management violations documented during a November 18 and 22, 1993 inspection, it is requested that an additional inspection form be utilized which will allow for the inspection of drum placement and management for a determination of compliance with WAC 173-303-630. Specifically, during the inspection, violations relating to failure to label containers in a manner which adequately identifies the major risk(s) associated with the contents of the containers were noted. In addition, during the same inspection, in those cases where process knowledge differed from x-ray and/or assay information, correct designation is questioned as well as correct drum placement with regard to compatibility. An additional form which will identify the elements of labelling, drum placement, drum management, etc. is requested to be utilized. This type of inspection is recognized to differ substantially from the weekly inspection of Form 6-1, and may only be necessary prior to drum placement or drum replacement.

148. Chapter 7.0. During a November 18 and 22, 1993 inspection, it was noted that the currently utilized building emergency plan for 224-T TRUSAF (WHC-IP-0263-224T) is revision number 4. The building emergency plan included in the application appears to be revision number 3. For purposes of reviewing for completeness, the building emergency plan included in the permit application (as Appendix 7A) was reviewed. Although revision number 3 was reviewed, the reviewer requests that revision number 4 and all subsequent revisions produced prior to permit issuance, be considered "open" for comment.
149. Chapter 7.0. Cite WAC 173-303-350(5)(a)-(e) and state that the contingency plan will be reviewed and immediately amended as required. Also, cite WAC 173-303-350(3)(c) and describe where "the arrangements agreed to by local police departments, fire departments, hospitals, contractors, and state and local emergency response teams to coordinate emergency services" may be found in the application.
150. Chapter 8.0 and Appendix 8A. It is the reviewer's understanding that the personnel training program has changed substantially to address specific training requirements for the complex the unit is located in. Due to the outdated personnel training program included in the application, the reviewer requests to defer review of this chapter until an updated personnel training program can be provided.

Although Chapter 8.0 was not reviewed, several questions have arisen pertaining to personnel training as a program. It is the reviewer's understanding that a system for tracking personnel training requirements and status (TRAC) is currently being developed. Please provide a description of this system and an identification of how Ecology may obtain access to the information when needed. It is also the reviewer's understanding that a document exists (WHC 5-34, 1.8) which identifies all courses and certifications required for the various job classifications. Table 8-3 should be updated to reflect the most current requirements (course titles and numbers). The reviewer requests clarification, throughout Chapter 8.0, of certification versus courses versus job titles. For example, it was noted that the job classification of nuclear operator currently requires three certifications and Section 8.1.1.4 does not identify this requirement as such. Please define "operator fundamental."

151. Chapter 10.0. The Waste Minimization Program for the 224-T TRUSAF unit should address the following areas:
- 1) A "Top Management Support" ensuring that waste minimization is a company/project wide effort,
 - 2) Characterization of waste generation,
 - 3) Periodic waste minimization assessments,
 - 4) Encouragement of technology transfer, and

5) Program evaluation to conduct periodic reviews of program effectiveness.

The Waste Minimization Plan for the 224-T TRUSAF unit does not address all the areas as outlined in the list above. The Waste Minimization Plan must be updated to include the interim final guidance to hazardous waste generators on the elements of a waste minimization program dated May 26, 1993, in 58 FR 31114 and the elements of the Pollution Prevention Policy Statement, dated January 26, 1989, in 54 FR 3845. Additional guidance on Waste Minimization Programs can be found in the Waste Minimization Opportunity Assessment Manual EPA/625/7-88/0033 July 1988.

152. 11-1/5-6 (Section 11.0). Delete the statement that no postclosure activities are applicable or required as the unit will be clean closed. Replace the statement with a cite of WAC 173-303-610(1)(b) and state that the postclosure requirements of subsections (7) through (11) will apply if, at closure, the specified removal or decontamination limits cannot be met.
153. 11-1/12-13 (Section 11.0), 11-2/10-16 (Section 11.1), 11-9/9-11 (Section 11.1.4.8), and Chapter 11.0. As stated above under comments addressing 1-2/9-10 and 2-4/7-10, until such time that it is demonstrated that storage of dangerous or mixed waste has not been conducted in the cells, the radiologically contaminated process cells A through F are considered to exist as part of this unit. Also, if storage of dangerous waste is confirmed to be occurring in the radiologically contaminated process cells, propose to modify this chapter accordingly to include closure and postclosure requirement descriptions associated with the wastes stored in the areas currently not included.
154. 11-1/13-15 (Section 11.0). Refer to the above comment under 1-2/9-10 and 2-4/7-10 regarding the concern of active storage. Also, operable unit 200-TP-4 is identified as the unit this portion of the building would be remediated through CERCLA. It is the reviewer's understanding that 224-T TRUSAF is not included or identified within the operable unit 200-TP-4 as defined in Appendix C of the TPA. To the contrary, the 224-T TRUSAF unit is identified in Appendix B under Group Number S-2-2. Therefore, delete the sentence.
155. 11-1/19 (Section 11.0). Delete the wording "or is environmentally impractical." It may be noted, within the text, that closure-in-place may be selected as an option. Also, include a cite of WAC 173-303-610 and state that the closure of this unit will be done in accordance with this section.
156. 11-1/44-45 (Section 11.0). Restate the sentence stating that closure will be accomplished by meeting the closure performance standards of WAC 173-303-610(2). As indicated by WAC 173-303-610(2)(a)(ii), closure must also demonstrate that dangerous waste constituents do not exceed closure performance standards and is not limited to addressing just dangerous waste.
157. 11-1/44-52 (Section 11.0), 11-4/24-27 (Section 11.1.1.1), and Chapter 11.0. Although the term "action levels" is defined within the closure plan as the "constituent concentration levels that will prompt an action, additional decontamination, additional evaluation,

cleanup, or deferral to the CERCLA process," the term is not defined by WAC 173-303. Furthermore, it is the reviewer's understanding that the term "action levels" only occurs once within the rule (WAC 173-340-400(4)(c)(xi)) with regard to cleanup actions. It is also the reviewer's understanding that for purposes of conducting a RCRA closure through WAC 173-303-610, MTCA "cleanup standards" (of Part VII of the MTCA Rule) are to be utilized rather than the MTCA "cleanup process." As the closure plan addresses a RCRA unit, and to avoid confusion on this subject, delete the "action level" phrase and definition. It should be noted that a definition for "cleanup level" is provided by WAC 173-340-200 which may be utilized by reference of proposed WAC 173-303-610 (scheduled to be promulgated in December 1993 to amend WAC 173-303-610 to include WAC 173-340-200).

158. 11-1/48-52 (Section 11.0) and 11-2/1-2 (Section 11.0). It is the reviewer's understanding that the use of Model Toxics Control Act cleanup levels (Method A or B) may be utilized with the scheduled (December 1993) amendment to WAC 173-303-610. Therefore, delete the discussion and cite WAC 173-303-610(2) stating that the closure performance standards will be attempted to be met.
159. 11-2/35-50 (Section 11.1). Due to the storage of mixed waste at the unit, it is requested that a radiation survey be performed between the visual inspection and the decontamination. The results of the radiation survey should be utilized for selecting biased sample locations for decontamination confirmation purposes. In addition, describe how the damaged and/or potentially contaminated concrete pre-dating the sealing of the floors, will be evaluated for confirmation of decontamination.
160. 11-3/2-3 (Section 11.1). The statement that there are no tanks or piping associated with the unit may not accurately reflect what exists and is related to the process cells. If the process cells are found to be storing dangerous and/or mixed waste(s), associated piping, equipment, and tanks (if applicable) will be required to be decontaminated. If storage of dangerous waste is confirmed to be occurring in the radiologically contaminated process cells, propose to modify this chapter accordingly to include applicable closure procedure descriptions.
161. 11-3/7-18 (Section 11.1). The list of portions of the unit to be decontaminated does not include all areas where waste has been handled (i.e., the loading dock areas). Revise the list to include all areas which have (or had) the potential for becoming (or being) contaminated during the life of the unit operations. In addition, propose to modify this list accordingly in the event that storage of dangerous waste is confirmed to be occurring in the radiologically contaminated process cells.
162. 11-4/1-4 (Section 11.1.1.1) and 11-5/33-35 (Section 11.1.4). The statement that soil contamination from the unit is not anticipated due to the sealed concrete floor with curbed entrance and exit may not accurately reflect what exists and is related to the process cells. If storage of dangerous waste is confirmed to be occurring in the radiologically contaminated process cells, propose to modify this chapter accordingly to include applicable closure procedure descriptions.

163. 11-4/1-4 (Section 11.1.1.1) and 11-5/33-35 (Section 11.1.4). The statement that soil contamination from the unit is not anticipated due to the sealed concrete floor with curbed entrance and exit does not accurately reflect the operational condition of the unit from its inception as a storage unit to the time the unit was upgraded with sealed concrete floors. To further explain, damaged concrete floor has been documented during unit visits and should be taken into consideration as pathways of contaminant migration to the underlying soil. Include a description of how decontamination will be confirmed for the underlying soil with regard to documented damaged concrete.
164. 11-4/5-8 (Section 11.1.1.1). The unloading and loading areas located outside the physical walls of the unit are considered part of the unit and for purposes of closure through WAC 173-303-610, will be required to be included. In addition, if contaminated soil around and/or underneath the unit is found during closure decontamination confirmation activities, the decontamination or removal of such contamination will be required. Therefore, delete the sentences.
165. 11-4/32 (Section 11.1.1.2). Insert the phrase "including dangerous waste constituents" after the word "waste."
166. 11-4/34-35 (Section 11.1.1.2). Include resulting decontamination material(s) (i.e., rinsates, solutions, etc.) in the list of items to be designated and disposed of accordingly.
167. 11-4/38-40 (Section 11.1.1.2). Delete the sentence. Decontamination confirmation is required and must be described in detail.
168. 11-4/40-41 (Section 11.1.1.2). The reviewer does not understand the statement. Either explain the statement or delete it.
169. 11-4/43-46 (Section 11.1.1.2). As requested above under comment 11-2/35-50, the results of a radiation survey (performed between the visual inspection and the decontamination) should be incorporated and utilized for decontamination confirmation purposes. Include the proposal. In addition, describe how the damaged and/or potentially contaminated concrete pre-dating the sealing of the floors, will be evaluated for confirmation of decontamination.
170. 11-4/45-46 (Section 11.1.1.2). Describe the options for decontamination considering the waste types of the Part A application.
171. 11-4/46-49 (Section 11.1.1.2). A biased sampling approach is proposed. The approach is appropriate for known or suspected contamination but a random sampling approach will also be required. For guidance on performing a RCRA closure, please refer to "RCRA Guidance Manual for Subpart G Closure and Post-Closure Care Requirements and Subpart H Cost Estimating Requirements," (OSWER Policy Directive # 9476.00-5) and the Washington State Department of Ecology's draft "Guidance for Clean Closure of Dangerous Waste Facilities."

172. 11-4/49-52 (Section 11.1.1.2) and 11-5/1-8 (Section 11.1.1.2). See the comment above under 11-1/44-52 and Chapter 11.0. Delete the discussion of utilization of "action level values." It should be noted that a definition for "cleanup levels" and "cleanup standards" is provided by WAC 173-340-200 which may be utilized by reference of proposed WAC 173-303-610 (scheduled to be promulgated in December 1993 to amend WAC 173-303-610 in include WAC 173-340-200).
173. 11-5/10-14 (Section 11.1.1.2). Include resulting decontamination material(s) (i.e., rinsates, cleaning solutions, etc.) in this paragraph of items to be decontaminated and/or disposed.
174. 11-5/32 (Section 11.1.4). Delete the words "if necessary."
175. Section 11.1.4.2. As identified above under comment 11-2/35-50, a radiation survey is requested to be performed between the visual inspection and the decontamination.
176. Section 11.1.4.2. Confirmation of decontamination based upon "evidence of spillage" via visual inspection is proposed. Decontamination confirmatory sampling (random, if no visual evidence of spillage is observed) will be required to demonstrate that the site may be "clean closed." Therefore, the closure plan must allow for random sampling as well as biased sampling (using "evidence of spillage") to determine sampling locations. Again, for RCRA closure guidance, please refer to "RCRA Guidance Manual for Subpart G Closure and Post-Closure Care Requirements and Subpart H Cost Estimating Requirements," (OSWER Policy Directive # 9476.00-5).
177. 11-6/10-12 (Section 11.1.4.3). Delete the sentence and replace it with a statement that the closure performance standards of WAC 173-303-610(2) will form the basis for confirming decontamination of the unit.
178. 11-6/18 (Section 11.1.4.3). Re-write the sentence stating that if contamination is present above cleanup levels (established by WAC 173-303-610), further decontamination or removal will be conducted.
179. 11-6/19 (Section 11.1.4.3) and 11-6/29-31 (Section 11.1.4.3). It is appropriate to select the random sample locations at the time of closure but the biased sample locations should be based on the condition of the unit at the time of closure and documented areas of suspected contamination (i.e., damaged concrete floor pre-dating the sealing upgrade, spill occurrence reports, etc.)
180. 11-6/21-31. The reviewer is not familiar with the sample collection guidance of the referenced document. It is requested that the proposed approach be compared to the guidance documents included within the Department of Ecology's draft "Guidance for Clean Closure of Dangerous Waste Facilities" (April 1993). Also, it cannot be determined if the proposed biased sampling will be considered to be part of the proposed five percent random sampling.

181. 11-6/33-34 (Section 11.1.4.3). Re-write the sentence stating that decontamination (not exclusively limited to "surfaces") will continue until the closure performance standards (i.e., cleanup levels) of WAC 173-303-610 are met or the decision to close the unit "in place" is made.
182. 11-6/36-39 (Section 11.1.4.4.). Re-write the first sentence to read "[A]ny spills or releases associated with 224-T TRUSAF closure will" Similarly, the second sentence should read " . . . nature of spilled or released material and estimated volume of spillage or release will be specified"
183. Section 11.1.4.5. Include a provision that in the event that a formal decontamination station is found to be necessary (i.e., if conditions at the unit change in such a way as to require a formal station), the closure plan will be modified accordingly at the time of the change.
184. Section 11.1.4.6.1. The reviewer is not familiar with the "procedural description section submitted on March 16, 1992, with the comments on the Draft Hanford Facility Dangerous Waste Permit." Re-write this section and identify that the procedures/elements identified as Condition II.E. of the draft permit, will be followed for data quality purposes. Pending issuance of the Permit for the Treatment, Storage and Disposal of Dangerous Waste for the Hanford facility, this deficiency may remain "open," if necessary.
185. Section 11.1.4.6.3. It is requested that the laboratory quality control procedures of this section be compared to those elements of Condition II.E. of the Draft Hanford Facility Dangerous Waste Permit to confirm consistency. Pending issuance of the Permit for the Treatment, Storage and Disposal of Dangerous Waste for the Hanford facility, this deficiency may remain "open," if necessary.
186. 11-9/3-5 (Section 11.1.4.7). The term "if contaminated" is not defined or quantified. Either define/quantify the term or indicate that the equipment and contained rinsate will be analyzed for designation purposes in accordance with WAC 173-303-070.
187. Section 11.1.6. Specify that when closure begins, the inventory of dangerous and mixed waste will be removed within 90 days from receipt of the final volume of dangerous wastes as required by WAC 173-303-610(4).
188. 11-9/43-44 (Section 11.1.6). Cite WAC 173-303-610(4) and state that the closure activities described in this plan will be completed within 180 days of receipt of the final volume of waste.
189. Section 11.1.7. Include a description of what conditions (unexpected) would be applicable for requesting an extension to the closure schedule. Also, cite WAC 173-303-610(4) and include an identification of notification schedules.

190. Section 11.1.9. Specify that the certification of closure will be submitted to Ecology by registered mail in accordance with WAC 173-303-610(6).
191. Section 11.1.9.1 and Figure 11-1. It is the reviewer's understanding that the term "independent qualified registered professional engineer" will be included with the scheduled (December 1993) amendment to WAC 173-303-340. If so, insert the word "qualified" between the words "independent" and "registered" within the text of Section 11.1.9.1 and Figure 11-1. Pending adoption of the proposed regulation change, this deficiency may remain "open," if necessary.
192. 11-11/10-13 (Section 11.4). It is asserted that a closure cost estimate is not required because the "Hanford Facility is a federally owned facility for which the federal government is the operator" WAC 173-303-620(1)(c) exempts federal facilities from the requirements of closure cost estimates, however, under WAC 173-303-620(1)(c), ". . . operators of facilities who are under contract with the . . . federal government must meet the requirements of this section." On page iii of this permit application it states, "Westinghouse Hanford Company is identified . . . as a 'co-operator'" Therefore, a detailed closure cost estimate as required by WAC 173-303-620(3)(a) must be provided. For consistency, it is requested that the text utilized in the equivalent sections of the 305-B Storage Facility permit application, the 2727-S Nonradioactive Dangerous Waste Storage Facility closure plan and the 300 Area Solvent Evaporator closure plan be utilized in this application.
193. Sections 11.5, 11.7, and 11.8. It is the reviewer's understanding that specific requirements for financial assurance and liability coverage have been discussed at the Project Manager's level. Pending resolution of this issue, financial assurance and liability coverage are not required.
194. Section 11.6. Following the logic identified under comment 11-11/10-13, a detailed written cost estimate for postclosure care as required by WAC 173-303-620 must be provided, if applicable. The text should reflect that in the event that postclosure care is required at this unit, the estimate will be provided, or as in the case of the 305-B Storage Facility permit application, the text may reflect the intent not to close the unit as a dangerous waste disposal unit.
195. 12-1/14-22 (Section 12.0) and 12-7/29-34 (Section 12.4.2). The reviewer is unfamiliar with the concept of a centralized Hanford Facility Regulatory File index. Please confirm if this manner of record and report collection is in agreement with the Draft Permit for the Treatment, Storage and Disposal of Dangerous Waste for the Hanford Site. In addition, identify which records and reports will also be maintained at the unit (i.e., copies of manifests, shipping papers, traveler checklists, inspection sheets, permit, etc.).
196. 12-2/18 (Section 12.2.2). Include the phrase "as a generator" after "224-T TRUSAF."

197. 12-2/37-39 (Section 12.3). Dangerous waste transportation requirements are specified by Conditions II.P. and II.Q. of the Draft Permit for the Treatment, Storage and Disposal of Dangerous Waste for the Hanford Facility. Modify the referenced statement to reflect the requirements. Pending issuance of the above referenced permit, this deficiency may remain "open," if necessary.
198. 12-2/39-40 (Section 12.3). Immediate reporting requirements are specified by Condition I.E.15. of the Draft Permit for the Treatment, Storage and Disposal of Dangerous Waste for the Hanford Facility. Modify the referenced statement to reflect the requirements. Pending issuance of the above referenced permit, this deficiency may remain "open," if necessary.
199. 12-3/35-37 (Section 12.4.1.1.1). Include a cite of WAC 173-303-370(4) and reference the definition's "significant discrepancy" criteria as that to be utilized in attempting reconciliation of the discrepancy. Also, cite WAC 173-303-370(4)(b) and propose to submit a letter report, which includes a copy of the applicable manifest or shipping paper, within 15 days of discovery of a significant discrepancy.
200. 12-3/41 (Section 12.4.1.1.2). Change the words "were to receive" to "receives."
201. 12-4/44-46 (Section 12.4.1.1.2) and 12-5/1-4 (Section 12.4.1.5). Please refer to the comment regarding Appendix 7A (Section 4.1). The reviewer has requested clarification and identification of when which personnel are to call which numbers and which entities. It should be noted that the inclusion of "line management" as a potential notifier does not allow an identification of responsibilities.
202. Section 12.4.1.5. After the building emergency plan is revised to clearly identify personnel responsibilities, it is requested that this section be compared and revised, if necessary, to ensure consistency throughout the application.
203. Section 12.4.1.5.1. As the Hanford Facility Contingency Plan is to be included in the Permit for the Treatment, Storage and Disposal of Dangerous Waste for the Hanford facility, the reviewer has deferred review of the contingency plan (pending issuance of the above referenced permit). In addition, it is the reviewer's understanding that the Hanford Facility Contingency Plan has been revised. In recognition that the immediate notification procedures included in this section may not be those currently utilized, it is requested that this section be compared and revised, if necessary, to ensure consistency throughout the application and agreement with the above referenced permit. It should be noted that immediate reporting requirements of the above referenced permit occur as Condition I.E.15. and that the immediate verbal notification within two hours after the Permittees become aware of the release and/or noncompliance should be reflected in this section.
204. Section 12.4.1.6. After the building emergency plan is revised to clearly identify personnel responsibilities, it is requested that this section be compared and revised, if necessary, to ensure consistency throughout the application. In addition, a copy of an occurrence report form is requested to be included within this application.

205. 12-7/3 (Section 12.4.1.7) and Section 12.4.1.7.1. Correctly cite WAC 173-303-610(3)(c) for notification of closure.
206. Section 12.4.1.7.2. Cite WAC 173-303-610(6) within this section. Also, it is the reviewer's understanding that the term "independent qualified registered professional engineer" will be included with the scheduled (December 1993) amendment to WAC 173-303-340. If so, insert the word "qualified" between the words "independent" and "registered" within the text of this section. Pending adoption of the proposed regulation change, this deficiency may remain "open," if necessary.
207. Section 12.4.1.7.3. As no "determination" on closure has been made for this unit, delete the statement. WAC 173-303-610(9) may be applicable in the event that the unit cannot be "clean closed." This section may reflect that currently, the requirements of WAC 173-303-610(9) are not applicable.
208. Section 12.4.1.8. Include cites WAC 173-303-610(7) and (8). Also, delete the wording "will not be required, because the 224-T TRUSAF is not a disposal unit." This section may reflect that currently, the requirements of WAC 173-303-610(7)-(11) are not applicable.
209. Section 12.4.2. Include a statement that the periods of retention for any records described in this section shall be automatically extended during the course of any unresolved enforcement action requiring those records or upon request by the director of the Washington State Department of Ecology.
210. Section 12.4.2.1. Please indicate that a copy of Part III (unit-specific conditions for final status operations of 224T TRUSAF) of the Permit for the Treatment, Storage and Disposal of Dangerous Waste for the Hanford facility will be kept at the unit, when the referenced "part" is issued.
211. Section 12.4.2.2. Include a bullet and a respective section to include manifests and shipping papers as part of the operating record.
212. Section 12.4.2.2.1. Please cite WAC 173-303-380(1)(a) in this section.
213. Section 12.4.2.2.2. Indicate that the location of the dangerous waste stored in the unit will also be maintained in the 224-T TRUSAF records. Also, please cite WAC 173-303-380(1)(b) in this section.
214. Section 12.4.2.2.3. Indicate that waste analysis data will also be maintained in the 224-T TRUSAF records. Also, please cite WAC 173-303-380(1)(c) in this section.

215. 12-8/32-34 (Section 12.4.2.2.3). WAC 173-303-300(1) requires waste confirmation by the facility owner or operator. Therefore, delete or re-write the statement. Pending resolution of the waste confirmation requirements of WAC 173-303-300, as identified in deficiencies/comments on Chapter 3.0 of this application, are resolved, this deficiency may remain "open," if necessary.
216. Section 12.4.2.2.5. Please indicate that inspection records addressing spills and remedial actions at the unit will be maintained in the 224-T TRUSAF records.
217. Section 12.4.2.2.6. Re-write the statements indicating that no groundwater monitoring is required at this time for the 224-T TRUSAF unit and therefore, no operating records are currently anticipated to be generated.
218. Section 12.4.2.2.8. This section needs to be updated to reflect the current information regarding LDR regulations and the proper citations need to be reflected.

Clarify regulation citations: 40 CFR 264.73(b)(10) and (16). The citations should include: 1) waste placed in land disposal units under certification under 40 CFR 268.8, and 2) the applicable notice and certification and demonstration if applicable, required by 40 CFR 268.7(a) or 40 CFR 268.7(b) and 268.8.

219. Section 12.4.2.2.8.3. This section needs to be clarified regarding specific citations to LDR regulations. The applicability of treatment standards is limited only to California list wastes under 40 CFR 268.32.

Clarify citations of 40 CFR 268.7(b), 268.32, and 268.7(a)(2).

Clarify the exclusion of the additional waste specific prohibitions under 40 CFR 268.33, 268.34, 268.35, and 268.36.

Clarify the exclusion of citations LDR Treatment Standards in 40 CFR 268.40 through 268.43, and 268.45 (for Hazardous Debris).

Clarify that variance from treatment standards are to be submitted under 40 CFR 268.44.

220. Section 12.4.2.3. Include a bullet to include the notice required by WAC 173-303-380(1)(h).
221. Section 12.4.2.3.1. Identify where the training records will be kept. Also, it is the reviewer's understanding that a system called "TRAC" will allow the identification of which employees have received which training to meet which requirements. If applicable, please identify if/how the department of Ecology will have access to the system/information. Also, please cite WAC 173-303-330(3) in this section.

222. Section 12.4.2.3.2. Please see the above comment for Sections 11.5, 11.7, and 11.8 and either re-state the two sentences indicating that this position is the Department of Energy's interpretation, or delete the two sentences and indicate that pending resolution of this issue, financial assurance and liability coverage are not required.
223. Section 12.4.2.3.3. Please see the above comment for 11-11/10-13 and modify the text accordingly.
224. Section 12.4.2.3.4. Please indicate that copies of those portions of the annual report (as described in Section 12.4.1.2) pertaining to the 224-T TRUSAF unit will be maintained at the 224-T TRUSAF unit.
225. Table 12-1. Footnote "a" denotes that items will be located at the 224-T TRUSAF unit for five years from the date of origination, then transferred to a Hanford Facility central retention area for the remainder of the retention period. Due to the various types of "items" identified, it is requested that this designation's appropriateness be individually considered for all items. For example, all of the permit application plans (if not modified) are to be retained at the unit for the life of the unit. Also, those operating records pertaining to wastes which may be in storage exceeding five years are to be retained at the unit as long as applicable. Also, the waste manifest reports and records pertaining to wastes which may be in storage exceeding five years are to be retained at the unit as long as applicable. Also, certain inspection reports and training documentation are to be retained at the unit as long as applicable.
226. Table 12-1 (Sheet 2). For the inspection records and plans, specify which records and plans are to be retained and for how long at the unit.
227. Table 12-1 (Sheets 2 and 3). The location of the LDR reports and records in the "Hanford Facility" operating record must be specified. Clarify and specify the location of the LDR records and reports.
228. Table 12-1 (Sheet 3). In Section 12.4.1.7.3, it will be identified that the survey plat is not applicable in the event that "clean closure" is achieved. To be consistent, please indicate this status on Table 12-1.
229. Table 12-1 (Sheet 3). It is indicated that the certification of closure will be retained at the unit for five years prior to being transferred to a central retention area. Confirm if this interpretation is correct. If so, confirm if this is what is intended.
230. Table 12-1 (Sheet 4). Specify which training documentation will be retained, for how long and at what location.
231. Appendix 2A. The TRUSAF Topographic Map (H-2-81571), the TRUSAF Adjacent Facilities drawing (H-2-81572) and the 224-T Building Record of Survey (H-13-000075) do not accurately show the fencing around part of the unit. Revise the drawings accordingly.

232. Appendix 4A. Additional drawings are referenced on Drawing H-2-36395 which are not included in Appendix 4A. Of those referenced, please provide Drawings H-2-36396 (foundation plan) and HWS-9082 (underground piping specifications).
233. Appendix 4A. Additional drawings are referenced on Drawing H-2-71704 which are not included in Appendix 4A. Please provide Drawings W-72500, H-2-4451, and FCN-0495.
234. Appendix 4A. An additional drawing is referenced on Drawing H-2-36225 which is not included in Appendix 4A. Please provide Drawing H-2-36226.
235. Appendix 4A. Sheet 2 of 2 of Drawing H-2-36227 was not located within the application. Please provide a copy.
236. Appendix 4A. An additional drawing is referenced on Drawing H-2-36215 which is not included in Appendix 4A. Please provide Drawing H-2-36228 (door schedule, details, and general notes).
237. Appendix 7A. Although process cells A through F are shown on Figure 1 of the Building Emergency Plan, it does not appear that they are included by the emergency procedures described. Until such time that it is shown that dangerous waste storage has not been occurring in process cells A through F, the process cells will be considered part of this unit. Therefore, the Building Emergency Plan must be revised to include these areas.
238. Appendix 7A (Section 1.0). Include a statement which reflects that the emergency coordinator (building emergency director) and alternates are on call 24- hours per day and have the authority to commit all necessary resources (both equipment and personnel) to respond to any unit emergency. Also, include a description of how the emergency coordinator is contacted.
239. Appendix 7A (Figure 1). Figure 1 of the building emergency plan is not in agreement with Figure 2-3. For example, the weigh scale is not located as shown in Figure 1. Also, storage modules 1 and 2 are neither currently differentiated at the unit nor are divided in Figure 2-3. Also, storage modules 6 and 7 of Figure 1 do not agree with the described function of storage module 4 of Figure 2-3. Confirm the accuracy of Figures 1 and 2-3 and modify the figure(s) as necessary.
240. Appendix 7A (Figures 2 and 3). Note number 3 indicates that a 44 inch wide fire lane will be maintained. Define what constitutes a fire lane and diagrammatically reflect the lane on Figures 2 and 3. It should be noted that the aisle space of section 6.3.2 indicates that a minimum 30 inch aisle space "will be maintained between rows of containers" and that the figures are not drawn to scale.
241. Appendix 7A (Figures 2 and 3). It is the reviewer's understanding that the continuous air monitors are no longer dedicated to stations. Please provide criteria for what constitutes access to the monitors.

242. Appendix 7A (Figure 2). It is the reviewer's understanding that within storage module A is a satellite accumulation area and an area for storing assay calibration materials. Modify the description, if applicable.
243. Appendix 7A (Figure 3). It is indicated that modules 3-3 and 3-4 are for temporary storage of transuranic mixed waste that failed x-ray "and will be returned to the generator." On page 4-6, lines 6 and 7, it is indicated that transuranic mixed waste containers put "on-hold" are "not returned to the offsite generator or onsite generating unit." Correct the discrepancy.
244. Appendix 7A (Figures 1,2, and 3). It is the reviewer's understanding that approximately 700 drums previously stored at this unit were moved to the Central Waste Complex (in order to seal the second floor) and are not anticipated to be returned to this unit for storage. Therefore, please evaluate the accuracy of designations on the figures which identify storage modules by specific generator's waste (i.e., Pacific Northwest Laboratory).
245. Appendix 7A (Figures 4 and 5.) During an October 8, 1993, unit visit, three signs were noted to be located to the southeast of the building. Two of the signs read "Staging Area 2" and one of the signs read "Staging Area 1." Explain the meaning of the signs. Also, although it is not clear if the signs represent the staging area for 224-T TRUSAF or if they represent an alternate or secondary staging area, their geographical location is either not included on Figures 4 and 5 or is not accurately reflected on Figures 4 and 5. Please resolve the confusion.
246. Appendix 7A (Figure 6). The telephone located near the northeastern door of the building (on the outside) is not identified. Also, the second floor diagram is drawn incorrectly. Also, a fire alarm pull box is not included on the second floor diagram along the northeastern wall. Due to the inaccuracies noted, please inventory the locations of all safety equipment included on this figure and modify the figure accordingly.
247. Appendix 7A (Section 2.1). Include an identification of criteria which stipulates when the contingency plan will be reviewed and immediately amended. For example, such criteria might include: the revision of applicable regulations or the unit/facility permit; the failure of the plan in an emergency; the modification of the facility in a way that changes the response necessary in an emergency; the changing of the list of emergency coordinators; the modification of emergency equipment, etc. Also, specify that the amendment(s) to the plan will be made in accordance with Section 1.5 of the permit application.
248. Appendix 7A (Section 2.2). Identify which sections of the building emergency plan personnel are required to annually review. Also, please include (in Appendix 7A), a copy of form number A-6000-784.
249. Appendix 7A (Section 3.0). It is stated that "[T]his Section provides a general idea of the types and amounts of hazardous materials stored and used in 224-T TRUSAF." The section does not provide any idea of this information. Either delete the statement or include the information.

250. Appendix 7A (Sections 3.0 and 3.0.1). Define "operating anomaly" differentiating when personnel are to contact the emergency coordinator. The statement that the solid waste operations managers/supervisors should contact the Occupational Health and Safety Manager before responding to an "operating anomaly" is confusing. The reviewer requests an identification of when which personnel are to call which numbers and which entities.
251. Appendix 7A (Sections 3.1 and 3.2). Define "loss of utilities," (i.e., loss of electricity, water, ventilation, steam, air). Section 3.2 appears to deal with loss of utilities (Sections 3.2.3, 3.2.4, 3.2.5, 3.2.6 and 3.2.7). Similarly, Sections 6.4.1.1, 6.4.1.2, 6.4.1.3, 6.4.1.4, 6.4.1.6, and 6.4.1.7 appear to provide procedural steps for securing conditions when an emergency has been declared. It is not clear when evacuation is to take precedence over procedural steps for securing conditions. Therefore, clarify when evacuation steps are to be taken versus steps for securing conditions.
252. Appendix 7A (Section 3.2). It is requested that a section be added to provide procedures to be followed in the event of a roof leak. It is the reviewer's understanding that the roof is in need of repair/replacement and until such time as it is repaired, leaks may be anticipated. Due to the documentation of standing water around caustic waste drums, such occurrences should be considered operational emergencies.
253. Appendix 7A (Section 3.2). The operational emergencies of Section 3.2 do not appear to include the possibility that the sealed radiologically contaminated process cells could become unsealed. Include procedures to address this particular event.
254. Appendix 7A (Section 3.2.3). Include the elevator, if applicable.
255. Appendix 7A (Section 3.2.7). What does the failure to modulate the dampers on the exhaust ventilation system induce? How is air compression monitored?
256. Appendix 7A (Section 3.3.3). Could high winds include potential interference with the building's ventilation system?
257. Appendix 7A (Section 3.4.7). It is the reviewer's understanding that asbestos removal has occurred at the unit. Please provide a status of asbestos removal efforts.
258. Appendix 7A (Section 3.5.1). How are stack emissions monitored and how would contaminated air blower discharge be detected? The "Transuranic Waste Storage and Assay Facility Hazard Identification and Evaluation," (SD-WM-SAR-025) states that "[C]ontamination in the sealed process cells are fixed and the High Efficiency Particulate Air (HEPA) filters in the duct leading from the process cells should remain intact." Vitro 1972 is referenced. A copy of the referenced documentation is requested. Also, Figure 15 of the hazard identification document appears to indicate that only process cell F is "exhausted." Please confirm if the reviewer's interpretation is correct.

259. Appendix 7A (Section 3.7). As identified in Section 3.6, it is possible that a "misrepresented shipment" of explosive material may be received. In addition, as stated above under the comment for Part A and Sections 3.2.10, 4.1.4.1, and 4.1.4.2, the characteristic waste D003 is identified on the Part A as well as various potentially reactive P and U waste codes. Therefore, include this possibility in this section.
260. Appendix 7A (Section 4.1). The description of the implementation in this section is not consistent with that which is described in Section 3.0. Also, statements such as "[F]acility personnel may handle minor incidents under the direction of the building emergency director and/or line management," are confusing in that the term "line management" is not defined and it is unclear under what conditions line management may direct personnel to handle "minor incidents." Again, the reviewer requests an identification of when which personnel are to call which numbers and which entities.
261. Appendix 7A (Section 4.2). Include a description of how the building emergency director is aware of the location, types and general amounts of all hazardous or dangerous materials or waste in the unit (i.e., identify which system is in place which allows this information to be retrieved). It should be noted that during a November 18 and 22, 1993 inspection, Ecology personnel were told that container records are filed in the unit office based on date received, not package identification number (PIN). To further explain, it is the reviewer's understanding that in order to locate a specific container file, one must first locate the drum within the facility, review the paperwork for date received, then backtrack to the container file. It is also the reviewer's understanding that the container locations, by PIN number, are not currently entered on the Solid Waste Information and Tracking System (SWITS).
262. Appendix 7A (Section 4.2). Sampling conducted by the Hazardous Materials Response Team is described. Please identify if there is a "generic" sampling plan which includes quality assurance/quality control procedures for this type of sampling event.
263. Appendix 7A (Section 5.1). Why is "acting" specified in relation to the building emergency director? Is "acting" the normal status of this position?
264. Appendix 7A (Section 5.2). Include a provision to periodically evaluate respirator and mask sizes to ensure that adequate (contaminant appropriate and correctly sized) protective equipment is available to personnel during an emergency.
265. Appendix 7A (Section 5.2.1). Identify if emergency lighting exists and the respective locations. Also, identify if a backup generator exists at the unit.
266. Appendix 7A (Section 5.2.2). As requested for Figure 6 of this appendix, please inventory the identified locations of the various types of emergency equipment. In addition, identify which door is considered to be the "main entrance" and which entrance is considered to be the "rear" one.

267. Appendix 7A (Sections 5.2.3 and 5.2.4). The protective and spill control equipment of the permit application is substantially different from the August 31, 1993, version of the building emergency plan. An identification of which version is to be permitted is requested. If the August 31, 1993, version of the building emergency plan is to be the implemented plan, it should be noted that during a November 18 and 22, 1993, inspection, failure to maintain emergency equipment required under WAC 173-303-350(3)(e) in accordance with the facility Contingency Plan was documented.
268. Appendix 7A (Section 5.2.4). It is specified that the spill control equipment identified is to be used for "nonradioactive hazardous materials during an emergency and/or recovery phase." Explain if additional equipment is to be utilized for radioactive hazardous materials during an emergency and/or recovery phase, or if a response to a radioactive hazardous material emergency by unit personnel would occur. It should be noted that the waste stored at this unit is exclusively radioactive waste.
269. Appendix 7A (Section 5.3.1). Explain the meaning of the statement that the shift manager will assess the situation and determine if the building emergency director must be notified. The building emergency plan should clarify that any time the numbers 811 or 373-3800 are called during an emergency, the building emergency director will be notified. Also, it is not clear in this section or Section 5.4 which personnel are responsible for activating the various systems/alarms/signals, etc. Again, the reviewer requests an identification of when which personnel are to call which numbers and which entities.
270. Appendix 7A (Section 5.3.2). The reviewer cannot identify who activates the Emergency Action Coordinating Team or who informs USDOE-RL of an emergency. The final bullet on page 28 indicates that the Occurrence Notification Center is to be told which agencies require notification. These procedures need to be clarified if personnel are responsible for notifying these or other entities.
271. Appendix 7A (Sections 6.0 through 6.9). Identify which situations/conditions constitute contingency plan implementation. The reporting requirements of Section 12.4.1.5 commit to notification of "all emergency situations requiring contingency plan implementation."
272. Appendix 7A (Sections 6.1.1 and 6.1.2). How is it known which staging area to proceed to?
273. Appendix 7A (Section 6.2.2). The Area Crash Alarm Telephone is indicated to be located in "271-T" in Section 6.2.2 and is indicated to be located in 272WA in Section 5.3.1. Is there a preference for which telephone is utilized?
274. Appendix 7A (Section 6.3.1). Four numbered response actions are listed in this section. Response action number four indicates that the Patrol Operations Center should be notified once the bomb threat call is over. Response actions number 2 and 3 (respectively) initiate evacuation procedures and notify the building emergency director. Therefore, clarify the order of the response actions.

275. Appendix 7A (Section 6.4.1). The reviewer is unfamiliar with valve conventions to open and close valves. Please review the descriptions relating to the valves associated with the various utilities and evaluate if better descriptions need to be included to open or shut valves (i.e., do directions for turning the valves need to be included?)
276. Appendix 7A (Section 6.4.1.2). Are the utility poles and cut-out switches labeled in any way?
277. Appendix 7A (Section 6.4.1.3). Are the fire system valves (interior) labeled in any way? Also, it is the reviewer's understanding that a new gate is being installed around a portion of the unit. Describe the entrance gate with more detail and identify if the exterior shutoff valve is labeled.
278. Appendix 7A (Section 6.4.1.6). It is the reviewer's understanding that the steam supply system was recently modified. Confirm if the main valve is still labeled "H-28359."
279. Appendix 7A (Section 6.4.3). Identify if there is a backup generator located at the unit for supplying electricity during an electricity failure. If applicable, include additional procedures for activating/deactivating the generator. Also, please identify who is responsible for restarting the electricity.
280. Appendix 7A (Section 6.4.5.2.1). Explain what equipment to be shutdown is being referred to. Specifically, is the main supply fan of Section 6.4.1.1 to be shut down?
281. Appendix 7A (Section 6.4.6). Identify the referenced functions which are required to better monitor the conditions of the facility.
282. Appendix 7A (Section 6.5.1). Describe how supply air inlets would be protected. Also, identify which processes should be evaluated for shutdown.
283. Appendix 7A (Section 6.5.2.1) Identify which processes should be evaluated for shutdown.
284. Appendix 7A (Section 6.6.1). The procedures to respond to a hazardous material spill are not clear. The statement to notify the building emergency director if the release cannot be controlled safely and promptly is not a definitive one. The reviewer could not identify a mechanism within Chapter 6.0 to document a spill which may not occur during an inspection. Therefore, clarify the mechanism of reporting/documenting a spill/release which is definitively determined to be safely and promptly controllable.
285. Appendix 7A (Section 6.6.2). Has a copy of the "Pre-Fire Plans" been provided to those entities who might be called upon to provide emergency services?

286. Appendix 7A (Sections 6.6.2 and 6.6.3). As indicated in the comment regarding Appendix 7A (Section 4.2), the reviewer is not aware of a mechanism currently being utilized that would allow the 224T TRUSAF Hazardous Waste Coordinator to identify which materials are involved.
287. Appendix 7A (Section 6.6.2). Include the telephone number for the Hanford Fire Department Hazardous Material Response Team.
288. Appendix 7A (Section 6.6.6). Include procedures for responding to a flammable liquids/material event. Although the unit does not intend to accept flammable liquids/materials, the acceptance of liquids has already been repeatedly confirmed. Without opening drums for waste analysis/confirmation purposes, there is no mechanism for confirming if the liquids are not flammable. Therefore, for purposes of this contingency plan, it will be assumed that flammable liquids may be accepted at the unit and procedures to respond to a resulting emergency incident are required.
289. Appendix 7A (Attachment A). The classification for the managers identified as building emergency directors is requested to allow an identification of personnel training requirements. Also, include a statement that a current list of names, addresses, and phone numbers (office and home) of the building emergency directors identified will be maintained at the unit and will be the same as that provided to the Occurrence Notification Center.
290. Appendix 7A (Attachment B, Section B.5.3). Cite WAC 173-303-350(5) and include an additional bullet specifying that the contingency plan will be amended whenever the list of emergency coordinators changes. Also, provide a description of the mechanism utilized for updating the Occurrence Notification Center of emergency coordinator changes.
291. Appendix 7B. It is the reviewer's understanding that the Draft Permit for the Treatment, Storage and Disposal of Dangerous Waste will include the Facility Contingency Plan (WHC-EP-0564) and that Permit Condition II.A. will address this plan. Therefore, for purposes of this permit application, the reviewer defers review of the Facility Contingency Plan. Pending issuance of the above referenced permit, the review of this document, by this reviewer, may remain an option, if necessary. Also, it is the reviewer's understanding that a revised Facility Contingency Plan exists. A copy of the current version is requested.

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Subject: REVISION TO THE DANGEROUS WASTE PART A PERMIT APPLICATION FOR THE
224-T TRANSURANIC WASTE STORAGE AND ASSAY FACILITY (WA78900089767)
(TSD: S-2-2)

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