NOTICE OF PUBLICATION FOR PENNSYLVANIA FULLETIN

Identification Number PADCCO 43068 APPLICANT (Block 1 OF ER-SWM-4) Harrisburg Steam Severating Tacility ADDRESS 1670 S. 19th St street-road & number/P. C. Box Harrisburg_ L'A 7/04 ZIP <u>state</u> NAME OF FACILITY OR SITE (block 5 OF ER-SWM-4) Alg. Steam Denerating Pacilit rolous waste disposal facility *see below Operation of a hara in township-borough-city Application received on (date recv'd in regional office) Permit issued on (date issued in regional office)

* MUNICIPAL WASTE PROCESSING OR DISPOSAL SITES	~~	<i>100000 SERIES</i>
* INDUSTRIAL WASTE PROCESSING OR DISPOSAL SITES	_	300000 SERIES
* INCINERATORS		400000 SERIES
* SEWAGE SLUDGE SITES	-	600000 SERIES

1

	SEPA NOTIFICATION OF HAZARDOUS WASTE ACTIVITY label, affix it in the space at left. If any of
	INSTALLA- TION'S EPA I.D. NO. I. STALLATION I. STALLATION I. STALLATION INSTALLATION INSTALLATION INSTALLATION INSTALLATION INSTALLATION INFORMATION INSTALLATION INSTALLATION INSTALLATION INSTALLATION INFORMATION INSTALLATION INSTALLATION INFORMATION INSTALLATION
	IL MAILING IL ADDRESS PLACE IABEL IN THIS SPACE State of his of a transfer of his pase of
	III OF INSTAL- LATION DATION TO THE WEITHUCTIONS FOR FILING NOT: CATION DEGREE Completing this form. INTO THE WEITHUCTIONS FOR FILING NOT: CATION DEGREE Conservation Section Soft of the Resource Conservation Readment for
ACH	COMMENTS
A DET	CPLSSEE ATTACHED COMMENTS
1 1 1 1	INSTALLATION'S EPA I.D. NUMBER APPROVED DATE RECEIVED (yr., mo., & day) F P A D 0 7 2 8 4 9 7 8 9 3 1 12 14 15 13 14 15 14 15 15
	I. NAME OF INSTALLATION
	HARRISBURG WASTEWATER TREATMENT PLANT
• <u>•</u>	II. INSTALLATION MAILING ADDRESS
	STREET OR P.O. BOX
4	
	$\frac{1}{15} \frac{1}{16} \frac$
. — .	
, — <u>,</u>	
:	c 5 F R A N K L I N S T 10 13 IIS 45 CITY OR TOWN ST. ZIP CODE
	$\frac{c}{5} F R A N K L I N S T$ $\frac{c}{13} 18$ $\frac{c}{6} S T E E L T O N$ $\frac{c}{15} 11 + \frac{c}{15} + $
	$\frac{c}{5} F R A N K L I N S T$ $\frac{c}{13} IIS$ $\frac{c}{6} S T E E L T O N$ $F A 1 7 0 9 2$
	$ \begin{array}{c c} \hline c \\ \hline 5 \\ \hline F \\ \hline R \\ \hline A \\ \hline N \\ \hline K \\ \hline L \\ \hline I \\ \hline $
	$\frac{c}{5} F R A N K L I N S T$ $\frac{c}{13} I I 6$ $\frac{c}{6} S T E E L T O N$ $\frac{c}{6} S T E E L T O N$ $\frac{c}{6} S T E E L T O N$ $\frac{c}{13} I I 6$ $\frac{c}{6} S T E E L T O N$ $\frac{c}{13} I I 6$ $\frac{c}{13} I I 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 $
	$\frac{c}{5}FRANKLINST CITY OR TOWN ST. ZIP CODE PA 1 7 0 9 2 ST. ZIP CODE PA 1 7 0 9 2 ST. ZIP CODE PA 1 7 0 9 2 ST. ZIP CODE PHONE NO. (area code & no.) CITY OR TOWN ST. ZIP CODE ST. ZIP $
	$\frac{c}{5} F R A N K L I N S T$ $\frac{5}{13} I = \frac{45}{16}$ $\frac{c}{6} S T E E L T O N$ $\frac{c}{6} S T E E L T O N$ $\frac{c}{13} I = \frac{45}{12}$ $\frac{c}{13} I = \frac{10}{12}$ $\frac{c}{13} I =$
	$\frac{c}{5} F R A N K L I N S T$ $\frac{c}{5} F R A N K L I N S T$ $\frac{c}{5} F R A N K L I N S T$ $\frac{c}{5} F R A N K L I N S T$ $\frac{c}{5} F R A N K L I N S T$ $\frac{c}{5} F R A N K L I N S T$ $\frac{c}{5} F R A N K L I N S T$ $\frac{c}{6} S T E E L T O N$ $\frac{c}{1} S T E E L T O N$ $\frac{c}{6} S T E E L T O N$ $\frac{c}{6} S T E E L T O N$ $\frac{c}{6} S T E E L T O N$ $\frac{c}{6} S T E E L T O N$ $\frac{c}{6} S T E E L T O N$ $\frac{c}{6} S T E E L T O N$ $\frac{c}{6} S T E E L T O N$ $\frac{c}{7} S T E E L T O N$ $\frac{c}{7} S T E E L T O N$ $\frac{c}{7} S T E E L T O N$ $\frac{c}{7} S T E E L T O N$ $\frac{c}{7} S T E E L T O N$ $\frac{c}{7} S T E E L T O N$ $\frac{c}{7} S T E E L T O N T O N T O O T O O T O O T O O T O O T O O T O$
	$ \begin{array}{c} \overset{\circ}{5} \mathbf{F} \mathbf{R} \mathbf{A} \mathbf{N} \mathbf{K} \mathbf{L} \mathbf{I} \mathbf{N} \mathbf{S} \mathbf{T} \\ \overset{\circ}{5} \mathbf{F} \mathbf{R} \mathbf{A} \mathbf{N} \mathbf{K} \mathbf{L} \mathbf{I} \mathbf{N} \mathbf{S} \mathbf{T} \\ \overset{\circ}{5} \mathbf{T} \mathbf{E} \mathbf{E} \mathbf{L} \mathbf{T} \mathbf{O} \mathbf{N} \\ \overset{\circ}{6} \mathbf{S} \mathbf{T} \mathbf{E} \mathbf{E} \mathbf{L} \mathbf{T} \mathbf{O} \mathbf{N} \\ \overset{\circ}{5} \mathbf{S} \mathbf{T} \mathbf{E} \mathbf{E} \mathbf{L} \mathbf{T} \mathbf{O} \mathbf{N} \\ \overset{\circ}{5} \mathbf{I} \mathbf{E} \mathbf{E} \mathbf{L} \mathbf{T} \mathbf{O} \mathbf{N} \\ \overset{\circ}{5} \mathbf{I} \mathbf{I} \mathbf{E} \mathbf{E} \mathbf{L} \mathbf{T} \mathbf{O} \mathbf{N} \\ \overset{\circ}{5} \mathbf{I} \mathbf{I} \mathbf{I} \mathbf{I} \mathbf{I} \mathbf{I} \mathbf{I} $
	$ \begin{array}{c} \hline S \\ \hline S \\ \hline T \\ \hline I \\ I \\$
DETACH	$\frac{c}{S} \overrightarrow{F} \overrightarrow{R} \overrightarrow{A} \overrightarrow{N} \overrightarrow{K} \overrightarrow{L} \overrightarrow{I} \overrightarrow{N} \overrightarrow{S} \overrightarrow{T}$ City or town $\frac{c}{S} \overrightarrow{I} \overrightarrow{I} \overrightarrow{I} \overrightarrow{I} \overrightarrow{I} \overrightarrow{I} \overrightarrow{I} I$
	S F R N K L I N S T Z CITY OR TOWN ST. ZIP CODE G S T E L T N P A 1 7 0 9 2 F A
	S F R A K L IN S T III III IIII IIII IIIIIIII IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII
	$\frac{c}{S} F R A N K L I N S T$ $\frac{c}{S} F R A N K L I N S T$ $\frac{c}{S} F R A N K L I N S T$ $\frac{c}{S} F R A N K L I N S T$ $\frac{c}{S} F R A N K L I N S T$ $\frac{c}{S} F R A N K L I N S T$ $\frac{c}{S} F R A N K L I N S T$ $\frac{c}{S} F R A N K L I N S T$ $\frac{c}{S} F R A N K L I N S T$ $\frac{c}{S} F R A N K L I N S T$ $\frac{c}{S} F R A N K L I N S T$ $\frac{c}{S} F R A N K L I N S T$ $\frac{c}{S} T E E L T O N$ $\frac{c}{S} T E E C T E E L E T O N$ $\frac{c}{S} T E E C T E E C T E E E C T E E E C T E E E C T E E E E$
	S F R A K L IN S T III III IIII IIII IIIIIIII IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII
	S F R N K L IN S T S F R N K L IN S T S T E L T N S T Z P ODE ST Z

N. PACILITY CONTACT A. HAME & TITLE (Task, first, & HITE) S. FHONE (area code & no.) S. FHONE (area code & no.)	Please print or, type in the unshaded areas only (fill=in areas are spaced for elite type, i.e., 12 characters/inch	14	1 North	Form Approved OMB No. 1	58-R0175
Provide and the second se	GENA GENI	ERAL INFORMA	ATION	The second s	1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-
Part (2) Holison Holi	GENERAL SEFA	oneolideted Permits Pro General Instructions" b	gram store storting.)	DIS T	Contraction (Statements) and A ()
HUR ACTURY WARD Young and a service of the	L'Epar D'HOMMEN	1111	11111	If a preprinted label has b	een provided, eff
YALLING ADDRES PLEASE PLACE LABEL IN THIS SPACE PLEASE PLACE SPACE	11/ A / Bunk Williams	11711	11111	stion carefully; if any of it shrough it and enter the	t la Incorrect, cro
AALLING ANDRESS PLEASE PLACE CARE TIN THIS SPACE Andress and a strain the construct is a construct in and answer book of the construct is a construct in and answer book of the construct is a construct in	11111 Total	11111	11/11	the preprinted deta is abea	in iting area to B
PACULATION Intern 4 III, V. et al. II. Research 2. A second and the second seco		ACE LABEL IN T	HIS SPACE	that should appear), plass proper fill-in area(s) beig	w. If the label
The Control of the second provided Refer to the second secon	<u>[[[]]]]</u>	1111	11111	items I, III, V, and VI (except VI-8 which
IL POLLUTANT CHARACTERISTICS IL POLLUTANT IL POLLUTANT CHARACTERISTICS IL POLLUTANT IL POLLUTANTT IL POLLUTANT IL POLUTANT IL POLLUTANT IL POLUTANT IL POLLUTANT	VA LOCATION	1111	11/11	items if no label has been the instructions for deta	provided. Refer
HTTPLETPUS: Complete A descript of the determine whether you made to automit any parmit application forms to the EPA If you same "you" to any parmits application forms to the EPA If you same "you" to any parmits any the determine of the application of the app	11111111111	11111	++++1	tions and for the legal as which this data is collected.	morizations und
paselong, yes want the fors and the supplemental form field in the parenthesis following the question. Math "X" in the box in the third column form a supplement from a statistical H yes and the supplementations. See also, Section D of the instructions for definitions of beld-fixed terms. Parents and the form permit requirements; as Section C of the instructions. See also, Section D of the instructions for definitions of beld-fixed terms. Parents and the form permit requirements; as Section C of the instructions. See also, Section D of the instructions for definitions of beld-fixed terms. Parents and the form permit requirements; as Section C of the instructions. See also, Section D of the instructions for definition of the distribution of the distr		chathar upp pand to su	then any name and letting	forms in the FPA If you and	wit "west" to soy
The social frame parameter equivalence of the sector of th	quasilons, you must submit this form and the supplement	tal form listed in the p	parenthesis following the que	stion. Mark "X" in the box in	the third column
A is the facility operating countercount the facility facility and production facility which currently require in standard facility facility require and and the facility facility require and the LSC (FORM 28) A or a Booyer which facility require in the facility facility industrial or in a standard facility facility industrial or industrial energy facility industrial en	le axcluded from permit requirements; sea Section C of the	Instructional See also,	Section D of the instruction	s for definitions of bold—faced	terma
which months (b) a submarge to writer of the UAS) X In the submarge state of the UAS (PORM 28) X In the submarge state of the UAS (PORM 28) X In the submarge state of the UAS (PORM 28) X In the submarge state of the UAS (PORM 28) X In the submarge state of the UAS (PORM 28) X In the submarge state of the UAS (PORM 28) X In the submarge state of the UAS (PORM 28) X In the submarge state of the UAS (PORM 28) X In the submarge state of the UAS (PORM 28) X In the submarge state of the UAS (PORM 28) X In the submarge state s					
C LINK of Schlig which corrently reads in discharges to weak of Sau U.S. other then these discharges to the A or B skowl IFORM 2C E. Does or will this facility industries of the U.S. of the Sau U.S. or discours of X and B skowl IFORM 2C E. Does or will this facility industries of the U.S. of the Sau U.S. or discours of X and the U.S. of the Sau U.S. or discours of X and the U.S. of the Sau U.S. or discours of X and the U.S. of the Sau U.S. or discours of X and the U.S. of the Sau U.S. or discours of X and the U.S. or will you inject at Different spin facility industries A or the underpland occurs and the Sau U.S. or discours of X and the U.S. or will you inject at Different spin facility industries A or the U.S. or will you inject at Different spin facility industries A or the U.S. or will you inject at Different spin facility industries A or the U.S. or will you inject at Different spin facility industries A or the U.S. or will you inject at Different spin facility industries A or the U.S. or will you inject at Different spin facility industries A or the U.S. or will you inject at Different spin facility industries A or the U.S. or these this facility industries A or the U.S. or these this facility industries A or the U.S. or these this facility industries A or the U.S. or these this facility industries A or the U.S. or these this facility industries A or the U.S. or these this facility industries A or the U.S. or the	which results in a discharge to waters of the U.S.?		include a concentrated a	inimal fielding operation or in facility which results in a	X
A of B shored LFORM 2C) E. Does or will this facility treat, store, or dispose of heardeness of the Value for the Value of the Value o	C. Is this a tacility which currently results in discharges		D. Is this a proposed facility	fother than those described	
According senders (FORM 3) A A	A or B show! IFQBM 2C)	. 84 . 12	maters of the U.S.7 (FOR	M 2D)	the second se
G. Do you or will you inject at this facility any produces in an annual set of the facility fulled for setural set of the facility fulled for setural set of the facility fulled for setural set of the facility fulled for storage of liquid	hexardous wester? (FORM 3)	x	taining, within one que	rter mile of the well bare,	
An address for mining of minerals, in situ combus- series for mining of minerals, in situ combus- series of mining of mining of mining of mining of mining series of mining of mining mining of mining mining of mining minin	water or other fluids which are brought to the surface	1000	H. Do you or will you injec	t at this facility fluids for spe-	11 34 31
Wetrocktons/ FORM 4) Image: Second state of the second state	duction; inject fluids used for enhanced recovery of	X	process, solution mining	of minerals, in situ combus-	×
The form of any and policitative mill 100 tone den var da and any activitative mill 1280 tone den var da and any activitative mill 1280 tone metalement send (FORM 5) III. NAME OF FACILITY III. NAME OF FACILITY A. HAME & TITLE (IAII. first, & HIR) III. ANAME OF FACILITY A. HAME & TITLE (IAII. first, & HIR) III. ANAME OF FACILITY A. HAME & TITLE (IAII. first, & HIR) III. ANAME OF FACILITY III. ANAME & TITLE (IAII. first, & HIR) III. ANAME OF FACILITY A. HAME & TITLE (IAII. first, & HIR) III. ANAME OF FACILITY A. HAME & TITLE (IAII. first, & HIR) III. III. III. III. III. III. III. III	hydrocarbons? (FORM 4) I. Iz this facility a proposed stationary source which is		J. Is this facility a propose	d stationary source which is	17 10 IA
MILANNE OF FACILITY HIL NAME OF FACILITY HIL NAME OF FACILITY HAR DE ISBURG STEAM GENERATING FACILLITY A. HAME & TITLE (Idel, first, & tille) A. HARE & TITLE (Id	structions and which will optantially amit 100 tons		instructions and which w	ant regulated under the Clean	X
HARRISBURG STEAM GENERATING FACILITY A HAME & TITLE (Last, first, & HIRE) A HARRING ADDRESS A BTREET ON NO. BOX A HARRING ADDRESS A BTREET ON NO. BOX A	attainment grap? (FORM 5):		Air Act and may affect of arus? (FORM 5)	or be located in an attainment	
A. HAME & TITLE (Task, first, & Hille) A. HAME & TITLE (Task, first, & HILL) A. HAME & TITLE (TASK, TASK, TAS	and the state of the	MGENER	ATING TA	CULTY	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
SKARPER JACK SUPERINTENDENT TIT 255 6495 A STREET ON P.O. BOX SIGTO SOUTH I 9TH STREET B HARRISTON C.STATE D. ZHP CODE SIN SCITY ON TOWN C.STATE D. ZHP CODE SIN STREET, NOUTS NO. ON OTHER SPECIFIC IDENTIFIEN SIN STREET, NOUTS NO. ON OTHER SPECIFIC IDENTIFIEN SIN SCOUNTY NAME DAUPHIN	CITY IS CAN IN SECTION & COMPANY AND	TI OLIVILA	A.1.1.46. 17		10
A. STREET OR N.O. BOX A. STREET OR N.O. BOX A. STREET OR N.O. BOX A. STREET OR N.O. BOX A. STREET OR N.O. BOX C. STATE D. ZIP CODE A. STREET, DUTE NO. OR OTHER SPECIFIC IDENTIFIER A. STREET, IDUTE NO. OR OTHER SPECIFIC IDENTIFIER S. COUNTY NAME D. COUNTY NAME D. COUNTY NAME	A. HAME & TITLE (lasi, fir		111111111	PHONE (area code & no.)	C. C. C.
A STREET ON P.O. BOX SIGURATION A. STREET ON P.O. BOX S. CITY ON TOWN C.STATE D. ZIP CODE C.STATE D. ZIP C.STATE	IN U	INTENDE	NT TI	7 255 6195	· · · · · · · · · · · · · · · · · · ·
ALLE ACIENTY OR TOWN C.STATE D. ZIP CODE ALLER D. ZIP CODE A. STREET, NOUTE NO. OR OTHER SPECIFIC IDENTIFIER 51670 SOUTH, 1975 STREET B. COUNTY NAME DAUPHIN		BOX MANAGEMENT	- Area		14 - 14 M
B. CITY OR TOWN C. STATE D. ZIP CODE A. BTREET, INDUTE NO. OR OTHER SPECIFIC IDENTIFIER DAUPHIN B. COUNTY NAME DAUPHIN H		TREET	*****	1	
N ET AL DE A			C.STATE D. ZIP COL		3
A. STREET, HOUTE NO. OR OTHER SPECIFIC IDENTIFIER 51670 SOUTH, 1977 STREET B. COUNTY NAME DAUPHIN	II R	· · · · · · · · ·	PA 1710	4	
DAUPHIN	A. STREET, BOUTE NO. OR OTHER S	PECIFIC IDENTIFIER		and the second second	
DAUPHIN	BIGTO SOUTH 19TH S	TREET	11111	1	- 1
H H			1200	100 - X 10	S Seller M.
	DAUPHIN	· · · · · · · · · · · · · · · · · · ·			a series
	e TTTTTTTTTTTTTTTTTTTT		7 15 1	- manopani	17572
BHARRISBURG	ND IT COMPANY			to the start	NUE ON REVER

GANNE FLEMING CORDDRY AND CARENTER. INC. ENGINEERS AND PLANNERS



P. O. BOX 1963

HARRISBURG. PA 17105

(717) 763-7211

CABLE ADDRESS GANFLEC . TELEX 84-2375

December 15, 1982

Mr. O. Frank DeGarcia, Director Department of Public Works City of Harrisburg City Government Center 10 North Market Square Harrisburg, Pennsylvania 17101

Dear Mr. DeGarcia:

Re: Harrisburg Steam Generating Plant Hazardous Wastes

Recently you requested that we determine the permit status of the Harrisburg incinerators to receive and process hazardous wastes. You also requested that we review all available information on non-municipal wastes received at the incinerator which may have been hazardous or toxic. We have determined the following:

1. Incinerators Hazardous Waste Compliance Status

The incinerators were never permitted to receive and process hazardous wastes.

In the absence of information from City files, we contacted the State Department of Environmental Resources and Region III of the Environmental Protection Agency (EPA). We were advised that the City in 1980 filed the Notification and Part A documents to qualify the incinerator as a hazardous waste facility. However, both documents were submitted after expiration of the respective filing dates. As a result, Region III EPA did nothing more than hold the documents in file. The Part A application was not processed; therefore, the incinerator never achieved interim status as a hazardous waste facility. Early in 1982, EPA returned the Part A application to the City after being verbally advised that the City did not wish to pursue designating the incinerator as a hazardous waste facility.

2. Toxic or Hazardous Waste Received at the Incinerator in 1981

We reviewed the Special Handling Log (Advance Notification), Certifications from Continental Vanguard, Inc., and various invoices rendered by the City to disposers. This information does indicate that certain toxic wastes may have been handled at the incinerator site. In a few instances, wastes were identified as containing hazardous constituents (such as cadmium); in other instances, wastes were identified as having originated from specific sources (such as paint sludge) generally considered to generate hazardous wastes. However, there is no indication of quantities received, handling procedures, incinerator operating conditions, or even if the wastes were actually incinerated.

The information we reviewed indicates that there is a strong probability that hazardous wastes were incinerated, but the data is insufficient to be certain. There is no indication that the incinerators were ever permitted to dispose of hazardous wastes.

As we have indicated in separate correspondence, we do not recommend nor was the facility designed to process hazardous wastes.

Very truly yours,

GANNETT FLEMING CORDDRY AND CARPENTER, INC.

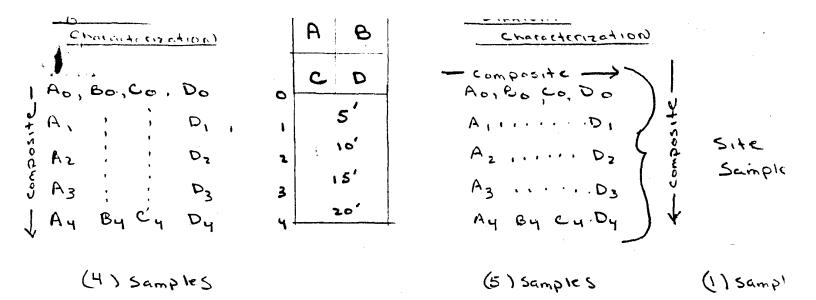
Geneld P. Voegle ERALD P. VOEGLER

GPV:rp

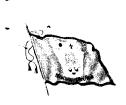
HAZARDOUS waste Determination For Residue Sites A and B-1 / Sampling Method

OBJECTIVE To obtain a valid estimate of the Statistical mean for all parameters subject to analysis. The proposed method attempts to take into account stratification or the creation of zones of increased contamination, the effect of downward migration of leached constituents.

Proposed Method A total OF 10 samples will be analyzed to characterize each residue site. Each site will be divided into 4 guadrants and 5 horizontal layers. Each guadrant will be characterized by compositing samples From each horizontal layer to a depth of 20 Feet. Each horizontal layer will be composited over 4 guadrants and further composited to yield a site Sample. In the event the site Sample yields borderline results, the guadrant results may be averaged to provide Support data.

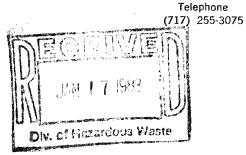


- 1. Divide each site into 4 equal guadrants
- 2. Designate point A,B,GD ineach guadrant. Elevation A = B~Ca This can be done in the field and points chosen jointly by DER/Hbg INC representatives
- 3a. Five samples will be procured, one each, at depths of 0, 5, 10, 15 and 20 Feet and composited to yield a sample For the characterization of the quadranit. Perform For each quadrant
 - b. Four samples at each horizontal designation le., Ao, CO, CO, DO, will be composited to yield a sample For each of the respective stratum. All stratum will be composited to yield a site sample.
- H. Antiyze for all metal E.P. Toxic constituents (a) vertical composites (b) horizontal composites (c) site sample 5. hog physical characteristics for each sampling point
 - The specific method of sample procurement (backhoc - Auger/split spoon) will be determined by negotiction and availability of apparetus.



City of Harrisburg Pennsylvania 17101

Department of Public Works January 13, 1983



Pennsylvania Department of Environmental Resources Fulton Building P.O. Box 2063 Harrisburg, Pennsylvania 17120

Gentlemen:

Re: Harrisburg Steam Generating Facility Form ER-SWM-53

The attached form is transmitted to you in order to clarify the status of the Harrisburg Steam Generating Facility. The City does not wish to have the facility classified for handling hazardous waste. It has been determined that the facility is incapable of handling the type of waste designated as hazardous, and will continue with incinerating only municipal and residual waste for which the facility has existing solid waste permits.

If you have any questions regarding this form, please contact Mr. Leroy T. Lippi, Jr., whose phone number is provided on the form.

truly your irect Department of Public Works

OFG:kme Attachments

			RECENT
, -	Econsylvania Department of Environm		
ER-SWM-53: Rev. 3/82	BUREAU OF SOLID WASTE MAN NOTIFICATION OF HAZARDOUS W		IN 17183 11
I INSTALLATION'S EPA I.D. NUM			
P A D 0 0 0 4 3 0 6 8	6		Powni Poznica Ware
II State of INSTALLATION			
Harrisburg Steam Ger			
	FREET OR P. O. BOX		
1670 South 19th Stre	eet	<u></u>	nn ar fan systemen i fe anne a pener y 'n 19 86 yn yn yn gegen fei 1985 ffenn yn yn gegen yn yn 1985 ffenn yn yn g
	CITY OR TOWN		ST. ZIP CODE
Harrisburg	an a	The state of the system to press.	PA 17104
IV LOCATION OF INSTALLATIO	N TREET OF ROUTE NUMBER		MUNICIPALITY
1670 South 19th Stre		<u></u>	larrisburg
	CITY OR TOWN ST.	ZIP CODE	COUNTY
Harrisburg	PA	<u>1</u> 7104	Dauphin
V INSTALLATION CONTACT			
	AME AND TITLE (lest, first, & job title)		PHONE NO. fares code & p
Lippi, Leroy T., Jr. VI OWNERSHIP	Acting Superintendent		
	A, NAME OF INSTALLATION'S	LEGAL OWNER	
City of Harrisburg			
B. TYPE OF OWNERSHIP			
(enter the appropriate letter into b F = FEDERAL M = NON-FE	우리 2016년 1월 2월 1일 - 1월 2월 1일 - 1월 2월 1일 - 1일		
VII SIC CODES (4-digit in order of p	A. FIRST		THIRD
4 9 5 3 (specify) Refuse Sy		(specify)	
	B. SECOND		D. FOURTH
(specify)		(specity)	and a second and the second
VIIL TYPE OF HAZARDOUS WAST	C. STORE C. TRANSPOR		G. REUSE, RECYCLE, RECLAIM
		ITEM IX)	
	D. DISPOSE F. PERMIT BY		H. OTHER (specify):
		E. OTHER (speci	۲۷). ۲۷)
X EXISTING ENVIRONMEN	TAL PROGRAM PERMITS		
A. NPDES (Discharges to Surface H	Vater) - D. PSD (Air Emissions from Proposed S	ources)	
B. UIC (Underground Injection of F	Fluids) E. SOLID WASTE (S	tate	
			olid Waste Permit
C: RCRA (Hezardous Weste			kily)
XI, TYPE OF NOTIFICATION			
Mark "X" in appropriate box t	o indicate whether this is your installation's first not	ification of hazardous	waste activity, or notification of a change o
general information, hazardous wast TIONS).	te handled, of hazardous waste activity. If you chech	B, C, D, E, or F, atu	ich a letter of explanation ISEE INSTRUC
A. FIRST NOTIFICATION B. CHANGE OF GENERAL I			
D. CHANGE OF GENERALI	INFORMATION L D. ADDITION OF A WAS	L	F. ADDITION OF AN ACTIVITY

CONTINUE ON REVERSE





• • • •

The second s	ARDOUS WASTES (Continued from front	<u> Nel a la car</u>		
HAZARDOUS WASTES	방법에 많은 것은 것은 것은 것은 것은 것은 것을 수 있는 것을 수 있다.		and the set of the set	\$75.261(h)(2) for a	ach listed hazardous wa
from non-specific sources		des. Use additional sheet	; if necessary.		
$-\frac{1}{1}$			4	5	
7	8	9	10	11	12
HAZARDOUS WASTES Fi Industrial sources your inst		additional sheets if necess	그는 맛있는 것 같은 것 같아요? 이 말 없는 것 같은 것이 가지 않는	1 (n) (3) eech visted nezi	ardous waste from spec
13	14	<u> </u>	16	<u> </u>	18
· 					
				· [
	20				24
25	26	27	28	29	30
COMMERCIAL CHEMICA				#7E 261(b)(A) for	
Your installation handles w			승규는 물건물만 해준 것을 물건했다. 또	m 175.201(11/14) for t	
31	32	33	<u> </u>	35	36
37	38	39	40		
43	44	45	46	47	48
CHARACTERISTICS OF N					
hazardous wastes your inst					1
1. IGNITABL		2. CORROSIVE	🗍 3. REAI	orn/E	
	د ا	_ 2. CORROSIVE		6118E	
UCRITICATION STATISTICS					
		a pamonally arominad	and am familiar wit	h the information :	submitted in this al
certify under penalty of tached documents and	of law that I hav that based on m	y inquiry of those ind	ividuals immediately	responsible for ol	btaining the inform
certify under penalty of tached documents and	of law that I hav that based on m tted information ion, including the	y inquiry of those ind is true, accurate, and e possibilility of fine	ividuals immediately complete. I am av and imprisonment.	responsible for ol vare that there are	significant penaltie
certify under penalty of tached documents, and believe that the submit bmitting false informat	of law that I hav that based on m tted information tion, including the	is true, accurate, and e possibilility of fine .	complete. I am av and imprisonment.	vare that there are	significant penaltie
certify under penalty of tached documents, and believe that the submit bmitting false informat	of law that I hav that based on m tted information tion, including th	is true, accurate, and e possibilility of fine NAME and	complete. I am av and imprisonment. OFFICIAL TITLE (Typ	ware that there are e or Print)	DATE SIGNED
certify under penalty of tached documents, and believe that the submit bmitting false informat	of law that I hav that based on m tted information tion, including th	NAME and 0. FRA	complete. I am av and imprisonment.	ware that there are e or Print) cting Director	DATE SIGNED
certify under penalty of tached documents and believe that the submit ubmitting false informat SIGNATURE	of law that I hav that based on m tted information tion, including th	NAME and 0. FRA	Complete. I am aw and imprisonment. OFFICIAL TITLE (Typ NK DeGARCIA, Ad	ware that there are e or Print) cting Director	DATE SIGNED
certify under penalty of thached documents, and believe that the submin ibmitting false informat SIGNATURE MAN DR OFFICIAL USE ONLY	of law that I hav that based on m tted information tion, including the	NAME and 0. FRA	Complete. I am aw and imprisonment. OFFICIAL TITLE (Typ NK DeGARCIA, Ad	ware that there are e or Print) cting Director	DATE SIGNED
certify under penalty of tached documents and believe that the submit ibmitting false informat SIGNATURE	of law that I hav that based on m tted information tion, including th	NAME and 0. FRA	Complete. I am aw and imprisonment. OFFICIAL TITLE (Typ NK DeGARCIA, Ad	ware that there are e or Print) cting Director	DATE SIGNED
certify under penalty of tached documents, and believe that the submit ibmitting false informat SIGNATURE	of law that I hav that based on m tted information tion, including th	NAME and 0. FRA	Complete. I am aw and imprisonment. OFFICIAL TITLE (Typ NK DeGARCIA, Ad	ware that there are e or Print) cting Director	DATE SIGNED
certify under penalty of tached documents, and believe that the submit bmitting false informat signature	of law that I hav that based on m tted information tion, including th	NAME and 0. FRA	Complete. I am aw and imprisonment. OFFICIAL TITLE (Typ NK DeGARCIA, Ad	ware that there are e or Print) cting Director	DATE SIGNED
certify under penalty of tached documents, and believe that the submit ibmitting false informat SIGNATURE	of law that I hav that based on m tted information tion, including th	NAME and 0. FRA	Complete. I am aw and imprisonment. OFFICIAL TITLE (Typ NK DeGARCIA, Ad	ware that there are e or Print) cting Director	DATE SIGNED
certify under penalty of tached documents and believe that the submit ibmitting false informat SIGNATURE	of law that I hav that based on m tted information tion, including th	NAME and 0. FRA	Complete. I am aw and imprisonment. OFFICIAL TITLE (Typ NK DeGARCIA, Ad	ware that there are e or Print) cting Director	DATE SIGNED

)

COMMONWEALTH OF PENNSYLV

Operations Review of SUBJECT: Application # For A COL PLOT A Acc

EPA PART A Applications

MIKE NAMOSKI

FROM

TO:

OA-501

12-67

Robert G. Benvin KGS Regional Facilities Supervisor Harrisburg Regional Office

Please review the operational plan for the above referenced application and submit your comments within fifteen (15) days.

Comments may be written in the space below. Attach additional sheet(s) if necessary.

REVIEWED BY: Michaelf, Romesh; DATE: 12-1-81

COMMENTS: fage 2 of General Information Item X Existing Environmental Permits. In the listed. Solid Waste permit numbers - 100758 for incinerator, 100759 for residue disposal site A and 100992 for residue disposal site B-1. Possibly other permits for Water Quality and the Quality. Page 4 sections IX Owner Certification and X Operator Certification, not signed or dated Site drawing does not show residue disposal site B-1 currently in use. Also does not show future residue disposal sites B-2 and B-3 as shown on planswubmitted to DER. No scale on any of the maps or drawings. Leachate collection system to servage treatment plant should be included on drawings. No photographs of site. More detall of disposal processes should be included. showing how wastes are brought into incinerator, burned and disposed of in residue pits. No monitoring wells show. Some of these comments are not acked for in instructions, but I believe they are necessary. Latitute and Longitude markings not shown on map. Source of map not indicated. Dimensions of buildings, residue disposal sites not indicated. Area and size of drum storage area not indicated on drawings.

. -

PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL RESOURCES BUREAU OF SOLID WASTE MANAGEMENT HAZARDOUS WASTE REPORT

And print or type with ELITE type (12 characters/inch)	
1. TYPE OF HAZARDOUS WASTE REPORT	
PART A GENERATOR QUARTERLY REPORT	
THIS REPORT IS FOR THE 1 9	
PLEASE PLACE LABEL IN THIS SPACE	
THIS REPORT IS FOR THE DOLLAR 119	
THIS REPORT IS FOR THE 09-30-19	<u>ап</u>
IL INSTALLATION'S ID. NUMBER	
PAD000430686	
III. NAME OF INSTALLATION	
HARRISBURG STEAM GENERATING FACILITY	
IV. INSTALLATION MAILING ADDRESS STREET OR P. C. BOX	
LINDAUSAUSAU IIIIIIIIIIIIAA	
STREET OR ROUTE NUMBER	
1670 S. 1941 STREET . THE HARRISBURG	
TWIND DI TUTT VIL DI PARATI I I I I I I I I I I I PARATOURO	
CITY ON TOWN	
HARRISBURG IIIIIIIIII PAITIOH DAUPHIN	·
VI. INSTALLATION CONTACT	
KIM 5 ROB/SOW 1111111171725531118	
VII. TRANSPORTATION SERVICES USED (for Part A reports only) List the identification numbers for those transporters whose services were used during the reporting quarter represented by this report.	
VIII. ANNUAL COST ESTIMATES FOR FACILITIES (for Part 8 reports only)	
B, COST ESTIMATE FOR POST CLOSURE MONITORING AND	
EACILITY TLOSURE NOT ANTICIPATED FACILITY CLOSURE NOT DENTICIPATE	<u>sd</u> i
INCINERATION PROCESS INCINERASTION , PROCESS	
IX. CERTIFICATION	
I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining	
the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are	
significant penalties for submitting false information including the possibility of fine and imprisonment.	
Kim S. Robison <u>Kim S. Robison</u> October 30, 198	

FOR OFFICIAL 1. DATE RECEIVED		-			1 9			xvi	. F/	ACI	LIT	Y'S	1.D. NO	
USE ONLY (Items 1 & 2) > 2. RECEIVED BY									A			0		0686
XVIII. GENERATOR'S I.D. NO. PADO97157796 XVIII. GENERATOR NAME (apecify)	XIX. GENE 980 [York;	DU	<u>ا</u> ك	ts	M	://	K	sa				-	nte & zip	code.)
AGWAY INC.	MUN. XO	~~~~~	_					Í	ann		/ <u>/</u> ITY	~	VORI	K
A. DESCRIPTION OF WASTE AND MANIFEST DOCUMENT NUMBER (MDN)		Haz Was Nur	te		C. Hand Metho and Date	ing od			Am Wast		t		E. Unit of Mea- surp	F. PA, Hazerdous Waste Transporter (HW License No.
WASTE ORGANIC PHOSPHATE COMPOUND DRY MON-PA A 2106112		Ĥΰ	9	H	70 Date		0	- /	9		20	2	<u>.</u> H	
WASTE, ZING PHOSPHIDE		P.		22	TO		0		/		0		F	
MDN- PA A 2106123					Date	0	9	- 6	22	2 -	E	1		
WASTE, ORGANIC PHOSPHATE, C DRY MDN- PA A 2106134	Icm POUND	ΡC	9	4	70 Data	9 D	9		23	-	6	/	Τ.	
WASTE, ORGANIC PHOSPHATE, COMPOUND DRY		РC	99	4	70	9	0				0	9	H	
MDN					Date	0	7			†- 	8	1	Π	
MDN	,				Date		-	-,	-	-			-1-1-	
MDN					Date			_		-				
MDN-					Date					-				
MON					Date			+ - -		-				╡ <u>╴╵╸┥╶┥╶</u> ┪╶╽ ┃ ┨╴┬╴┰╴┯╴┯╼┯
MDN-					Date			-		-				
MDN XXI, COMMENTS (enter information by line number-see in	eteuctions 1		+-	Н	Date			_						

USE ONLY (Items 1 & 2) 2. RECEIVED BY			PADOC	043	0686
PAODO 765354	GENERATOR AD COMMERCE NIDDLETOW	E DRIV. N. PA.	<u>t or PO box, city</u> E 1 <i>705</i> 7	<u>state & zip c</u>	ode.)
	N. MIDDLE	TOWN	COUNTY	DAUPH	lin
A. DESCRIPTION OF WASTE AND MANIFEST DOCUMENT NUMBER (MDN)	B. Hazardous Waste Number	C. Handling Method and Date	D. Amount of Waste	E. Unit of Mea- surp	F. PA. Hazardor Weste Transporter (HW License No.
HAZARDOUS WASTE LIQUID N.O.	s.	109	8.38	3 T	
MDN- PA A 1132036	╌╾╂╂┾┼	Date 08	-11-01		
	──┣╫╫	-			
MDN-	─── ┟ ┼┼┼	Date			
	╼╼╌ ╞╺╞╺╞╺ ┾ ╋╼┾╼╋╼	╊┯┾┾			
MDN-	╾╼╆┽┽┽	Date			┟╾┸╌┸╌
	╺━━╋╋	╊┯╇┿	┥╷╷╷╷		
	╶──┝─┼─┼╴		╉╶╉╌╋╌╋╌╋╴╋	╉┸┶┥	┟┸╁┵┶
MDN-		Date		+	
		┨┷┼╄╸	┝┥┥┥	+	
MDN-		- Date			· · · · · · · · · ·
MDN-		Date			
MDN-		Date			
MDN-	╶──┟┼┼┼	Dăte			╩ ┈┙╺┟╸┙╺┟
		┨╷╎╽			
MDN-		- Date			┟╌┵╌╶┟╌┟╼╂╌
	╾╾┥╶┼╌┼╴	╊┯╇╈	┟┼┼┼┼┼		
	╶╴╴┢┥┽┿	Date	<mark>┡╺┝╺┼╺┼</mark> ╶┼╶┼ ╽╶╴╎		
MDN- XXI. COMMENTS (enter information by line number-see instruct					

.

	FACILITY OU	ARTERLY	RE	NOF			B								
Ň	FOR OFFICIAL USE ONLY (Items 1 & 2)			L	-1	19		XVI. F	ACILI'		10	11		01	
×	VII. GENERATOR'S I.D. NO.	XIX. GENE	BAT	OR	ADI	DRESS (S	l treet	or PO 1	xax, cl	ty n	ate &			86	
	PAD002327799	PENN GLEN	EL	. /	Ro	AD									
		GLEN	Kk.	d	le), Per	n.	sylve	inia	<u>ر</u>	19	90	37		
i.	SUNROC CORP.	MUN.						C	DUNT	Ý					
LINE NO.	A. DESCRIPTION OF WASTE AND MANIFEST DOCUMENT NUMBER (MDN)		We	B. zard ste mbe		C. Hendling Method and Date		D. Arr of Was	ount		E. U of N surp	laa-	West Trans	, Haza porter m No.	٠,
	WASTE PAINT		E	21	7					54	:t	1			
	MDN- PA A 1295420		†	1	F	Date (8(-21	- 8	<u> うし</u>		<u> </u>		i i	<u>т</u> т
2		14	H	+-							Ц				
	MDN-		++	+		Date		-1	-						
3				+								1			
	MDN-		\square		1	Dete					Ļ	<u> </u>		т. т.	<u>,</u>
			E												
Å	MDN				-	Date		÷]-]						
5			H	+	+										
	MDN-			+	-	Date			-	T		- b			
	an a				L				\dagger		Т	ſ,			ΤŤ
5				+		Date				+				<u> </u>	11
	MDN-				╞					+		Ť	h	<u>TT</u>	11
È.			F	1	-					+		<u> </u>		\square	
	MDN-				+	Date		-	-						
) }															
·	MDN	·	+	-		Date		-	-				Î.		V-North
			F	-	$\left[- \right]$		Π							I	
	MDN-			+		Date		-	-					4 4	.
					+					+			1993A	TΤ	Π
0			\vdash			Dete	Н			+	ins. Data	1. X		LL.	
	MDN- XXI. COMMENTS (enter information by line number-see inst		Π		Γ	Date			T.	17					

Ē	ease print or type with ELITE type (12 characters/inch) FACILITY OL FOR OFFICIAL I. DATE RECEIVED	JARTERL	REPOR	- 1 9	XVI. FACILITY	i I.D. NO	
	USE ONLY (Items 1 & 2) > 2. RECEIVED BY				PADOO	043	0686
×	VII. GENERATOR'S I.D. NO. PADOTOGO4178 VIII. GENERATOR NAME (specify)	XIX, GEN 1001 Valley	erator a S. Ti I Forg	tooper N tooper N te, Penns	out or PO box, city s cad sylvania county	1948	code.)
	Olkswagen OF AMERICA	MUN.	alley	Forge	COUNTY	CHES	TER
LINE NO.	A. DESCRIPTION OF WASTE AND MANIFEST DOCUMENT NUMBER (MDN)		B. Hazardo Waste Number	C. Handling Method and Date	D. Amount of Waste	E. Unit of Mea- surp	F, PA, Hazerdous Waste Transporter (HWT) License No.
1	HAZARDOUS WASTE N.O.S. TOXIC LEAD		000	8709	10.89	1.17	
┝	TOXIC LeaD MDN PAA 3691984			Bate O	1-21-81	HTT.	
2	MDN-		┟┼┼╴	Date		$\frac{1}{1}$	
3			╋╍┾╍┾╍	┝╌╋┯╍┼╍╁╸	╈╋	1 .	
Ū.	MDN-			Date			
4,							
` -	MDN-		╉┽┼┾╸	Oate		$\left \right $	
5						<u> </u>	
	MDN-		╋╋		╈╋	111	
6	MDN-		┢┼┼╴	Date			
7							
	MDN-			Date		<u> </u>	
8							ļ
\vdash	MDN-			Date		$\frac{1}{1}$	
9	MDN	<u> </u>	┢╌┼╌┾	Date		$\frac{1}{1}$	╽╵╵╵╵┙┙
10			╋┿┿				
	MDN-		\mathbf{H}	Date			
1-	XXI, COMMENTS (enter information by line number-see in	structions.)					

.

~=

HAZARDOUS WASTE INSPECTION REPORT TSD Facilities - Part A FILE

1

16.

•
Date of inspection 9-11-81 Time start 10:00AM Time finish 1:00PM
Name of inspector DONALD L. KILLIAN MICHAEL A. NAMOSKI
Company, installation name HARRISBURG STEAM GENERATING FACILITY
Location 1670 SOUTH 19TH STREET HARRISBURG, PA. 17104
County DAUPHIN Municipality CTTY OF HARRISBURG
Identification number PAD 000430686
Name of responsible official JACK KARPER
Title SUPERINTENDENT
Mailing address AS ABOVE
Area code and phone no. 717-255-6495
Name of person interviewed AS ABOVE
Title
Mailing address (if different from above)
Area code and phone no
· · · · · · · · · · · · · · · · · · ·
1. Site characterization:
a. 🌈 Treatment - 🥂 surface impoundments, 🌈 chemical, 🌈 physical, 🌈 biological
b. 🗁 Storage - 🗁 containers, 🗁 tanks, 🗁 surface impoundments, 🗁 waste piles
c. 🔆 Disposal - 🗁 land treatment, 🗁 landfill, 🔆 incineration, 🗁 thermal treat ment
d. Tuse, Treuse, Trecycle, Treclaim (STEAM GENERATION)
2. Does the facility generate hazardous wastes? 🎦 Yes 🌅 No 🥱 SEE COMMENTS
3. Types of hazardous waste produced by Hazardous Waste Number;

4. Are hazardous wastes transported off-site by the facility? \square Yes \bigwedge No

HAZARDOUS WASTE INSERCTION REPORT TSD FACILITIES - PA B General p 1

•

PAD000430686 9-11-81

			1-NON-COMPLIANCE, Z-COMPLIANCE, 3-NOT APPLICABLE, 4-NOT DETERMINED	
S	TAT	IANCE US 34	REQUIREMENT	CHAPTER CITATION 75.265
X	C		Part A permit application submitted SEE COMMENTS	(a) (2), (z) (
	X		Identification number .	(b)
X			Wastes accepted at facility transported by haulers licensed to transport hazardous waste by the Department	(b) (1)
X		8	Waste streams not covered by permit approved by the Department before accept	ance (c <u>)</u> (1
	X	,	Chemical and physical analyses repeated as required	(c)(1)
	X		All waste shipments inspected and sampled	(c)(<u>2</u>)
X			Waste analysis plan on-site	(c)(3)
,	X		24 hr. surveillance at active portion	(d)(2)(i)
ļ	X		Artificial barrier at active portion	(d)(2)(ii
	ŀ	X	(SEE COMMENT Proper signs posted and legible at a distance of at least 25 ft.	(d) (3)
ŀ	X		Inspection schedule on-site	(e)(2)
ľ	X		Maintenance schedule on-site for equipment or structures which reveal deterioration or malfunction	(e) (4)
	1	X	Immediate remedial action taken where a hazard is imminent or has already occurred	(e)(4)
ľ	X		On the job or classroom personnel training program	(f)
	X		Records retained for each employee at facility of training, job title, and job description	(f)(6),(7
		X	Ignitable or reactive wastes separated from source of ignition or reaction	(g)(l)
		X	No smoking signs displayed where there are hazards from ignitable or reactiv wastes	(g)(1)
		X	Treatment, storage, disposal of ignitable or reactive wastes or mixing of incompatible wastes or materials conducted according to requirements	(g)(2)
	X		Facility equipped with internal alarm system capable of providing immediate emergency instruction to personnel	(h)(2)(i)
	N		Facility equipped with a device for summoning outside emergency assistance	(h)(2)(ii
	X		Facility equipped with fire control, spill control, and decontamination equipment	(h) (2.) (ii
	X		Facility equipped with water at adequate volume and pressure to supply fire control equipment	(h)(2)(iv
	X		Facility communications or alarm systems, fire control, spill control, and decontamination equipment tested and maintained.	(h) (3)
	X		Adequate aisle space maintained to allow unobstructed movement of personnel and equipment during emergencies	(h) (6)
X			Contingency plan on-site and implemented	(i)(l)
X			Contingency plan describes action taken by personnel in the event of an emergency	(i)(3)
メ			Contingency plan describes arrangements agreed to for outside emergency	(i)(5)

Ċ4

. .

PAD000430686 9-11-81

	CHAPTER
REQUIREMENT	CITATION 75.265
ntingency plan contains an up-to-date list of names, addresses and phone	
mbers of all persons qualified to act as emergency coordinator.	(i)(6)
ntingency plan contains list of emergency equipment including location, ysical description and capabilities of each item	(i)(7)
ntingency plan contains an evacuation plan if there is a possibility at evacuation could be necessary	(i)(8)
e employee designated as the primary emergency coordinator either on the emises or on call.	(i)(ll)
cility accepting only PA manifests	(j)
nifests properly completed and routed within time limits (24 hrs.)	(j)(2 <u>)</u> (3
nifest discrepancies resolved or reported within time limits	(j)(10)
itten operating record maintained on the premises	(k) [,]
tten operating record contains description and quantity of wastes and the control of treatment, storage or disposal	(k)(2)(i
tten operating record contains location and quantity of each hazardous ste	(k)(2)(i
tten operating record contains results of waste analyses and treatability	(k)(2)(i
tten operating record contains reports and details of all incidents	(k) (2) (
tten operating record contains records and results of all inspections	(k) (2) (v
tten operating record contains required monitoring, testing, and alytical data	(k) (2) (v
tten operating record contains closure and post-closure cost estimates	(k) (2) (v
records retained on premises and available for inspection	(1)
arterly reports submitted to the Department	(m)
ssions, discharges, fires, explosions, and groundwater contamination	(m) (2)
oundwater monitoring wells located at approved sites	(n) (2)
quate protection of groundwater monitoring wells	(n) (7)
oundwater sampling and analysis plan on the premises	(n) (8)
oundwater quality assessment and abatement outline on the premises	(n) (14)
osure plan on the premises and up-to-date	(0) (2) - (
t-closure plan on the premises and up-to-date	(0) (10)-
ual closure cost estimate on the premises and up-to-date	(p)(2)-(
ual post-closure cost estimate on the premises and up-to-date	(p)(5)-(

•

TREATMEN STORAGE, DISPOSAL FACILITIES - CINERATORS

75.26⁵

PAD000 430 686 9-11-81

	·		_	1-NON-COMPLIANCE, 2-COMPLIANCE, 3-NOT APPLICABLE, 4-NOT DETERMINED	
60	MPL STAT	<u>rus</u>	1Œ 4	Requirement	CHAPTER CITATION
-	Ź	<u>ງ</u>		Incinerator brought to steady state (normal) operating conditions including steady state operating temperature and air flow before hazardous waste is add	(w)(2) ed.
	X			Waste analyses performed on wastes not previously burned in the incinerator	(w)(3)
	X			Instruments relating to combustion and emission control monitored at 15 min. intervals and appropriate corrections are made immediately	(w)(4)(i)
	X			Stack plume emissions observed hourly and appropriate corrections are (made immediately.	w)(4)(ii)
	Х			Incinerator and associated equipment inspected daily.	w)(4)(iii
	X			Emergency shutdown controls and system alarms checked daily.	w)(4)(iii
		X	·	Closure requirements are complied with.	(w)(5)
					-
Γ					
				•	
				·	
	_		_		And the owner of the owner of the owner of the owner of the owner owner owner.

Part C - Comments Identification number AD000430686 Date of inspection 9-1-8Company, Installation name HARRISBURG STEAM GENERATING FACILITY Municipality CTTY OF HARRISBURG DAUPHIN County 75265(Z) THIS FACILITY PRESENTLY DOES NOT HAVE INTERIM STATUS TO TREAT, STORE OR DISPOSE OF HAZARDOUS WAS DE. THE HAZARDOUS WASTE ACTIVITY NOTIFICATION TO THE EVA WAS SUBMITTED AFTER THE DEADLINE. SINCE THIS WAS RECEIVED LATE BY THE THE STATUS OF THE HARRISBURG STEAN GENERATING CILITY IS PENDING. A DECUSION WILL BE MADE BY THE EPA CONCERNING THIS FACILITY AND OBTAINING INTERIM STATUS. THIS DECISION WILL BE FORTH COMING. F THIS FACILITY DOES OBTAIN INTERIM STATUS, FOLLOWING VIOLATIONS MUST BE ADDRESSED. 265(b)(1) THIS FACILITY HAS ALLEPTED SHIPMENTS OF HAZALOUS FROM AN UNMITHORIZED TRANSPORTER I.E. UILLSBURG SEPTIC SERVICES. HARAPONS WASTE MAY BE ACCEPTED ONLY FROM TRANSPORTERS WHO HAVE COMPANY APPLIED FOR A HAZARDAUS WASTE TRANSPORTER LICENSE. IN THE FUTURE, IF ANY AUGSTION EXIST CONCERNING THE STATUS OF A TRANSPORTER, THE EPARTMENT STOULD BE CONTACTED IMMEDIATELY 75·265(c)(3) A DESCENTION WASTE ANALYSIS PLAN MUSTRE DEVELOPED ACCORDING TO THE GUIDELINES UNDER 26-(c)(3). THIS PLAN SHALL BE SUBMITTED TO THE DEPARTMENT AT A TIME PRESCRIBED This inspection report is official notification that a representative of the Department of Environmental Resources, Bureau of Solid Waste Management, inspected the above installation. The findings of this inspection are shown in this report. Any violations which were uncovered during the inspection are indicated. Violations may also be discovered upon examination of the results of laboratory analyses and review of Department records. Notification will be forthcoming, confirming any violations indicated herein and listing any additional violations. Date 9-16-Person Interviewed (signature) Inspector (signature) Date 9-16-81 Michael A. namaski

Part C - Comments Date of inspection 9-11-81 Identification number AD000430686 Company, Installation name HARRISBURG STEAM GENERATING FACILITY Municipality CITY OF HARRISBURG DAUPHIN County BY THE DEPARTMENT. HAUS BEEN HAZARDOUS THERE AS SEVERALIMASTE STREAMS ACCEPTED FACILITY WHICH AND HAUS NOT BEEN APPROVED BY THE DEPARTMENT BEFORE ACCEPTANCE. HLL WASTE STREAMS WHICH ARE NOT CONFRED BY THE FACILITY'S PERMIT (HAZARDOUS AND NOW-HAZARDOUS WASTE STREAMS) MUST BE APPROVED BY THE DEPART-MODULE / SUBMISSION BEFORE SUCH WASTE MAY UNDER ACLEPTED AT THE FACILITY. 75.265(i)(1)H CONTINGENCY PLAN MUST BE DEVELOPED AND IMPLEMENTED, REGARDING THE HANDLING OF HAZARDOUS WHITE AT FACILITY. THIS CONTINGENCY PLAN SHOULD BE PEUELOPED ACCOMPANYING GUIDELINES. USING THE VUARTERLY REPORTS HAVE NOT BEEN SUBMITTED TO DEPARTMENT AS REQUIRED. THESE MUST BE SUBMITTED TO DEPARTMENT FOR THE TWO QUARTERS FROM NOUSMBER 29, 1980 TO JUNE 30, 1981 WITHIN 15 DAYS OF THE SIGNATURE OF THIS INSPECTION. SINCE THE HALARDOUS WASTES ARE INCINERATED THE RESULTING ASH RESIDUES MAY THEN BE CONSIDERED HAZARDOUS WASTE. THIS FACILITY MAY THEN BE REQUIRED TO MEET THE REQUIREMENTS CONCERNING This inspection report is official notification that a representative of the Department of Environmental Resources, Bureau of Solid Waste Management, inspected the above installation. The findings of this inspection are shown in this report. Any violations which were uncovered during the inspection are indicated. Violations may also be discovered upon examination of the results of laboratory analyses and review of Department records. Notification will be forthcoming, confirming any violations indicated herein and listing any additional violations. Person Interviewed (signature) Date G-Inspector (signature) Dom Date Michael A. noma

Part G - Comments Date of inspection 9-11-81 Identification number PADOOD 430686 Company, Installation name HARRISBURG STEAM GENERATING FACILITY County DAUPHIN Municipality Crts of HARESBURG DISPOSAL OF HAZARDOUS WASTE (REGARDING THE 2 LANDFILL AREAS) AND ALSO GENERATION OF HAZARDOUS WASTE. THIS DETERMINATION WILL BE MADE DENDING THE OUTCOME OF EPA'S DECISION CONCERNING THE FACILITY'S STATUS. THE WASTE ANALYSIS PLAN AND CONTINGENCY PLAN MUST BE DEVELOPED & WITHIN 30 DAYS OF THE SIGNATURE OF THIS INSPECTION REPORT. IF THE EPA DOES NOT GIVE THIS FACILITY SATERIM STATUS TO MANAGE HAZARDOUS WASTE, HAZARDOUS WASTE THEN MAY NOT BE ACCEPTED BY THE FALLITY. This inspection report is official notification that a representative of the Department of Environmental Resources, Bureau of Solid Waste Management, inspected the above installation. The findings of this inspection are shown in this report. Any violations which were uncovered during the inspection are indicated. Violations may also be discovered upon examination of the results of laboratory analyses and review of Department records. Notification will be forthcoming, confirming any violations indicated herein and listing any additional violations. Date 9-16-81 Person Interviewed (signature) Date 9-15-81 Inspector (signature) 2 Jonard Mulrael A. namoski

ş

	OKPJP
107	PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL RESOURCES
195	BUREAU OF SOLID WASTE MANAGEMENT
	HAZARDOUS WASTE REPORT

se print or type with ELITE type (12 characters/inch)
I, TYPE OF HAZARDOUS WASTE REPORT
PART A: GENERATOR QUARTERLY REPORT
PLEASE PLACE LABEL IN THIS SPACETE DVIEL SUARTER ENDING
PART B: FACILITY QUARTERLY REPORT
2
11. INSTALLATION'S ID. NUMBER DIV. OT HOSTINOUS WISTO
II. INSTALLATION'S ID. NUMBER DIV. OTTO
HILINAME OF INSTALLATION
HARRISBURG STEAM GENERATING FAGILITY
IV. INSTALLATION MAILING ADDRESS
STREET OR P. O. BOX
HARRISBURG PAIFII04
LOCATION OF INSTALLATION STREET OR ROUTE NUMBER MUNICIPALITY
1670 S 19+h STREET . HARRISBURG
CITY OR TOWN
VI. INSTALLATION CONTACT
VI. INSTALLATION CONTACT NAME (last and first) PHONE NO. (area code & no.)
KIIM SI KIOBIISIOM IORI HAIGA RI MARPER 717 1553 31119
VII. TRANSPORTATION SERVICES USED (for Part A reports only) List the identification numbers for those transporters whose services were used during the reporting quarter represented by this report.
VIII. ANNUAL COST ESTIMATES FOR FACILITIES (for Part B reports only)
FACILITY COST ESTIMATE FOR FACILITY CLOSURE AND FACILITY MAINTENANGEN POSITIONS AND FACILITY
INCINERATION, AROLIESS INCINERATION PROCESS
IX. CERTIFICATION
this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are
significant penalties for submitting false information including the possibility of fine and imprisonment.
Kim S. Robison 9/29/81 A. Print or Type Name 6. Date Signature C. Date Signed

PI	ease print or type with ELITE type (12 characters/inch)	JARTERLY REPORT -	PART B			
	FOR OFFICIAL USE ONLY (Items 1 & 2) 2. RECEIVED BY		1 9	XVI. FACILITY'S	043	0686
	VII. GENERATOR'S I.D. NO. PADO971157796 VIII. GENERATOR NAME (specify)	xix. generator add 980 Loucks York, PENN:	5 Mill	Rad		code.)
	AGWAY INC.	MUN. YORK	ar en antre arte	COUNTY	York	<
LINE NO.	A. DESCRIPTION OF WASTE AND MANIFEST DOCUMENT NUMBER (MDN)	B, Hazardous Waste Number	C. Handling Method and Date	D. Amount of Waste	E. Unit of Mea- surp	F. PA. Hazardous Waste Transporter (HWT) License No.
1	THIRAM WASTE	PIII7	709	0.36	<u>.</u>	
	MDN- PA A 2110474		Date 0 4	1-01-81	14	
2	THIRAM WASTE MON-PA A 2106042	P117	Date () L	1-03-81		
3	THIRAM ENDOSOLFAN	DVE ALL	709	0.25	H	
	MDN-PAA 21060513) THIRAM	1 1981	Date / 2	4-10-81		$\frac{1}{1}$
) ⁴	ENDOSOLFAN MONS PA A SUDJODAS DUN OTHE	zardous Ward 17	T 0 9 Date () 4	1 0, 49 4 - 20 - 81	<u> </u>	
5	THIRAM	PITT	709	2.73	H	
	ENDUSOLFAW MON- PA A 2106086	<i>P050</i>	Date ()	4-22-81		
6	WASTE THIRAM	P1/7	709 Date 01	2.75		
7	MON- PA A 2106090			1-24-81		
	MDN-		Date			
8			Date			
9	MDN-		Date			
	MDN-		Date			
10						
	MDN- (XI, COMMENTS (enter information by line number-see in	structions.)	Date			
				нун — — — — — — — — — — — — — — — — — —		

PI C	nase print or type with ELITE type (12 characters/inch)		0000	r DADT	D			· · · · · · · · · · · · · · · · · · ·
1-			PORT					
	USE ONLY		1-1-	- 1 9	XVI.	FACILIT	Y'S LD. NO	17/2010
<u> </u>	(Items 1 & 2) 2: RECEIVED BY					HDD	0014B	0686
× No. 2	ويستعمانها والثقائ وسيمسد ومحصب ويستر فبحب التهجر جيبته بالأثار ججين بالبلا أأتهم جيبته فتكرأ أتألك ويستبت فيتقر						state & zip	code.)
×				STRIAL			7000	
					NSYLVA	N/A I		
	NOUSTRIAL WASTE REMOVAL, INC. MUN. 1					COUNTY		
	K. WASTE IDENTIFICATION							
E NO.	A. DESCRIPTION OF WASTE AND MANIFEST DOCUMENT		B. szardo	C. Handlin Method	THE PERSONAL STREET		E. Unit	F. PA. Hazardou Waste
LINE	NUMBER (MDN)		aste Imber	and		Amount laste	of Mea- surp	Transporter (HV License No.
				5709	,	7.3	2 7	
1	WASTE OIL and WATER N.O.S.	Δ	05		+-++			
	MDN-PA A 0755285			Date ()	4-2	9-8	1	
			-+					
2			_					
	MDN			Date				
3								
				Date				
	MDN-				+++-	┝╌┼╌┽╌╴		
4	TANK							
	MON-		_	Dete		-		
	1981				┪	┥ ╍┥╍┥╍		
5	OCT THE							
	MDN- Waste	3		Date	-			
	MDN- Div. of Hezardous Waste		-					
6					╀┼┼	┝╍┼╍┼╍		
	MDN-			Date		-		
7		╷┝──┥						
				Date				
	MDN-				╺╈╼┾╍┾╍			n fill for the second sec
8								
	MDN			Date	-	-		¥
\vdash				┝╶┠╌┰╌┼╸	+++	┝╌┼╌┽┈	┝╌╀╌┰╌	+
9								
	MDN~ ~			— Date		-	•	
					111			
10	·			┝╌┠╍┟┈┼╸	╄╍┿╼╍	┟╍┟╸┼┈		
	MDN			Date				
	XI. COMMENTS lenter information by line number-see instructions.	.)						
1								

PAGE ----- OF

٠

P	lease print or type with ELITE type (12 characters/inch)								98.96 V.S		Andread	<u>Xarki</u>	alle si dece				
F	FOR OFFICIAL 1. DATE RECEIVED	ARTERLY	RE		~	PAR 1 9	TE									-	
5	FOR OFFICIAL 1. DATE RECEIVED USE ONLY (Items 1 & 2) 2. RECEIVED BY		_1_			1 3		+	xvi. ID	AIT			<u>і.в.</u> 04	NO.	नत	86	
\sim		XIX. GENE	RAT	OR	ADC	RESS	(St	reet	IF J or PC	bax	, city	1 114	nte & :	clp c		1 1001	X
	PA0000765354	Comm	1 <i>E)</i>	ec.	Ξ,	DR	IVE	- -	115								
ļ×	VIII. GENERATOR NAME (specify)	MIDDL	E7	би	N,	, p	4.	1.	105	1							
	MACK TRUCKS INC.	MUN. M.	IDE	LE	:70	oWI	N			cou	NTY	(DAL	IP;	4 <i>1N</i>	7	
	A DESCRIPTION OF MALTE AND MANUSER														F. PA.		
LINE NO.	A. DESCRIPTION OF WASTE AND MANIFEST DOCUMENT NUMBER (MDN)		Wa	B. zardi ste mbe		C. Hand Metho and Date	ling od		D, A of W	moui aste	nt		E. Un of Me sure		Waste	orter	(HWT)
	HAZARDOUS WASTE LIQUID NO	N.S.	Ы		2	10	9			9	3	7	.17				\prod
1				20	Ĩ	Date		5	- 1	- -	8	1					
	MDN- PA A1132062			+-		T	Ť	Ť			+		- 	Г		<u> </u>	
2	HAZARDOUS WASTE LIQUID N.O.	S.	Ø	20	3					8.	8		<u></u>		┝┻┙	LL_	
	MDN- PA A 1132073	· · · · · · · · · · · · · · · · · · ·				Date	0	5	-/	3-	8	\square			 	~~~	, , , , , , , , , , , , , , , , , , ,
3	HAZARDOUS WASTE LIQUID N.D.	S.	5	00	3	70	9			9.	1	/	T				
	MON- PA A 1132084		┝┼		+	Date	0	6	-1/	5-	- 8	1					
												Π					Π
Ĵ				1		Date			_		-	Η	<u>. 1</u>	1			┢╌┷╸
	MDN				+					_		4					TT*
5	198					105.443		4	-						ĻĻĻļ	Ļ	
	MDN	叫				Date			-		-						
6	Div. of Hazardous Wa	iste		_													
	MDN-					Date			-	-	-						
7		<u> </u>										1					Π
	MDN					Date	┟╌╴┡	-+	_		-	-					
			┢╌┼╴	+	+			╺╾┼╾	+		+	\neg					T - T - T
8			\square	_	\Box						+	_					
	MDN-					Date						_		6			<u>.</u> T-1-
9																	
	MDN-		┢╌┼╴		+	Date			-	-	-		ં				
10		***********************	┠╌┼			T										\square	$\prod_{i=1}^{n}$
			┝─┼	-+		Date	┟╌┡	-+-		-+-	_	-					L
	MDN KXI. COMMENTS (enter information by line number-see instr	uctions.)			Ц												
		ini a statistic ining.											1999 - 1999 1999 - 1999 1999 - 1999				

A. DESCRIPTION OF WASTE AND MANIFEST DOCUMENT NUMBER (MDN) A HAZARDOUS WASTE N.U.S. MDN-PAA 0253993 H9ZARDOUS Solid Waste N.O.S. WHICH CONTAINS MERCURY MDN-PAA 1025732 MON- MDN- MDN- IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	E HA ERN, Ha Wa Nu D C	B. zardou ste DO	R EN 9	POAL NSY	ng 9		1 <u>Pob</u> 4	DUN		4< ste &	zip i Init	686	Hazaro Dortar (
XVII. GENERATOR'S I.D. NO. XIX. GE PADOOZZZZARY MOR XVIII. GENERATOR NAME (ppc) (fy) MALV VATIONAL ROLLING MILLS MUN. XX. WASTE IDENTIFICATION MUN. MDN- MON- MDN- MON- MDN- MON- MDN- MON- MDN- MUN.	E HA ERN, Ha Wa Nu D C	B. zardou ste DO	R EN 9	POAL WSY Handli Methoo and Date TO Date Date Date	2 2 2 2 2 2 3 9 0 4 9		4 Ame Wast ///	DUN Dunt te	84 81	E. L of N	zip i Init	F, PA. Waste	Hazaro Dortar (
HADOOD3324978 MOR XVIII. GENERATOR NAME (UPOCIFY) MIALV WATIONAL ROLLING MILLS MUN. XX. WASTE IDENTIFICATION MALV. MUNER (MDN) MALV. HAZARDOUS WASTE N.O.S. MDN-PA A 0253993 HAZARDOUS SOLID WASTE N.O.S. WHICH CONTAINS MERCURY MDN-PA A 1025732 MON-PA A 1025732 MDN- MON- MDN- MON- MDN- MON- MDN- MON- MDN- MON-	E HA ERN, Ha Wa Nu D C	B. zardou ste DO	R EN 9	POAL WSY Handli Methoo and Date TO Date Date Date	2 2 2 2 2 2 3 9 0 4 9		4 Ame Wast ///	DUN Dunt te	84 81	E. L of N	Init	F, PA. Waste Transpo	orter (
XVIII. GENERATOR NAME (specify) WATIONAL ROLLING MILLS XX. WASTE IDENTIFICATION A. DESCRIPTION OF WASTE AND MANIFEST DOCUMENT NUMBER (MDN) A. ALSCRIPTION OF WASTE AND MANIFEST DOCUMENT NUMBER (MDN) A. DESCRIPTION OF WASTE AND MANIFEST MDN- MDN- A. DOCUMENT NUMBER (MDN) A. DESCRIPTION OF MASTE AND MANIFEST MDN- A. DOCUMENT NUMBER (MDN) A. DOCUMENT NUMBE	ERN, Ha Wa Ny D	B. zardou ste mber	EN, us	NSY Handli Metho and Date TO Date Date Date	12,24 ng 9 04 9		Ame Wast	DUAT te	84 81 11	E.L of N	Init Nea-	F, PA. Waste Transpi	orter (
MATIONAL ROLLING MILLS XX. WASTE IDENTIFICATION A. DESCRIPTION OF WASTE AND MANIFEST DOCUMENT NUMBER (MDN) AdazARDOUS WASTE N.O.S. MDN-PAA 0253993 H92ARDOUS Solid Waste N.O.S. WHICH CONTAINS MERCURY MDN-PAA 1025732 MDN- MDN	Ha Wa Nu Dic	B. zardor ste mber	us 9	Handli Metho and Date TO Date Date Date	7 04 7		Ame Wast	DUAT te	84 81 11	E.L of N	Init Nea-	F, PA. Waste Transpi	orter (
A. DESCRIPTION OF WASTE AND MANIFEST DOCUMENT NUMBER (MDN) A. DESCRIPTION OF WASTE AND MANIFEST DOCUMENT NUMBER (MDN) A. DESCRIPTION OF WASTE AND S. MDN-PA A 0253993 A. HQZARDOUS SOLID WASTE N.O.S. WHICH CONTAINS MERCURY MDN-PA A 1025732 MDN- MDN- MDN- I (981 UU UU UU MDN- I (981 UU UU UU I I I I I I I I I I I I I I I	Ha Wa Nu D	B. zardor ste mber	us 9	C. Handli Metho and Date TO Date Date Date	904		Ame Wast	DUAT te	84 81 11	E.L of N	Init Nea-	F, PA. Waste Transpi	orter
A. DESCRIPTION OF WASTE AND MANIFEST DOCUMENT NUMBER (MDN) A HAZARDOUS WASTE N.U.S. MDN-PAA 0253993 H9ZARDOUS Solid Waste N.O.S. WHICH CONTAINS MERCURY MDN-PAA 1025732 MON- MDN- MDN- IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	Ha Wa Nu D	B. zardor ste mber	us 9	C. Handli Metho and Date TO Date Date Date	904		Wast /// 23		84 81 11	E.L of N	Init Nea-	F, PA. Waste Transpi	orter
DOCUMENT NUMBER (MDN) A HAZARDOUS WASTE N.U.S. MDN-PAA 0253993 HAZARDOUS Solid Waste N.O.S. WHICH CONTAINS MERCURY MDN-PAA 1025732 MDN- M		zardor ste mber	9	Handli Methor and Date Date Date Date	904		Wast /// 23		84 81 11	ofA	lea .	Waste Transpi	orter
MDN- MDN-		ste mber	9	Metho and Date Date Date Date Date	904		Wast /// 23		84 81 11	ofA	lea .	Transpo	
MDN- MDN-PAA 0253993 H9ZARDOUS Solid Waste N.O.S. WHICH CONTAINS MERCURY MDN-PAA 1025732 MDN- MD	D	20	9	TO Date TO Date Date	04 9	/ - c	// 03		8 (
MDN-PAA 0253993 H9:ZARDOUS Solid Waste N.O.S. WHICH CONTAINS MERCURY MDN-PAA 1025732 MON- MDN- MDN- MDN- MDN- INBGEDVIE UI 1981 UI 1981 UI 1981 UI 1981 UI 1981		-		Date TO Date Date	04 9				8 (
MDN-PAA 0253993 H9:ZARDOUS Solid Waste N.O.S. WHICH CONTAINS MERCURY MDN-PAA 1025732 MON- MDN- MDN- MDN- MDN- INBGEDVIE UI 1981 UI 1981 UI 1981 UI 1981 UI 1981		-		Date TO Date Date	04 9				8 (
MDN- MDN-			-	TO Date Date	7			+	11				
MDN- MDN-			9	Date Date	7		/3	-	11				
MDN- MDN-				Date Date	05			-	81				
MDN- MDN-				Date					81				
MDN- MDN-													
MDN- MDN-													
MDN- MDN-													
MDN- MDN- MDN- MDN- MDN- MDN- MDN- Div of Hazardous Wasto				Date									
MDN- MDN- MDN- MDN- MDN- MDN- MDN- Div of Hazardous Wasto				Date									
MDN- MDN- MDN- MDN- Div of Hazardous Wasto				Date	-								Ť
MDN- MDN- MDN- Li Div of Hazardous Wasto					Τ	T							Т
MDN- MDN- Li Div of Hazardous Wasto				-	1						11		1
MDN- MDN- Li v of Hazardous Wasto						┿┿		$\left - \right $				+	
MDN- Div of Hazardous Wasto				Date		-		-					
MDN- Div. of Hazardous Waste					-	++					1		-
						\downarrow							
	++	+		Date		-		-					
	++	+			+	╋┿	-	┼─┤		l'int	1	TT	1
				-									
MDN-				Date		-		-					
	-{-+		-		-+-	╈	+	$\left - \right $	-+		T		
									ĺ				
MON	47	$+\overline{-}$	_	Date		-			T			Ĭ	
	╶╂╌┼	+			-+-	++	+	+				+	Т
												ŀ	
MDN	4	+	_	Date		—		_					
MUN		┿╼┥				┼╌┾		$\left - \right $			- <u>-</u>	++	
		_		Date		_							
MDN- XXI, COMMENTS (enter information by line number-see instructions.)					1						েগৰ চল		/1

•

DO NOT KEYPUNCH

xvii 7	FACILITY QU FOR OFFICIAL USE ONLY (Itoms 1 & 2) . GENERATOR'S I.D. NO. MOME I. GENERATOR NAME (specify) AY/OR WHARTON WASTE IDENTIFICATION	XIX. GENE 9+H G HARRI MUN. H	HATO	H ADE	1 9	(Stree)	P or PC	AD	00	والمحمد المجدية	30	68	6
x viii 7 x x. 0 W	USE ONLY (Itoms 1 & 2) 2. RECEIVED BY GENERATOR'S I.D. NO. MOME I. GENERATOR NAME (specify) TAY/OR WHARTON	9+h q HARR	ind.	He	er i	Stre	P or PC	AD	00	04	30		6
x viii 7 x x. 0 W	AYLOR WHARTON	9+h q HARR	ind.	He	er i	Stre) bax,	city st	والمحمد المجدية			
XX, V V W					PA.	17	105				<u>p</u>	de.)	
E NO.	WASTE IDENTIFICATION	and the second se	ARRI						NTY L	DAU	ρĦ	IN	
	A DESCRIPTION OF WASTE AND MANIFEST DOCUMENT NUMBER (MDN)		B Haza Wast Num	rdous e	C. Handii Metho and Date	ng d	D. / of V	Amoun Vaste		E. Uni of Mea surp	t) r	F, PA, H Naste Transpor License f	ter (HM
1 V	VASTE OIL N.O.S.		RΟ	52	TO	9	. 1	2.	90	17		\prod	\prod
N	IDN-PAA0755230				Date	-+-	-2	2-	81				
2	WASTE OIL NOS.		πo	52	10				60	17			
	DN-PA A 0755226				Date		d	2^{-}	81	- [-]	4	ierse TT	
L.	WASTE OIL NOS.		MO	52	Date	9 14		9. 3-	55 81		$\frac{1}{1}$		
4	WASTE OIL ; WATER N.O.S.		RO	1	Τo					H		TT	
-4	WASTE OTZ ; WATER NO.			2.2			-2		81	┝╾╌┷┠╌┷			
5	E/1/1_0/30.800											TT	
	DN				Date								
6	MEGEIVEN												
м			┟╌┼┈		Date							<u>3</u>	TT
7		ツ			Date								
┝╼╍┠╌╸	DN-		┝╌┼╌			-					+	TT	
8 M	DN-		<mark>╞╼┾╼</mark> ┥─┼╸		Date		_				لب ا	- -	.
9	-		┟╌┼╌						+-+		-+		Ť T
	DN				Date					•			
10													
ne se anno anno anno anno anno anno anno ann	DN-				Date			-				S. 18 2.33	
XX	I. COMMENTS (enter information by line number-see inst	tructions.)											物。影

٠

	Pase print or type with FLITE type (12 characters/inch) FACILITY QUARTERLY	RF		т -	PARTR	 					• • • • • •		· · ·
 	FOR OFFICIAL 1. DATE RECEIVED	-	Ť		1 9		VI. F.	ACIL	.)TY'B	1.D.	NO:		
	USE ONLY (Itoms 1 & 2) 2. RECEIVED BY		Li		II		PL	10	00	04	3	266	36
X	VII. GENERATOR'S I.D. NO. PADO70604178 VIII. GENERATOR NAME (Spocify) VIII. GENERATOR NAME (Spocify) VIII. GENERATOR NAME (Spocify)	TI Joi	Ra 94	ρ.	ER RO PA. 1	ad. 1948	32						
	OLKSWAGON OF AMERICA JNC. MUN. Va	1/e	1	7	orge		C	OUN	TY (] HE		ER	
LINE NO.	A. DESCRIPTION OF WASTE AND MANIFEST DOCUMENT NUMBER (MDN)	Haz Wai	B. arda te nbe		C. Handling Method and Date		D. Am of Was	ioun1 ite		E. U of M surp	nit 08-	F. PA. Waste Transpo License	Hazardo ortar (H
1	HAZARDOUS WASTE N.O.S.	ĒC	24	7	109		7	1	37	1			
	MDN-PA A 2143691				Date ()	6-	19		81				<u>-1-</u>
2					Date								
3	MDN		-										
	MDN-				Date			-			مراجعة. 1919 - ياري 1919 - كول		·····
4				+				-					
8	MDN-		+	+-	Date		+-	+			T		
5	DECEDVE				Date								
-	MON-				Dala			+			T.		
6	MON- Westa				Date			-					
7													
	MDN		+-	+	Dete		┝╍┾╸						· · · · ·
8				+									
	MDN			+	Date	-+	┝╌┼╴				.	$\left[\right]$	
9				-			$\left \right $	+	· · ·		\bot		
10	MDN				Date		┝╌┾╴			İ -T	Τ		
10	MDN			+-	Date			+					
	XXI. COMMENTS (enter information by line numbersee instructions.)	بسله		جل						In St. Const.			g.s.

OK 111 8-5-81 <u></u> ER-SWM-55:11/80 PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL RESOURCES 3₂₂ BUREAU OF SOLID WASTE MANAGEMENT HAZARDOUS WASTE REPORT se print or type with ELITE type [12 characters/inch] I, TYPE OF HAZARDOUS WASTE REPORT PART A: GENERATOR QUARTERLY REPORT THIS REPORT IS FOR THE OUARTER ENDING PLEASE PLACE LABEL IN THIS SPACE PART B: FACILITY OUARTERLY REPORT 말 소영 THIS REPORT IS FOR THE 6 3 0 0 QUARTER ENDING TIT'S CLIPPINES * WER II. INSTALLATION'S ID NUMBER -6£ 9 8 9 7 8 Δ LL NAME OF INSTALLATION $T \mid E \mid R$ TREA T MN TP С TEEWÌ S Ε W D A А IV. INSTALLATION MAILING ADDRESS $\psi_{i,j} \neq 0$ STREET OR P. O. BOX T | R | E | E | T | R | O | O | MW А LN U TS40 3 CITY OF TOWN ST. ZIF CODE Р Ι SВ U R G А 0 LOCATION OF INSTAULATION 2. A. 2. C. A. C. A. C. STREET OR POUTE NUMBER MUNICIPALITY R 0 $E \mid L$ TN + LIO $S \mid T \mid R \mid E \mid E \mid T$ HARRISBURG COUNTY CITY OR TOWN ZIP CODE ST.

ķ

1

P

DV А

4 2 3

Н A R R

А

А

1938

7

N

Ε

R I S

VI. INSTALLATION CONTACT

PAUL CYGAN

BUR

 $P \mid A$

U \mathcal{L} Р

MART

A

\$C)

Pair part floot

G

м

Д

А R

Υ G А Ν

Η

D 0 AUG 5 1981

9

3 ì

8

VIL TRANSPORTATION S	ERVICES USED (for Part & report	ontv) – Statistick			
ist the identification numb	ers for those transporters whose movi	ices were used during the	e reporting quarter repre-	sented by this report.	
Chemical Leaman	- PAD084770023				
Waste Conversion	- PAD085690592				
VIII ANNUAL COST ESTIN	ATES FOR FACILITIES THE PART	Concernation States			
A, COST ESTIN	TATE FOR FACILITY CLOSURS	3. COS		CLOSURE MONITORING A	Ð
		,			1
IX. CERTIFICATION					
	valty of law that I have person	· · · ·		지수는 가장의 사람은 것을 수 있었어? 것을 다 있을 것 같아.	
	f documents, and that based on r believe, that the submitted infor		and the second	이 가슴에 가슴 이 없는 것이 가지 않는 것이 같이 있는 것이 있는 것이 있다.	
「夏子」 かんしゃ しんかい かいたい しかい しんかいせん	for submitting false informatic				n in 1945 - Status 1945 - Status

Paul Cygan

1 7

19 (9 ST 19

0 4

71

FHOME NO.

DAUPHIN

2 5 5 6 5

ieres code

\$ 10.

7/ 31/81 C. Data Hanad

	R-SWM-55B:11/80 esse print or type with ELITE type (12 characters/inch)		•			
	FACILITY O	ARTERL	Y REPORT	PART B		
	FOR OFFICIAL			19	XVI. FACILITYS	I.D. NO.
ŀ	USE ONLY (Itams 1 & 2) 2. RECEIVED BY				PAD07	2849789
	VII. GENERATOR'S I.D. NO.	XIX. GEN	ERATOR AD	DRESS (SVe	et of PO ban, city s	ats & sig code.)
	P A D O O 3 O 2 5 2 7 7					AUG 5 1001
<u>×</u>	VIII. GENERATOR NAME (specify)	l Cumb	erland St	reet, Le	banon, PA	aco is hish
Βe	ethlehem Steel Corporation	MUN	Lebanon		COUNTY	Lebanon
COLUMN A STREET	X. WASTE IDENTIFICATION					
o z	A. DESCRIPTION OF WASTE AND MANIFEST		В.	C, Handling		F. P.A. Heardous
LINE	DOCUMENT NUMBER (MDN)		Hazardous Waste Number	and	D. Amount of Wasts	of Mee Transporter (HWT) fury License No.
			КОЕ	Date		
1	Waste Sulfuric Acid, Spent Contains Ferrous Sulfate			T 6 7	45000	Р
	MDN PAA0 307775	·	╶╈╌┼╌┼╌┼╼	Date 04		
			KOG			
2	Same			T 6 7	44900	of even and a second
	MDN- PAA0307812			Date 0 4	07 81	
3			K O G	T 6 7	44900	P
	Same			Date		
	MDN- PAA0 307790		K 0 6	04	07 81	
4		1		T 6 7	40900	P
	Same			Cate 0 4	- 10 - 81	
	MDN- PAA0307985		K 0 6 2			
5	Same			T 6 7	46700	P
	MDN_ PAA0307996		╉╾┼╌┼╌┼	Date 0 4		
			K 0 6 2			
6	Same		┝╌┼╍┼╌┼╌	T 6 7	4 5 8 0 0	
	MDN- PAA0308000			Date 0 4	-13-81	l all's San II ann an Ann
7			K 0 6 2	T 6 7	4 5 0 0 0	
-	Same			Date		
	MON PAA0308022		K 0 6 2	04	16 81	
8				T 6 7	4 5 0 0 0	P
	Same MON- PAA0 3080 33		╺╋╾┾╾┼╾┼╸	Date		
			K 0 6 2			
9	Same		┢┥┝┿	T 6 7	45000	P
	MDN- PAA0308055			Date 0 4	2 4 8 1	
10			K 0 6 2	T 6 7	45000	Р
-	Same			Dateh		
	MON- PAA0308070 xxt, COMMENTS (enter information by line number are in			1 0 c c p 4		
	XXI. COMMENTS lenter information by find burger and inf	REFUGINE (MAL)				

ED CHIN SED 11100

	FACILITY OU	ARTERL	YREP	DRT		PAR	T B			(18) 1	×6		8. 		n de la com La compositione	¢	2.5		
2	FOR OFFICIAL			1_	1		Τ	1	XVI	. F/	ACII	uτ	YS	1.D. N	40,				
	USE ONLY (Items 1 & 2) 2. RECEIVED BY		-						P	A	D	6	7	2 8 4	1 9	7	3 0		
20	VII. GENERATOR'S I.D. NO.	XIX. GEN	ERATO	R A	201	1E88	(8¥	oet				1.1	1.5	a state of the sta		****			
	P A D O O 3 O 2 5 2 7 7	l Cumb	erlar	nd S	Str	eet	:						5.1	(C)					
X	III. GENERATOR NAME (MACHY)	Lebanc	n, PA	l									At j	lo h	198	31			
	Bethlehem Steel Corporation	MUN.	Lebar	ion						Ç	NUC	ITΥ		Lebanon					
- T	K. WASTE IDENTIFICATION					k og skilse A		<u> </u>		alian Terat	-		1 B						
LINE NO.	A. DESCRIPTION OF WASTE AND MANIFEST DOCUMENT NUMBER (MDN)				1	C. Handi Vietho Ind Date	ing M		D.	Am Was	ouń	in Na s		E. Unit of Mea surg	Ť	ranep	S.	nrdous (HW	
	Waste Sulfuric Acid - Spent		K C	6	2		7							N L		\square			
1	Contains Ferrous Sulfate			┝╌┼╴	+	T 6	-4	-+	-+-	4 8	3 <u> </u> 0	0	0	<u>.</u> P			L.	╧╌╋	
t	MDN PAA0308081				1	Data	0	5	- (2 4	1 -	8	1						
			K O	6	2		7			4 5	5 0	0	0	ji ₽					
2	Same			<u>-</u>	-+	T 6	┝╌╄			¥ 3				$ \frac{P}{2} $	+		 		
	MDN- PAA0308011					Date	0	4		16		8	1		21.01.00		Andreadaca	erependicy	
3			KO	6	2	T 6	7			1 5	0	0	0	P	4				
	Same				-			+		+-	+	F			-	لمــــل	LL_		
	MDN- PAA0308092			i III	-+	Date	0	5) <u> </u> 5		8	1			وسمحوه	,		
4		1	KO	6		T 6	7			1 5	0	0	0	Р	1				
	Same				1	Gate		E	- 0			1	1			and a second	<u>hanna</u> ha rra	nni usuk	
Ц	MON- PAA0308103			┼╌┝	4		0				<u> </u>					-11		- T	
5			K_O	6	2	т 6	7		5	5 0	0	0	0	Р					
Ĩ	Same				1	Date		5	- _	2	-	0	1		T		lan galan Anga Anga	ne rjen som g	
	MDN- PAA0308114		+	$\left \right $	+			-	-+-	12	+	-			÷	+	r * _	11	
6			KO	6	2	т 6	7		4	1 6	0	0	0	P					
	Same				1	Date			- ,					1.5	T				
-	MDN- PAA2050020		K 0	6	2		0	5	1	8	+	8	1		+	- T		-1-7	
7					-1	T 6	z							Р					
	Same				-[Date	0	5	- 2	2 2	-	8	1	4,	T	5 F			
	MDN- PAA2050053		K O	6	7			+		+	+					TT			
8					1	$T \mid 6$	7		4	1 5	0	0	0	Р	_ل_				
	Same MONPAA2050064		++-	$\left\{ - \right\}$	-1	D'ate	0	5	- 2	2 2	-	8	1		Î				
-	FA82U3UU04		K O	6	7			-†	-	+	1				-	TT		TT	
9	Come			[]		T 6	7	_	4	1 7	0	0	0	P					
	Same MDN PAA 20 5007 5		+	┼╌┽	-	Date	0	5	- 2	9		8	1						
			K O	6				1		<u> </u>					1	T	T	TT	
101				1.1.		T 6	7		4	17	0	0	0	Р					
	Same				1		1 1	- L	1		i		} 1			1			

was analyzed as the cost of the test of the second states for the test of the

-

.

ilitation of	FACILITY OL	ANIEHL		T	4	Т			-	C.I.I.	an a						() () () () () () () () () () () () () (en and an	re alla	
)	POR OFFICIAL I. DATE RECEIVED USE ONLY (Items 1 & 2) 2. RECEIVED BY		<u> - </u>			11	9			X T				ſ	m	1.0	Ť	rà tra		
×	VII. GENERATOR'S I.D. NO.	XIX. GE	VERA	TDI	8 A	00	RARS	19			7989878	2200	D	o / 1986.	7		C (2000)	97	ter et en la serve	
	PAD003025277	l Cumb													\sum	Į,	1.			
X	VIII. GENERATOR NAME (specify)	Lebano			5	CΙ	eet							/1	11.	Ę	. 10	. .	•	
	Bethlehem Steel	haish -	<u> </u>						a na si				1.16)							E
x	X. WASTE IDENTIFICATION	MUN. Le	eban	on M												eba	nor			
ON NO	A. DESCRIPTION OF WASTE AND MANIFEST		I				C Hand	line	Γ							·		St. 1997 18. 1	. 19632	rdou
LINE L	DOCUMENT NUMBER (MDN)		1 19	lazai lasti NCL	1	22.02	Meth	od	1), A of W					e.c of h iurg	lea-	Tron	ports: sa No.	(พีพ
-	Waste Sulfuric Acid, Spent		andiron	0		2	Date	Ť	İ	m		7.22	- 			T	Ť	1	T	Ť
	Contains Ferrous Sulfate			<u> </u>			$T \mid 6$	7	ļ	-	2	7	0	0	0	. F				
18 - C - 18 -	MDN PAA2050145		+-				Date	0	6	-	1	5		8	1			-		
		2000, (an ionne ann rugann) (an ion	K	0	6	2			I	TUPTER	-	_						T		
	Same		-				<u>T</u> 6	1	-	771.644	4	5	0	0	0	<u>I</u>	_			-
	MDN- PAA2050134	1. 20 Tel aplant a Telesco a Vicia a	1				Date	0	6		1	5		8	1			.		- y-initia
			K	0	бļ	2	$T \mid 6$	7			4	5	0	0	0	ļ				
	Same						Date													
	MDN- PA2050156	the production of the state of the	K	0	6	2		0	16	erre	1	and max	er an	8		T	-	$\frac{1}{1}$		
	Same					_	т 6	7	ļ		4	5	2	0	0	F			de juli	-y-acept
	MDN PAA2050160						Date	0	6	-	1	9	_	8	1			L	a principa si m	ini julio kon
			K	0	6		т 6	1,	Ī		4	E	0			F				
	Same						Date	1	-		4	5	-	0		<u> </u>	<u> </u>	┟┙╴	-bosedar	en an
1	MDN- PAA2050171	anna a gur y ngang kigi pina	K	0	6	2	Date	0	6		2	4		8	1		- 1 -1-	<u></u> [⊢_	-	-
5						2	$T \mid 6$	7			4	5	0	0	0	Ę				
	Same MDN- PAA2050193		_				Date		6		2	Λ	-	8	7					
			K	0	6	2	- T				ALC: NO	200 (200		ingia t		Π	T		TT	Π
	Same		-				T 6		ļ		4	5	0	0	0	F	L.	$\downarrow \downarrow$	<u>L</u>	11
	MDN- PAA2050204						Date	0	6		3	0		8	1		arryan:	 		ومشتوس
			K	<u>a</u> _	6	2	$T \mid 6$	7			4	5	0	0	0	P				
	Same						Date			_								*	-kk-	u dan sada C Tari
-	MDN- PAA2050215					-		0	6	-	3	0		8	1		-	+-	TT	11
									L							1				
	MDN		+-				Date	,					-							
0							T	 	T	Π								T	TT	Π
U				-				+	-	┝╌┥					ener	J.	_L_			
	MDN-4	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	1	-			Date	9 1/1000072			NE M	(4) 204			250	-		Interest	50C 800	Keiziku
1	XXI. COMMENTS (enter information by line number-see in	structions.)			er set al year		SE													120

	FOR OFFICIAL		∎ <u>a</u> l	ايم 1 		- I	1 9	-		Ī	xv	i. I	4	Śiť	TYT	Ř	.				2		
	USE ONLY (Items 1 & 2)												A.	D	04	2	8	4	9	7	8	9	
X	VII. GENERATOR'S I.D. NO.	XIX, GENE	88	TQ:	1 4	00	RE	ŧ	1251	PP1	-	ģ	60				Â	Sec.	-	<u></u>	<u>N</u>		1
×	PADO3014560	3990 Ea						St	re	et					/4./g		5	198	8 1				
	Campbell Chain Company	York, H	PA Yor		74	102	, 	1	<u> </u>				201	JN.				k ·					
	X. WASTE IDENTIFICATION		-					s pri Li se	11:00 A			_	05.49			Association							1
LINE NO.	A. DESCRIPTION OF WASTE AND MANIFES DOCUMENT NUMBER (MDN)	i i	H V	8 828 1050 1050	rda I	49 19	Har Met and Dat	12 1	39		D of	A(nõi Mõi	mt				nit-	Ĥ	PA Vesta Irana Irana			į
			ĸ		6	2	T		7		T	4	8	0	00		T _z			Ť	T	T	-
1	Sulfuric Acid - Spent						1	1		-†						Í.				ال م کور	5	5	10000
2	MDN PAA0967470						0		0	4	-	2	8		8 1		Γ			Ţ	Ī	Ť	
2			<u> </u>				Da		-	+	_	╉	+	_		┢┈						<u>لـ</u> ق	
	MDN4		-						-+	-	-	+	+	-	-+-		Ĩ			T	Ì	T	
3	Midn-	······································					Da	te		+	-	+	-+				_		+	<u> </u>			•
		7							-+	-		┽	+		+		T	Т	T		1	Ť	•
4	MDN-						L Da	tt					+			\mathbf{f}	1		1	.	 	<u> </u>	
									\neg	-		+	+	-			Г	Ē	्री	Ť	Ť	Ť	•
5	MDN						Da		-	-	_	\dagger	+	-			1	1			1 **	لہ	
						_	Ť	4	1	1	+	╉	+	-			Γ	Ī	Ť	Ť	T	Ī	100
6	MON-						Da	te	-+	+	-	╉	+	-		S						1	長 う しかが
7								ai i	+	-+	+-	+	╈		+		Γ		ſ	T	Ĩ	T	4
• 2	MDN			_			Da		-	+	-	╋	╺╼┿╸	-	-		1	بدل م. آ	t				Σο. φ.4
8				_					1	+		1		1			Γ	T	T	T	T	T	1
	MDN-					_	Da	19			-	\uparrow	+	-	-	144			1				
9							Ĩ											T	T	T	Γ	T	•
	MDN						Ds	tø	-+					-			• • ••••		T				
10							Π		1								Γ		ð 2	Ţ	Ţ	Τ	
3	MDN-						Da	te			-	T		-		ि			T				•

1

₽ R-\$₩M-56B:11/80

Sere.	ease print or type with ELITE type (12 c	FACILITY OU	ARTERLY	R	PC	BT	-	PAR	IJ	100	وز میں				Na drže	م <u>ن محمد ا</u>	2		10.		
38 T				-1			1	9			xvi	. FA	CIL	۲	Y '\$	- i.c	. NO				
	(Items 1 & 2) 🥭 2. RECE	IVED BY				- احدود م					P	A	D	0	7	28	3 4	97	8	9	
X	P A D O D 5 6 9 5 //III. GENERATOR NAME (apoclify)		XIX. GENE Memory York, 1	La	ine	•			(81	reet	or P	<u>0 b</u>	2.71 2.72 2.72		<u>\$[</u>	<u>5</u>	etys.				
	terpillar Tractor Company		MUN.		Yo	rk				نى تەركى بىر ىن		çç	UN	4.64	÷	53	981			·	
	. WASTE IDENTIFICATION	and the second second second second second second second second second second second second second second secon								10						10.000		1.1	_		
LINE NO.	A. DESCRIPTION OF WASTE AN DOCUMENT NUMBER (MDN)		B. Hazardous Wasta Number				C, Handi Metho and Date			D. Amount of Waste						Init Aos-	Wee Trai	ta 1900(porter (14 se No.		
1	Waste Sulfuric Acid - S	Spent		K	0	6 :		т 6	7		4	5	0	0	0	· I	,				
	MDN-						1	Date	0	5	-1	4	-	8	1		in Singing				2
2							-									24					
ł	MDN-			$\left[- \right]$			-	Date					-				19. j. 19. j.				
3		1994		Гļ			1	1			1					T		T		TT	T
	MCN-			┝┥ ┝	 }			Date	 		-	-					,			44	
		Namingan Malaya Ana Ang ang ang ang ang ang ang ang ang ang a	· · · · · · · · · · · · · · · · · · ·			!_ !_	╁		 			+	∳ - +			T		tī			
4						 	ł				, . 	+)))			1⊥	1		
	MON-						-	Cate			-								-	77	-
5														 			-				
	MON-					+	1	Date			-		-			-					
6						+	-				ļ										
}	MDN-					_	1	Date			-		-				9.				
7						+	Ĵ				T	1					1.3		T	Π	-
	MDN-						1	Date			-	+		-	-1		- 	┟─┴	_	4_1	<u>i</u>
-					_	+	$\frac{1}{2}$	-			+	+		-		1				ŤŤ	
8							-	Date			+-	-					<u> </u>	Ļ	<u> </u>		
-	MDN-					7	1				+	+						\vdash		TT	
9							- -			\square	_								j		
	MON-					+		Date			-		-					[· · · · · · · · · · · · · · · · · · ·	
10							\int														
ł	MDN-				-		Ŧ	Date			-		-								
×	XI. COMMENTS (enter information by I	ne number -see inst	ruccio.ns.)	ئى				nt:		2 34 B				πa 	ĩ.					e.e.	ан 1975 - т.

PAGE _____ OF ___ _ 1.

PENNSYLVANIA DE BUREAL	PARTMENT OF ENVIRONMENTAL RESOURCES U OF SOLID WASTE MANAGEMENT ZARDOUS WASTE REPORT MAY 1.3 1951 Natioburg
Please print or type with ELITE type (12 characters/inch)	
•	I. TYPE OF HAZARDOUS WASTE REPORT
	PART A: GENERATOR QUARTERLY REPORT
PLEASE PLACE LABEL IN THIS SPACE	PART B: FACILITY QUARTERLY REPORT
	THIS REPORT IS FOR THE 0 3 - 3 1 - 1 9 8 OUARTER ENDING
1. INSTALLATION'S ID. NUMBER	
P A D 0 7 2 8 4 9 7 8 9	
III. NAME OF INSTALLATION	
A D V A N C E D W A S T E W A T E	RTREATMENT PLANT
IV. INSTALLATION MAILING ADDRESS	
STREET OR P. C	S. BOX
423 WALNUT STREET	
	ST. ZIP CODE
V, LOCATION OF INSTALLATION	NUMBER
CAMERON & ELLIOTT	HARRISBURG
CITY OR TOWN	ST. ZIP CODE COUNTY
HARRISBURG	
VI. INSTALLATION CONTACT	
	PHONE NO. (arma code & no.)
VII. TRANSPORTATION SERVICES USED (for Part A re	
	se services were used during the reporting quarter represented by this report.
CHEMICAL LEAMAN - PAD0847700 AMERICAN TANK LINES - MOD053995 SMITTY'S SPETIC SERVICE - PAD000737	432
VIII. ANNUAL COST ESTIMATES FOR FACILITIES (for	Part B reports only
A. COST ESTIMATE FOR FACILITY CLOSUF	RE B. COST ESTIMATE FOR POST CLOSURE MONITORING AND MAINTENANCE (disposed facilities only)
s I I I, I I I	s
IX. CERTIFICATION	
this and all attached documents, and that based	personally examined and am familiar with the information submitted in d on my inquiry of those individuals immediately responsible for obtaining information is true, accurate, and complete. I am aware that there are
significant penalties for submitting false infor	rmation including the possibility of fine and imprisonment. Paul Gygan 5/4/8/

MAY 1	3	1981	
Junt	. <i>C</i> .	bus	
vann	N	MINN	

Ε	R	٠SW	м	<i>.</i> 66	р.	4	1	/0	•
-	1.0	.014	1.44	-00	•			18	

RESERVE REQUIRADO ER-SWM-55B:11/80 PA, MANIEST Please print or type with ELITE type (12 characters/inch)

MAY 1 3 1981

	ARTERLY R		1-		1 9		T	Τ	xv	1. P	AC	ILT	r Y 1		I.D.	NO			24. 24. 24.
USE ONLY (Items 1 & 2) 2: RECEIVED BY								T		Τ	Τ	T	Τ	T	Π	Π	T	Π	
XVII. GENERATOR'S I.D. NO.	XIX, GENERA	то	R A	DC	RÈ	SS (Str	eet	or	PO	bax	(, cl	ty.	tate	<u>8</u> 2	tip ()	;
	Prepared Sparrows																		
	MUN.									6	ou	INT	Y		Administration and				
XX. WASTE IDENTIFICATION			مر میں میں م				-												
A. DESCRIPTION OF WASTE AND MANIFEST DOCUMENT NUMBER (MDN)	1 - 1 - 1 - 1	laza Vasi	3. ardo te 1.ber	us	Har Mer and Dat		79			. Ar Wa		int		0	i. Un If Me urp		Was	A. H te nspor onse f	rter
	K	0	6	2	17	67	7	T	T	4	7	d	đ	đ	P			Τ	T
Sulfuric Acid Spent	-	╞		-	<u>h</u> t	4	-	-+	+	-+-	┿	+	╇	+	1	L		<u> </u>	Ļ
MDN-330-2-18-81 #H1					Da	te	0	2	-	1	8	- 8	1					د: بر ا	
	K		6	2						4	7	0	d	d	P				
Same		L					-	╘╼╋	_	-+	+	_	+	t	4	il.		_ 	- J
MDN- 330-2-18-81 #H2		$\frac{1}{2}$) 6	2	Da		0	2	- 1	1	3	8	1	×	.	j. T	╞		Υ
	F	+	<u></u>	2						4	7	d	d	d	P				
Same		Ι.	-		De	te			-].	-1	Ţ	Γ			Γ		
MDN 330-2-19-81 #H1) 6	2		┽	0	2	+	1	9	-	8	╇	T	T	\mathbf{H}		Ť
	F								_	4	1	d	d_	d .	P	L	\square	\bot	
Same MDN- 330-2-19-81 #H2		┼─	+		Da	te	0	2	-	I	9	-	8	1					
	k) 6	2							J]			T	Ţ	Π	Τ	
Same	.	+	┼─						-	4	7	<u>d</u>	9	9	P	Ļ	┢┷	<u> </u>	Ļ
MDN- 330-3-4-81 #H1		Ĺ			Da	te	0	3	-	d	4		8		د را محمد ام	: بند		e) any a n	ن سہد
) 6	$\frac{1}{2}$						4	7	d	d	d.	P				
Same			t			ta	-1				Ť		1	1-	-l		┢─┴		سا ب
MDN- 330-3-4-81 #H2		┿	_	-		-	0	3	-+	<u>q</u>	4	+	8	 	Τ-	Ť.	╋┯		T
	-	\uparrow																	
MDN-		-		-	Da	ite	Ī		-	Ţ		-		1		÷			
2		╀╴	┼╌	-	H	+			┿	┽	╺╋	+	+	╉╸	T	T	t		Τ
	F	ļ.	1-			_	_		_	_		_	+	-		Ļ	Ļ		
MDN-		┝	+		Di	ite		j	-			-					I		
					Π				T	Τ	T	Τ	Τ	Τ	Τ	Γ	Π	Т	Τ
		+	+	-					\rightarrow	+	+	+	╋	+-	1	Ŀ	┢┷		1 .
MDN-						ste	_				_		_				╇		े ना
9 0	+-	+	+-	\vdash											{				
		t	1	 	D	ite	_		_	1	+	_	T	T	-	-daman	Γ		
MON- XXI. COMMENTS (enter information by line number-see inst		1	L	L									1		حدف				

9

	FOR OFFICIAL	JARTERLY	<u>' RE</u>	<u>:PO</u>	<u>RT</u>	1	PAR 9	T B			// /				8			-	-		
	USE ONLY (Itoms 1 & 2)	<u>_</u>			1	1	<u> </u>			Î	<u> </u>	T	T	Τ-		<u>Г.</u>	\square	T	7	-	1
×	VII. GENERATOR'S I.D. NO.	XIX, GENE	RA	TOR	AD	DR	ESS	(Str	 001	or	PO	bo:	 ×, c	lty i	itote	لــــل 8 :	للل zìp r	 20da	 .)	1	1
ing ye Versio	P A D 0 0 3 0 1 4 5 6 0	3990 Ea																-			
X	VIII. GENERATOR NAME (specify)	York, P					_														
C	Campbell Chain Company	MUN.			or						T	201	INT					 1-			
-	X. WASTE IDENTIFICATION				0r	ĸ				****							Yoı	. K.		Nijera olim	
LINE NO.	A. DESCRIPTION OF WASTE AND MANIFEST DOCUMENT NUMBER (MDN)		[W.	B. azaro aste umb		M ar	C. andi letho nd ate	ing d	- - -	D). An f Wa	nou sta	Int	مىسى الرەسىي 	[0:	. Un f Me irp	a-	Was	ste nspo	rter	rdou (HW
			K	0	6	21	16	1			4	3	0	d	d -	P			Τ	T	
1	Spent Sulfuric Acid			\pm		1		-+	+	+	-†-	1			1	<u> </u>	4	╞╼╍┻			<u> </u>
{	MDN - PAA0713926		\square	4	-)ate	D	1	_	1	3	-	8	¥		l		 -	÷γ-	
2				-		-															
	MDN-		П	_		- 0	ate	ſ	-	-[Ϊ.	-		Γ				÷,		1
		·		\rightarrow	+	╧		-	-	+	-+-	-+-	+		t	Î			T	T	Ť
3			\square				\square	_	_	_	_	_	_	∔	Ļ		Ľ	j			Ц
.	MDN-						late			-			-							مرهديسنى	
			\vdash	_ 		-												iÌ			
4	-			Ì		╧	late	╋		→	+		_	+	1	ليسيل		k 		-	44
-	MDN-,				╇	┝		-		-+-		+		+-	┢	<u> </u>	\neg			T	
5				\square	1	1	\square				_									1	
}	MDN-		┠╌┼	-+-	+-	- 0	late			-		-	-			•••••				1.7	
				\downarrow	T	┦	Π	T		T	Τ			Τ	1		1	Τ	Τ	T	Π
6			┝─┼	+	+	+		╋	+	┿	+	+	+-	+-	┼─		4	<u> </u>		<u> </u>	ليل گر:
_[MDN-			Ţ	1	1	ate		_		-	-	-	Ļ			\neg			i	
7				-+-	┿	1															
<u> </u>	MDN		[-]	7	-	D	ate	T		-[Τ	-	-								
7						┢		╈		+	┿		+	┼─		Π		T	1	T	Π
8				T]	L			+		-					لي				\square
	MDN-				1-		ate			-		-	-								
9			-	-	F	Ľ		T	T	T								ſ]
					+-	1		-+	+	╈	+-	+	+-	┿╸	†		-				.
_[MDN		-	-	-	Ľ	ate	+	+	+		+	+		<u> </u>					7-	
10					\pm	1															
	won-				+	D	ate		-	-		-	-								
	XI. COMMENTS (enter information by line number-see inst	tructions.)			- <u>-</u>	5						بیدار. مرونین			· 1						

۴.											z	Ħ,	٩Y	13					
P	lease print or type with ELITE type (12 charactors/inch)												· ·	4. J	19{	91			
_	FACILITY QU	ARTERLY	REP	ORT	r -	PAR	ΤВ												
	FOR OFFICIAL		-		- 3	9			xv	1. F.	ACI	LIT	Y'S	I.D.	NO			-	
	(Items 1 & 2) 2. RECEIVED BY							ŀ	T	Τ		Τ	Π		Π	T	T	\prod	and and a second
×	VII. GENERATOR'S I.D. NO.	XIX. GENE	RATO	R A	סס	RESS	(Str	00t	or I	POt	οox,	cit	y sta	te & :	zip (code.	.)		<u>۲</u>
ं	MDD053945432	Rod & Sparro				_		-	-	21	121	0							
	VIII. GENERATOR NAME (specify)	Sparro	ws r	.0TI	ut,	, Ma	ТУJ	Lan	a	4.	1 4 1	. 9							
	Bethlehem Steel Corporation	MUN.								C	SUN	ITY							
°.	A. DESCRIPTION OF WASTE AND MANIFEST		·	~*****	 (с.		و بيدهر ريستان	11	1910-1910 Pic	دار ۸۰۰ ه	متل علام ب	1	an Change, Nga	· ;		PA. H	********* 270°C	inakan Inus
LINE N	DOCUMENT NUMBER (MDN)				ĺ	C. Handi Metho and Date	ing id		D. of	Am Was	oun te	t		E. Un of Mu surp		Was Tra		ter ()	• 1
			КС) 6	2	TIG	7			4	3 0		d	·		\prod	T	Π	T
	Sulfuric Acid, Spent					Date		, .		1 9	1	8	F	, 	-		-	<u> </u>	
	MDN- 690-01-19-81 #1		K C	6	2				+		1	0	\dashv			-			-
2	Same								_	4	<u>3 c</u>		q	P				\square	
	MDN- 690-01-20-81 #1					Date		1 -	-	2 () -	8	1	-3-				-	******
3			КC	6	_2					4		0		p	.				
	Same					Date	Î	1 -	_	2]_						<u></u>		
7	MDN- 690-01-20-81 #2		KC) 6	-2		_	1	-	2 (1	8			\square		7	Π	T
4	Same			\square	\square		_		-	4		0	d	Р					
	MDN- 690-01-23-81 #1					Date		1 -	-	2 2	2 -	8	1		<u> </u>		_		
5 5	_		КC	6	2					4 3	a c	d	d	P	1.				
	Same				1	Date		1 -	- ,	23	1_	8	,			╎──┸┙		Arren des	
	MDN- 690-01-23-81 #1		KC	6	7		-+	4	-		-						7		<u> </u>
6	Same				1				_	4 :		d	d	Р	Ц	\square		\square	Ļ
÷ .	MDN- 690-01-23-81 #2			┼╍┼	-	Date		1 -	- :	2 3	-	8	1						i de la composición de la comp
1				\square	\square		Τ		T				Τ		·	\square	Τ	\prod	Τ
7				$\left \right $	Ⅎ	Date	-+		+	+			┽		-				
	MDN-				7		-	╺┼╸	-	<u> </u>			-					γ γ	
8				╎──┤╴	-														
	MON-				Ţ	Date		-	-		-			*****				6	1000-100°
·				┝━┼	╈		+		+	+		\vdash	-†			T	7	Π	Т
9				\square	$\overline{+}$		-		┿			-+							
	MDN-				-	Date		-	-		-								
10				$\left - \right $	-						$\left[\right]$								
					1	Date		-	-	Ť	-		1	ار ـــــالمحم)R-1	
	MDN	ructions.)			4	5			1-	<u> </u>				 				many Materia	
							-	ومؤدولا فله				بندان زر	فر الوحالي	-	Mit ang Shing	NG Sa Dai	an far tin an	-	1999-1999 (M
																			,

Ĺ.	H-514	M-656	E'i	1/80

<u>،</u> ۱



MAY 1	3	1981
-------	---	------

κ.,

	FACILITY OL	ARTERLY	<u>' R</u>	EP(<u>)R</u> 1	ſ	PAR	ТЕ	<u> </u>						المشاركة في						
	FOR OFFICIAL					•	1 9			×١	(1. F	AC	LIT	Γ Υ' 5	1.	D. NO	J.		۰. هم دس		
	USE ONLY (Items 1 & 2) 2. RECEIVED BY																	Ţ		1	
	VII. GENERATOR'S I.D. NO.	XIX. GENI	FRA	то	R A	םם.	RESS	(St	roet	or	PO	box	, ci	ty si	lste i	& zip	cod	o.)			
	PADOO3025277	1 Cumbe			1 S	St:	reet														
<u> </u>	(VII). GENERATOR NAME (specify)	Lebanon	ι,	PA																	
	Bethlehem Steel Corporation	MUN. I	eb	an	on						c	:00	NT	Y'	Le	eban	on				
	X, WASTE IDENTIFICATION		<u>سب</u>																n		999 albert
NO	A. DESCRIPTION OF WASTE AND MANIFEST DOCUMENT		1+	B łaza		15	C. Handl Metho	ing								Unit	Wa	ste	Hazo	. .	• •
LINE	NUMBER (MDN)			Vasti Jum		.	and Date			0	. An Wa	nour ste	t	÷	of	Məa- 'P			orter e No.		NT) ·
			K	0	6	2	16	7					T	T			Î	\square		T	T
1	Sulfuric Acid, Spent		┝		-		10		-+	+	-+-	+		0	<u>l</u>	P	$\left\{ - \right\}$				1
14	MDN PAA0308980						Date		2	-	0	<u>) -</u>	8	3 1					<u>.</u>		-
2			K	0	6	2					5 0	ol c		0 0		P					
. म इन्हें इस्	Same		E				Date		2		Ť	+	+		┝╼╍┥		\top			- 	- L
art N	MDN- PAA0309002			0	6		0010		4	-	1	1 - +-	8					-		-	-
3			Ľ			Ź					4	7 6	5 0	0 0		P '					
	Same MDN- PAA0307506		┢			4	Date		2	-	1	3 -	8	3 1	•						
	11110307300	·	K		6	2		\neg	+				1				'n		1	T	Τ
4	Same	┝╍┼╍┼╍┨╾┵╸┥							-+	+	4	5 8	3 2	+ 0		P	\square	_		4	<u> </u>
P	MDN- PAA0307521					┨	Date		2	-	2	7 -	8	3 1	ļ		<u> </u>				Yesting
5			K	٥	6	2					4	5 C				Р					
	Same				-+	1	Date				1					<u>*</u>	ĺ			-	-
	MDN- PAA0307576			0	6			\rightarrow	2	+	2	7	8	1		1.	h	-	<u></u>	T	Τ
6						1		_			4	<u>5 c</u>		0 0		P	Ļ			L	
	Same MDN- PAA0307580				-+	-	Date		2	-	2	7 -	8	1					`		
			K	0	6	2		T		1				\Box		ŀ	\square			Γ	
7	Same				-			+	-+-	+	2	<u>5 (</u>		10		<u>P</u>	$\left\{ - \right\}$			1	L
-	MON- PAA0 30 7 5 9 1					1	Date		3	_	0	6	8				 				~~
8			K	٥	6	4					4	5 1		1		P					
	Same MDN PAA0307602					1	Date		7	-	d	9 -	8	1			i K				4
	MDN- PAA0 307602		ĸ	-	6	7	$\neg \uparrow$	+	╉	+	7-	-	\vdash	\vdash		1	Π	7	1	Ţ	Г
9	Sama			_	_	-		_			4	5 0				pl	\square				L
	Same MDN PAA0307845			-	╉	-	Date		3	-	1	1 -	8	1	-						
10			к	0	6	4	\square			T	4	<u>م</u>			- 1		Π			Γ	Γ
	Same					\pm	Date	╶╊	1		+	1_		\square		PI	┟─┴			k	<u> </u>
	MDN- PAA0307856 xxi. COMMENTS (enter information by line number-see inst	ructions)				1	- are		3	_	1	4	8			, . 	I	***			ه هېسوه و ز
							S		يتحاقيق و	-	ينتين/ني	a the second second	-		-	يون ال والعي		-	بالتبراغانين	فىجىدە 1	pan-lain :

. · ·	
+E R-5%/iss.,	101/80

.

Please print or type with ELITE type (12 characters/inch)

MAY 1 3 1981

FACILITY OU	ARTERLY	REPOP	17 -	PAR	TE	3		<u></u>			••••				ورجون	,		· ·	
USE ONLY		-	-1	1 9			X	/1. (FA	СП		Y'8	3	I.D.	NC).		k. Brijensk	
(items 1 & 2) 2. RECEIVED BY																			L
XVII. GENERATOR'S I.D. NO. P A D O 3 O 2 5 2 7 7 XVIII. GENERATOR NAME (specify) S	XIX. GENE One Cu Lebano	mberla					or	<u>P0</u>	ba	<u>, x,</u>	cit	<u>y </u>	tate	&	zip	<u>cod</u>	.)		
Bethlehem Steel Corp.	MUN. L	ebanor	1		_			6	co	UN	iΤγ	<i>i</i> .	Le	ba	ino	n			
XX. WASTE IDENTIFICATION A. DESCRIPTION OF WASTE AND MANIFEST DOCUMENT NUMBER (MDN)		B, Hazarda Waste Number		C. Handl Metho and Date	ling	• •••• ••	0). Ar f Wa	noi	unt			0	, Ui f M Jrp	nit 98-	Wa Tra	ste	orter	rdous (HW
Sulfuric Acid Spent		КОС	5 2	TT6 Date		3		4	5	- -	8			F	,				
MDN - PAA0 30 7860		кое	5 2				-	┽	1	-			{-	Τ	Τ	\square	7	<u>-</u>	П
Same				Date	0	-		4	4	- 3		T	-	E	2			<u> </u>	
MDN- PAA0307613		КОЕ	2			3	+	4	7	\neg	8			**** 	İ.	П	-	T	П
Same				Date	0		_	4	5		à		<u> </u>	F				<u></u>	11
MDN- PAA0307624		кое				3	+	2	6	_	8			1	T		T	1	
Same				Date				4	5	0		<u>```</u>	-	P	1				
MDN- PAA0308792				Juli	d	3	+	3	1	-	8		┝	Γ	T	-	<u> </u>	T	11
				Date				+	┽	_			<u> </u>	<u> </u>					
MDN-				Dute				+		-			{-		1.		T	1	
				Date		-	+		_				-	1		$\left \perp \right $		<u> </u>	Ц
MDN-			\square	Date	-	_		+	+		-				1.			T T	TT
						-+-	+	+	-	_									
MDN-			F	Date			+		+	-			-						ŢŢ
					_	_	+-		_	-					<u> </u>	ļ			
MDN-				Date			-			-	_		ļ		,	 	-	—	TT
	ł				_		╞		-	-+			 						Ц
MDN				Date	-	- -	-	4	-	-		_			1		- <u>1-</u>	• ••	T
	ļ				_	_	+	_			_							<u> </u>	Ц
MDN-				Date		-	-			-							18 1 18		
XXI. COMMENTS (enter information by line number-see inst	ructions.)			2	-		-		-	-			-	نده من •	, in call			Na Maria Na Maria Na Maria Na Maria Na Maria Na Maria Na Maria Na Maria Na Maria Na Maria Na Maria Na Maria Na Na Maria Na M	

									TE HYDROFLOURIC, NITRIC SPENT PICKLE LIGUOR. TE FURIC ACID MIXTURE HF NITRIC AND SULFURIC 1-000000030503	NE HYDROFLOURIC. NITRIC SPENT PICKLE LIQUOR. 02	ACLETYS 1.D. NO. XIII. FACILITY ADDRESS PO BOX 222 NUSTRIAL WASTES INC NEW BRIGHTON. PA 15066 DOT CLAS	
	rende um alterna de de constante en entre a constante a ser a constante a constante a constante a constante a c					· · · ·			02 K062	02 K062	DOT WASTE	
		a definition of the second sec	· · · · · · · · · · · · · · · · · · ·	· · · ·					2 46050 p	2 47700 P	E AMOUNT CLUN	umbaga 44 73
		• • •	· · · · · · · · · · · · · · · · · · ·	. nanosna relat	a waa calada a	- Destante	2 . 4	l an state and			IT LICENSE	10 NO.

	SEPA NOTIFICATION OF HAZARDOUS WASTE ACTIVITY label, affix it in the space at left. If any of
	INSTALLA- TION'S EPA I.D. NO. I. STALLATION I. STALLATION I. STALLATION INSTALLATION INSTALLATION INSTALLATION INSTALLATION INSTALLATION INFORMATION INSTALLATION INFORMATION INSTALLATION INFORMATION INFORMATION INSTALLATION INFORMATIO
	IL MAILING IL ADDRESS PLACE I ABEL IN THIS SPACE State of his of a transfer of his pase of
	III OF INSTAL- LATION DATION DATE AND AND TS THE WAY AND TS CATION PROFESSION AND THE Resource Conservation
ACH	COMMENTS
A D E 1	CPLSSEE ATTACHED COMMENTS
1 1 1 1	INSTALLATION'S EPA I.D. NUMBER APPROVED DATE RECEIVED (yr., mo., & day) F P A D 0 7 2 8 4 9 7 8 9 3 1 12 14 15 13 14 15 14 15
	I. NAME OF INSTALLATION
	HARRISBURG WASTEWATER TREATMENT PLANT
	II. INSTALLATION MAILING ADDRESS
	STREET OR P.O. BOX
4	
	$\frac{1}{15} \frac{1}{16} \frac$
. — .	
, — <u>,</u>	
:	c 5 F R A N K L I N S T 10 13 IIS 45 CITY OR TOWN ST. ZIP CODE
	$\frac{c}{5} F R A N K L I N S T$ $\frac{c}{13} 18$ $\frac{c}{6} S T E E L T O N$ $\frac{c}{15} 11 + \frac{c}{15} + $
	$ \begin{array}{c c} \hline c \\ \hline 5 \\ \hline F \\ R \\ \hline A \\ N \\ \hline K \\ L \\ I \\ N \\ \hline S \\ \hline C \\ \hline T \\ \hline C \\ \hline S \\ \hline C \\ \hline S \\ \hline C \\ \hline S \\ \hline C \\ \hline S \\ \hline F \\ \hline C \\ \hline C \\ \hline C \\ \hline S \\ \hline C \\ $
	$ \begin{array}{c c} \hline c \\ \hline 5 \\ \hline F \\ \hline R \\ \hline A \\ \hline N \\ \hline K \\ \hline L \\ \hline I \\ \hline S \\ \hline T \\ \hline C \\ \hline C \\ \hline T \\ \hline O \\ \hline S \\ \hline T \\ \hline E \\ \hline L \\ \hline T \\ \hline O \\ \hline N \\ \hline N \\ \hline M \\ \hline \hline M \\ \hline M \\ \hline \hline M \\ \hline \hline M \\ \hline M \\ \hline \hline M \\ \hline \hline M \\ \hline \hline M \\ \hline \hline M \\ \hline \hline M \\ \hline \hline M \\ \hline \hline M \\ \hline \hline M \\ \hline \hline M \\ \hline \hline M \\ \hline \hline \hline M \\ \hline \hline \hline M \\ \hline \hline \hline \hline$
	$\frac{c}{5} F R A N K L I N S T$ $\frac{c}{13} I = \frac{c}{16}$ $\frac{c}{6} S T E E L T O N$ $\frac{c}{6} S T E E L T O N$ $\frac{c}{15} I = \frac{c}{15} I = \frac$
	$\frac{c}{5}FRANKLINST CITY OR TOWN ST. ZIP CODE CITY OR TOWN ST. ZIP CODE CITY OR TOWN ST. ZIP CODE CITY OR TOWN ST. ZIP CODE PA 1 7 0 9 2 ST. ZIP CODE PA 1 7 0 9 2 ST. ZIP CODE PA 1 7 0 9 2 ST. ZIP CODE PHONE NO. (area code & no.) CITY OR TOWN ST. ZIP CODE ST. ZIP $
	$\frac{c}{5} F R A N K L I N S T$ $\frac{5}{13} I = \frac{45}{16}$ $\frac{c}{6} S T E E L T O N$ $\frac{c}{6} S T E E L T O N$ $\frac{c}{13} I = \frac{45}{12}$ $\frac{c}{13} I = \frac{10}{12}$ $\frac{c}{13} I =$
	$\frac{c}{5} F R A N K L I N S T$ $\frac{c}{5} F R A N K L I N S T$ $\frac{c}{5} F R A N K L I N S T$ $\frac{c}{5} F R A N K L I N S T$ $\frac{c}{5} F R A N K L I N S T$ $\frac{c}{5} F R A N K L I N S T$ $\frac{c}{5} F R A N K L I N S T$ $\frac{c}{6} S T E E L T O N$ $\frac{c}{1} S T E E L T O N$ $\frac{c}{6} S T E E L T O N$ $\frac{c}{6} S T E E L T O N$ $\frac{c}{6} S T E E L T O N$ $\frac{c}{6} S T E E L T O N$ $\frac{c}{6} S T E E L T O N$ $\frac{c}{6} S T E E L T O N$ $\frac{c}{6} S T E E L T O N$ $\frac{c}{7} S T E E L T O N$ $\frac{c}{7} S T E E L T O N$ $\frac{c}{7} S T E E L T O N$ $\frac{c}{7} S T E E L T O N$ $\frac{c}{7} S T E E L T O N$ $\frac{c}{7} S T E E L T O N$ $\frac{c}{7} S T E E L T O N$ $\frac{c}{7} S T E E L T O N$ $\frac{c}{7} S T E E L T O N CONTACT$ $\frac{c}{7} S T E E L T O N CONTACT$ $\frac{c}{7} S T E E L T O N CONTACT$ $\frac{c}{7} S T E E L T O N CONTACT$ $\frac{c}{7} S T E E L T O N CONTACT$ $\frac{c}{7} S T E E L T O N CONTACT$ $\frac{c}{7} S T E E L T O N CONTACT$ $\frac{c}{7} S T E E L T O N CONTACT$ $\frac{c}{7} S T E E L T O N CONTACT$ $\frac{c}{7} S T E E L T O N CONTACT$ $\frac{c}{7} S T E E L T O N CONTACT$ $\frac{c}{7} S T E E L T O N CONTACT$ $\frac{c}{7} S T E E L T O N CONTACT$ $\frac{c}{7} S T E E L T O N CONTACT$ $\frac{c}{7} S T E E L T O N CONTACT$ $\frac{c}{7} S T E E L T O N CONTACT$ $\frac{c}{7} S T E E L T O N CONTACT$ $\frac{c}{7} S T E E L T O N CONTACT$
	$ \begin{array}{c} \overset{\circ}{5} \mathbf{F} \mathbf{R} \mathbf{A} \mathbf{N} \mathbf{K} \mathbf{L} \mathbf{I} \mathbf{N} \mathbf{S} \mathbf{T} \\ \overset{\circ}{5} \mathbf{F} \mathbf{R} \mathbf{A} \mathbf{N} \mathbf{K} \mathbf{L} \mathbf{I} \mathbf{N} \mathbf{S} \mathbf{T} \\ \overset{\circ}{5} \mathbf{T} \mathbf{E} \mathbf{E} \mathbf{L} \mathbf{T} \mathbf{O} \mathbf{N} \\ \overset{\circ}{6} \mathbf{S} \mathbf{T} \mathbf{E} \mathbf{E} \mathbf{L} \mathbf{T} \mathbf{O} \mathbf{N} \\ \overset{\circ}{5} \mathbf{S} \mathbf{T} \mathbf{E} \mathbf{E} \mathbf{L} \mathbf{T} \mathbf{O} \mathbf{N} \\ \overset{\circ}{5} \mathbf{I} \mathbf{E} \mathbf{E} \mathbf{L} \mathbf{T} \mathbf{O} \mathbf{N} \\ \overset{\circ}{5} \mathbf{I} \mathbf{I} \mathbf{E} \mathbf{E} \mathbf{L} \mathbf{T} \mathbf{O} \mathbf{N} \\ \overset{\circ}{5} \mathbf{I} \mathbf{I} \mathbf{I} \mathbf{I} \mathbf{I} \mathbf{I} \mathbf{I} $
	$ \begin{array}{c} \hline S \\ \hline S \\ \hline T \\ \hline I \\ I \\$
DETACH	$\frac{c}{S} \overrightarrow{F} \overrightarrow{R} \overrightarrow{A} \overrightarrow{N} \overrightarrow{K} \overrightarrow{L} \overrightarrow{I} \overrightarrow{N} \overrightarrow{S} \overrightarrow{T}$ City or town $\frac{c}{S} \overrightarrow{I} \overrightarrow{I} \overrightarrow{I} \overrightarrow{I} \overrightarrow{I} \overrightarrow{I} \overrightarrow{I} I$
	S F R N K L I N S T Z CITY OR TOWN ST. ZIP CODE P A 1 7 0 9 2 F R N K L IN S T ZIP CODE C ST. ZIP CODE P A 1 7 0 9 2 ST. ZIP CODE F <
	S F R A K L IN S T III III III IIII IIII IIIIIIII IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII
	$\frac{c}{S} F R A N K L I N S T$ $\frac{c}{S} F R A N K L I N S T$ $\frac{c}{S} F R A N K L I N S T$ $\frac{c}{S} F R A N K L I N S T$ $\frac{c}{S} F R A N K L I N S T$ $\frac{c}{S} F R A N K L I N S T$ $\frac{c}{S} F R A N K L I N S T$ $\frac{c}{S} F R A N K L I N S T$ $\frac{c}{S} F R A N K L I N S T$ $\frac{c}{S} F R A N K L I N S T$ $\frac{c}{S} F R A N K L I N S T$ $\frac{c}{S} F R A N K L I N S T$ $\frac{c}{S} T E E L T O N$ $\frac{c}{S} T E E C T E E L E E T O N$ $\frac{c}{S} T E E C T E E E T O N T E E E T E E C T E E E T E E E T E E E T O N C E E E E E T E E E T E E E T E E E $
	S F R A K L IN S T III III III IIII IIII IIIIIIII IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII
	S F R N K L IN S T S F R N K L IN S T S T E L T N S T Z P ODE ST Z

III. PROCESSES

We intend to use waste pickle liquor for phosphate removal in our advanced treatment system. This waste liquor was tested for three weeks in June of 1980 and has proven to be more efficient in the removal of phosphates, suspended solids and 5 day B.O.D. than that resulting from alum usage. The waste pickle liquor was rendered harmless and non-hazardous by this process since the iron is removed as an iron-phosphate sludge and the acidity was neutralized.

We do not intend to accept hazardous wastes for treatment, however, we cannot quarantee the type of wastes we may receive and process in the future. Since the City incinerator and steam generating plant might be a hazardous wastes processor and all liquid wastes from these facilities are discharged into the city sewer system, our status as a non-hazardous treatment facility may change in the future. This facility has previously been coded out of the Hazardous Treatment Program.

N. PACILITY CONTACT A. HAME & TITLE (Task, first, & HITE) S. FHONE (area code & no.) S. FOUNTY NAME (area code & no.) S. FOUNTY (AREA code & no.) S. FOUNTY (AREA code & no.) S. FOUNTY (AREA code & no.) S. FOUNTY (AREA code & no.) S. FOUNTY (AREA code & no.) S. FOUNTY (AREA code & no.) S. FOUNTY (AREA code & no.) S. FOUNTY (AREA code & no.) S. FOUNTY (A	Please print or, type in the unshaded areas only (fill=in areas are spaced for elite type, i.e., 12 characters/inch	14	1 North	Form Approved OMB No. 1	58-R0175
Provide and the second se	GENA GENI	ERAL INFORMA	ATION	The second second second second second second second second second second second second second second second s	1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-
Part (2) Holison Holison Holison	GENERAL SEFA	oneolideted Permits Pro General Instructions" b	gram store storting.)	DIS T	Contraction (Statements) and A ()
HUR ACTURY WARD Young and a service of the	L'Epar D'HOMMEN	1111	11111	If a preprinted label has b	een provided, eff
YALLING ADDRES PLEASE PLACE LABEL IN THIS SPACE PLEASE PLACE SPACE PLEASE PLACE SPACE PLEASE PLACE SPACE PLEASE PLACE SPACE PLEASE PLACE SPACE PLEASE PLACE SPACE	11/ A / Bunk Triacon	11711	11111	stion carefully; if any of it shrough it and enter the	t la Incorrect, cro
AALLING ANDRESS PLEASE PLACE CARE TIN THIS SPACE Andress and a strain the construct is a construct in and answer book of the construct is a construct in and answer book of the construct is a construct in	11111 Total	11111	11/11	the preprinted deta is abea	in iting area to B
PACULATION Intern 4 III, V. et al. II. Research 2. A second and the second seco		ACE LABEL IN T	HIS SPACE	that should appear), plass proper fill-in area(s) beig	w. If the label
The Control of the second provided Refer to the second secon	<u> </u>	1111	11111	items I, III, V, and VI (except VI-8 which
IL POLLUTANT CHARACTERISTICS IL POLLUTANT IL POLLUTANT CHARACTERISTICS IL POLLUTANT IL POLLUTANTT IL POLLUTANT IL POLUTANT IL POLLUTANT IL POLUTANT IL POLLUTANT	VA LOCATION	1111	11/11	items if no label has been the instructions for deta	provided. Refer
HTTPLETPUS: Complete A descript of the determine whether you made to automit any parmit application forms to the EPA If you same "you" to any parmits application forms to the EPA If you same "you" to any parmits any the determine of the application of the app	VIIIIXIVIII	11111	++++1	tions and for the legal as which this data is collected.	morizations und
paselong, yes want the fors and the supplemental form field in the parenthesis following the question. Math "X" in the box in the third column form a supplement from a statistical H yes and the supplementations. See also, Section D of the instructions for definitions of beld-fixed terms. Parents and the form permit requirements; as Section C of the instructions. See also, Section D of the instructions for definitions of beld-fixed terms. Parents and the form permit requirements; as Section C of the instructions. See also, Section D of the instructions for definitions of beld-fixed terms. Parents and the form permit requirements; as Section C of the instructions. See also, Section D of the instructions for definition of the distribution of the distr		chathar upp pand to su	then any name and letting	forms in the FPA If you and	wit "west" to soy
The social frame parameter equivalence of the sector of th	quasilons, you must submit this form and the supplement	tal form listed in the p	parenthesis following the que	stion. Mark "X" in the box in	the third column
A is the facility operating countercount the facility facility and production facility which currently require in standard production facility which currently require in standard production facility which currently require in standard production facility which currently require in standard production facility which currently require in standard facility facility require and and the facility facility require and the LSC (FORM 28) A or a Booyer which facility require in the facility facility industrial or in a standard facility facility industrial or in a standard facility facility industrial or in a standard facility facility industrial or in a standard facility facility industrial or in a standard facility facility industrial or in a standard facility facility industrial or in a standard facility facility industrial or in a standard facility facility industrial or in a standard facility facility industrial or in a standard facility facility industrial or in a standard facility facility industrial or industrial or industrial or industrial or industrial or industrial or industrial or industrial or industrial or industrial or industrial or industrial or industrial or industrial or industrial or industrial or industrial or industrial or industrial energy facility industrial or industrial energy facility industrial or industrial energy facility industrial or industrial energy facility industrial en	le axcluded from permit requirements; sea Section C of the	Instructional See also,	Section D of the instruction	s for definitions of bold—faced	terma
which months (b) a submarge to writer of the UAS) X In the submarge state of the UAS (PORM 28) X In the submarge state of the UAS (PORM 28) X In the submarge state of the UAS (PORM 28) X In the submarge state of the UAS (PORM 28) X In the submarge state of the UAS (PORM 28) X In the submarge state of the UAS (PORM 28) X In the submarge state of the UAS (PORM 28) X In the submarge state of the UAS (PORM 28) X In the submarge state of the UAS (PORM 28) X In the submarge state of the UAS (PORM 28) X In the submarge state s					
C LINK of Schlig which corrently reads in discharges to weak of Sau U.S. other then these discharges to the A or B skowl IFORM 2C E. Does or will this facility industries of the U.S. of the Sau U.S. or discours of X and B skowl IFORM 2C E. Does or will this facility industries of the U.S. of the Sau U.S. or discours of X and the U.S. of the Sau U.S. or discours of X and the U.S. of the Sau U.S. or discours of X and the U.S. of the Sau U.S. or discours of X and the U.S. of the Sau U.S. or discours of X and the U.S. or will you inject at Different spin facility industries (I CON 40 or will you inject at Different spin facility industries (I CON 40 or will you inject at Different spin facility industries (I CON 40 or will you inject at Different spin facility industries (I CON 40 or will you inject at Different spin facility industries (I CON 40 or will you inject at Different spin facility industries (I CON 40 or will you inject at Different spin facility industries (I CON 40 or will you inject at Different spin facility industries (I CON 40 or will you inject at Different spin facility industries (I CON 40 or will you inject at Different spin facility industries (I CON 40 or will you inject at Different spin facility industries (I CON 40 or will you inject at Different spin facility industries (I CON 40 or will you inject at Different spin facility industries (I CON 40 or will you inject at Different spin facility industries (I CON 40 or will you inject at Different spin facility industries (I CON 40 or will you inject at Different spin facility industries (I CON 40 or will you inject at Different spin facility industries (I CON 40 or will you inject at Different spin facility industries (I CON 40 or will you inject at Different spin facility industries (I CON 40 or will you inject at Different spin facility industries (I CON 40 or will you inject at Different spin facility industries (I CON 40 or will you inject at Different spin facility industries (I CON 40 or will you inject at Different spin facility ind	which results in a discharge to waters of the U.S.?		include a concentrated a	inimal fielding operation or in facility which results in a	X
A of B shored LFORM 2C) E. Does or will this facility treat, store, or dispose of heardeness of the Value for the Value of the Value o	C. Is this a tacility which currently results in discharges		D. Is this a proposed facility	fother than those described	
According senders (FORM 3) A A	A or B show! IFQBM 2C)	. 84 . 12	maters of the U.S.7 (FOR	M 2D)	the second second second second second second second second second second second second second second second se
G. Do you or will you inject at this facility any produces in an annual set of the facility fulled for setural set of the facility fulled for setural set of the facility fulled for setural set of the facility fulled for storage of liquid	hexardous wester? (FORM 3)	x	taining, within one que	rter mile of the well bare,	
An address for mining of minerals, in situ combus- series for mining of minerals, in situ combus- series of mining of mining of mining of mining of mining of mining series of mining of mining of mining of mining of mining	water or other fluids which are brought to the surface	1000	H. Do you or will you injec	t at this facility fluids for spe-	11 34 31
Wetrocktons/ FORM 4) Image: Second state of the second state	duction; inject fluids used for enhanced recovery of	X	process, solution mining	of minerals, in situ combus-	×
The form of any and policitative mill 100 tone den var da and any activitative mill 1280 tone den var da and any activitative mill 1280 tone metalement send (FORM 5) III. NAME OF FACILITY III. NAME OF FACILITY A. HAME & TITLE (IAII. first, & HIR) III. ANAME OF FACILITY A. HAME & TITLE (IAII. first, & HIR) III. ANAME OF FACILITY A. HAME & TITLE (IAII. first, & HIR) III. ANAME OF FACILITY III. ANAME & TITLE (IAII. first, & HIR) III. ANAME OF FACILITY A. HAME & TITLE (IAII. first, & HIR) III. ANAME OF FACILITY A. HAME & TITLE (IAII. first, & HIR) III. III. III. III. III. III. III. III	hydrocarbons? (FORM 4) I. Iz this facility a proposed stationary source which is		J. Is this facility a propose	d stationary source which is	17 10 IA
MILANNE OF FACILITY HIL NAME OF FACILITY HIL NAME OF FACILITY HAR DE ISBURG STEAM GENERATING FACILLITY A. HAME & TITLE (Idel, first, & tille) A. HARE & TITLE (Id	structions and which will optantially amit 100 tons		instructions and which w	ant regulated under the Clean	X
HARRISBURG STEAM GENERATING FACILITY A HAME & TITLE (Last, first, & HIRE) A HARRING ADDRESS A BTREET ON NO. BOX A HARRING ADDRESS A BTREET ON NO. BOX A	attainment grap? (FORM 5):		Air Act and may affect o arus? (FORM 5)	or be located in an attainment	
A. HAME & TITLE (Task, first, & Hille) A. HAME & TITLE (Task, first, & HILL) A. HAME & TITLE (TASK, TASK,	and the state of the state of the state of the state of the state of the state of the state of the state of the	MGENER	ATING TA	CULTY	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
SKARPER JACK SUPERINTENDENT TIT 255 6495 A STREET ON P.O. BOX SIGTO SOUTH I 9TH STREET B HARRISTON C.STATE D. ZHP CODE SIN SCITY ON TOWN C.STATE D. ZHP CODE SIN STREET, NOUTS NO. ON OTHER SPECIFIC IDENTIFIEN SIN STREET, NOUTS NO. ON OTHER SPECIFIC IDENTIFIEN SIN SCOUNTY NAME DAUPHIN	CITY IS CAN IN COMPANY AND A COMPANY AND A COMPANY AND A COMPANY AND A COMPANY	TI OLIVILA	A.1.1.48. 17		10
A. STREET OR N.O. BOX A. STREET OR N.O. BOX A. STREET OR N.O. BOX A. STREET OR N.O. BOX A. STREET OR N.O. BOX C. STATE D. ZIP CODE A. STREET, DUTE NO. OR OTHER SPECIFIC IDENTIFIER A. STREET, IDUTE NO. OR OTHER SPECIFIC IDENTIFIER S. COUNTY NAME D. COUNTY NAME D. COUNTY NAME	A. HAME & TITLE (lasi, fir		111111111	PHONE (area code & no.)	C. C. C.
A STREET ON P.O. BOX SIGURATION A. STREET ON P.O. BOX S. CITY ON TOWN C.STATE D. ZIP CODE C.STATE D. ZIP C.STATE	IN U	INTENDE	NT TI	7 255 6195	· · · · · · · · · · · · · · · · · · ·
ALLE ACIENTY OR TOWN C.STATE D. ZIP CODE ALLER D. ZIP CODE A. STREET, NOUTE NO. OR OTHER SPECIFIC IDENTIFIER 51670 SOUTH, 1975 STREET B. COUNTY NAME DAUPHIN		BOX MANAGEMENT	- Area		14 - 14 M
B. CITY OR TOWN C. STATE D. ZIP CODE A. BTREET, INDUTE NO. OR OTHER SPECIFIC IDENTIFIER DAUPHIN B. COUNTY NAME DAUPHIN H		TREET	*****	1	
N ET AL DE A			C.STATE D. ZIP COL		3
A. STREET, HOUTE NO. OR OTHER SPECIFIC IDENTIFIER 51670 SOUTH, 1977 STREET B. COUNTY NAME DAUPHIN	II R	· · · · · · · · ·	PA 1710	4	
DAUPHIN	A. STREET, BOUTE NO. OR OTHER S	PECIFIC IDENTIFIER		and the second second	
DAUPHIN	BIETO SOUTH 19TH S	TREET	11111	1. 1. Store 12. 7	- 1 - 1 - 1 - 1 - 1
H H			12	100 - X 10	S Seller M.
	DAUPHIN	· · · · · · · · · · · · · · · · · · ·			a series
	e TTTTTTTTTTTTTTTTTTTT		7 15 1	- manopan	17572
BHARRISBURG	ND IT COMPANY			to the start	NUE ON REVER

THE R. P. LEWIS CO., LANSING MICH.	FIRST		SICOND
Statement of the second second second second second second second second second second second second second se	SYSTEMS	The pecify NA	FOUNTH .
(specify) NA		α 7 7 N Δ	
OPERATOR INFORMATION	A. NAME		B. Ja the Network Distance Dis
	RRISBURG	No. I Tomes works	D. PHONE (crus sode \$ no.)
FEDERAL M - PUBLI STATE O = OTHE PRIVATE	IC (other than federal or state)	ecify)	717 255 649
10 30 UTH	19 TH STREET		
ARRISBURG	11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	0 AVATE N. 21P CODE IX PA 17104	INDIAN LAND the tectility located on Indian lands?
ISTING ENVIRONMENTAL P	Ar with an O with a line of the second second second second second second second second second second second se		
A. NEDER (Discharges to Surfa	Ce Water) D. PSD (Alr Emilations)	premi Programili Souriese)	
B. UNC /Underground Injection	ST. NA	(apecify)	
PADSO0430	and the same of th	ispecify) (specify)	
AP	pographic map of the area extending to		
outline of the facility, the i tment, storage, or disposal	location of each of its existing and pr facilities, and each wall where it inject as instructions for precise requirements	opored inteks and discharge spy its fluids underground. Include a	charge, used of its hezardous wast
NATURE OF BUSINESS (provid		MAGE BRENING	IN WATER WALL
NATURE OF BUSINESS (provid) ISPOSAL DE	SOLID WASTE BY I	Mass BURNING	IN WATER WALL
NATURE OF BUSINESS (provid		Mass Burning	IN WATER WALL
ATURE OF BUSINESS (provid		Mass Burning	IN WATER WALL
ATURE OF BUSINESS (provid		Mass Burning	IN WATER WALL
CERTIFICATION (top Instruct	SOLID WASTE BY I		
CERTIFICATION (see instruction and that, based of the formation of the for	and that I have personally examined und an in my inquiry of those persons imme information is true, accurate and com	n famillar with the information o	ubmitted in this spojication and a
CERTIFICATION (see instruction artify under panalty of law artify under panalty of law	and that I have personally examined and at in my inquiry of those persons imme information is true, accurate and compossibility of time and imprisonment. or ppint/ B. SIGNATO	n famillar with the information a sciencely responsible for obtainin plets. I am evera that there are	ubmitted in this spolication and a the information contained in the significant penaltics for sponittic c. DATE SIGNED
CERTIFICATION (see Instruction activity under panality of law achiments and that, based of plication, i believe that the i	and that I have personally examined and an information is true, accurate and com- possibility of fine and imprisonment. BEL T H.S.G.F.	n famillar with the information a sciencely responsible for obtainin plets. I am evera that there are	ubmitted in this spolicities and a the information contained to d significant penalties for submittin

Ilill-in areas ai	type in the unshad respaced for elite t	ype, i.e., 12 c	Contraction of the second second second second second second second second second second second second second s	-					-	Farm Approved OMB N	The local division in which the	04
BRCRA	EPA	HAZA	S. ENVIRONM RDOUS W/ Conso	AST	PER	MIT /	APP	LICA	TION	FPADOOO	4306	86
the second second second second second second second second second second second second second second second s	AL USE ONLY							-	MMENTS		1	1
APPROVED	(yr, mo, 8 day	2		-			-		MMENTS			
FIRST OF	REVISED API	IN ICATION	-		-			- 1-		- 1-1	N	at y
Place an "X" in	the appropriate b	ox in A or B t	below (mark on							rst application you are submit		
EPA I.D. Numl	per in Item I above	4						EPA I.D	, Number	, or if this is a revised applicat	IDD, BRITER AD	n. recilità.e
	PLICATION (P		tions for definit							SANEW FACILITY	The second second second second second	ACILITIES
8 73		PERATION B	EGAN OR THE	PROT	E CON	HE DAT			A day!		TION BEG	day) OPERA AN OR IS
1 77 74	APPLICATION	A Part Provide State			. U.S. Same		100			11 71 10 21 17 10	EXPECTED	TO BEGIN
and a second sec	CILITY HAS INTE	States of the second					-	1	1	2. PACILITY HAS A	RCRA PER	TIM
	SES - CODES /			1112			-	- 6-			-	
entering cos		are needed, an	ter the code/s/	in the	spece p	rovided	. 11	a process	will be u	s to be used at the facility. T sed that is not included in the		
	DESIGN CAPACIT		code entered i	n çolu	mn A.e	nter the	capa	city of t	he proces		and the state	1.27
2. UNIT O		or each amour	e that are listed	lumn l	B(1), en should	ter the d	code 1,	from the	i list of u	nit measure codes below that	describes the	unit of
			APPROPRIATE			-1		+1.			OPRIATE UN	
PI Storage:	ROCESS	CODE	DESIGN CA	PACIT	Υ	ī	restr	PB	OCESS	CODE DI	SIGN CAPA	CITY
CONTAINER	t (barrel, drum, etc	1 501 G/	LLONS OR L	TERS	É 🔿	Ŧ	ANH			LITER	NS PER DA	Charles I.
SURFACE IN	POUNDMENT	CU	BIC METERS		e		1000	IERATO	R	TOS TONE	PER DAY	R
Disposel:	WELL	D79 G/	LLONS OR L	TERS				1	L.	LITER	C TONS PER HOUR	Certan.
LANDFILL		Dec Ac	RE-FEET (the puld cover one a pth of one fool	cre to	e that	P	noces	INCA BOT O	scourning.	alment LITER	PER DAY	Y DR
LAND APPL		DET AC	CTARE-METE	DAY C		31 01 17	tors.	e impour Describe ace provi	e the prod ided; Iter	n III-G.)	-5-59	
SURFACE P	POUNDMENT	DA3 GA	LLONS OR L	TERS	i	20		-	1	and the second	SPPT -	San San San San San San San San San San
UNIT OF ME	ASHIDE	UNIT OF MEASUR CODE	E	TOF	MEASL			ME	ASURE	UNIT OF MEASURE	in the second	UNIT OF MEASURE CODE
GALLONS.			LIT	ERSP	ERDA	Y		1000	. V	ACRE-PEET.		- unk
CUBIC YAR	DS		. ME	LLON	S PER I	HOUR	UR.		11 K	ACRES.		
EXAMPLE FO	R COMPLETING	ITEM III (sho	wa in line num	bars X	t and	X-2 hold	awl:	A facili	ty has the	o storege tanks, one tank can	hold 200 galls	ons and the
	DUP			1/			1	1 /	T move.	111111	111	11
La I		S DESIGN	CAPACITY	7	11	11	4	17	11	PROCESS DESIGN CAPI	LLL	117
CESS			2.0	INIT	FOI	141	H	CESS		PROCESS DESIGN CAP	A. UNIT	FOR
(from list above)		Preily)	SU Ter	RE	ONL	EY	N I	CODE (rom list above)	200	T. AMOUNT	sure (enter ende)	USE
16 - 14	The second second second second second second second second second second second second second second second se	00	A	de)	u î	-14	-	1 - u	11		P_ PL	Tit
C-1 S 0 2		00		5	-	11	5		-			1
(-2 T 0 3	1	20		E	+	++	6		-		-	
1 To 3	3	10	T	2	11		7					
2		-				1	8		-		10	
					-		9					
3	-			_	_			_				
4						1	0		34) 			

.

.

-

Continued from the	17.5.19.9.5.1			41		the second second second second second second second second second second second second second second second s
III. PROCESSES	DITIONAL PROCESS CODES O	RFORD	ESCRIBING C	THER PRO	CESSES (code	"TO4"). FOR EACH PROCESS ENTERED HERE
Incegor bean	an caraciti					
						and the second second
	N OF HAZARDOUS WAST		-digit pumper	trom Alter		for such listed hazardous weste you will handle. If you
handle hazardou		40 CFR,	Subpart D, ent			s/ from 40 CFR, Subpert C that describes the characteris-
						uantity of that watte that will be handlad on an annual
	thanacteristic or toxic contaminant. at characteristic or contaminant.	nt entered	in column A t	estimate the	total anoual q	uentity of ell the non-listed waste/s/ that will be handled
C. UNIT OF MEAN	SURE - For each quantity enter	ed in cpl	umn B enter t	he unit of r	neasure code.	Units of measure which must be used and the appropriate
	GLISH UNIT OF MEASURE		CODE			T OF MEASURE CODE
FO	UNDS		1111 -		METRIC TON	177711111111111111
If facility record account the app	ts use any other unit of measure opriate density or specific gravity	for quan of the w	tity, the units aste.	of measure	must be conve	erted into one of the required units of measure taking into
D. PROCESSES				1. 2	5-15-50	and the second second
						ode/s) from the list of process codes contained in Item III
For non-list	ed hazardous wastes: For each	characteri	istic or toxic o	conteminent	entered in co	lumin A, select the code(s) from the list of process codes pose of all the non-listed hazerdous westes that posses
that characte Note: Four	ristic or toxic conteminant. spaces are provided for enterin	g process	codes. If mor	ra are neede	d: (1) Enter t	he first three as described above; (2) Enter "000" in the
A.G. WARNERS	t box of Item IV-D(1); and (3) Er			The states		person the excitional codely.
		All providences		0		NUMBER - Hazardous westes that can be described by
1. Select one o		bers and a	enter it in colu	mn A. On th	ne seme line co	mplete columns B,C, and D by estimating the total ennuel
2. In column A	he waste and describing all the pr of the next line enter the other th above" and make no other ent	EPA Ha	zardous Wastn	Number th	at can be used	to describe the wasts. In column D(2) on that line enter
3. Repeat step	2 for each other EPA Hazardous	Naste Nur	mber that can I	Fall In	- L	
per year of chrome	shavings from leather tanning a	nd finishi	ng operation. I	n addition,	the facility will	facility will treat and dispose of an estimated 900 pound I treat and dispose of three non-listed wastes. Two waste
100 pounds per yea	r of that waste. Treatment will be	a in an inc	inerator and d			
A. EPA HAZARD.	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT		PROCESS	ODES	D, PROCESSES
Zo WASTENO	WOARTER OF WASTE	(enter code)	1111	(enter)	TTT	2. PROCESS DESCRIPTION (If a code is not entered in D(1))
X-1 K 0 5 4	900	P	T 0 3 L	080	-11-1-1-1	1-11-0E 110 E.T.
X-2 D 0 0 2	400	P	TO3L	0 8 0	20 . 3	
X-3 D 0 0 1	100	P	T 0 3 L	0 8 0		Carlos de la
X-4 D 0 0 2			111	11	1 17	included with above
and the second			En molt			
EPA Form 3510-3 (6-8U)		PA	GE 2 OF	5	CONTINUE ON PAG

-

.

Contin	nued from page Photocopy the	2. Is page before completing if you	have more	than 26 was	the second second second second	The local division in the local division in	1.2	Form Approved OMB No. 158-580004
	ADDO	$\frac{1}{24} \frac{306861}{1}$	(1)	*		DUP	AL USE C	TASE DUP
		N OF HAZARDOUS WAST	ES (conti	1.1.	- dige	<u>U u i</u>	and and a	
w	A. EPA HAZARD.	B. ESTIMATED ANNUAL	C. UNIT				1	D. PROCESSES
NO.	(enter code)	QUANTITY OF WASTE	(enter code)	1 - 10		ter)	The second second second second second second second second second second second second second second second se	2. PROCESS DESCRIPTION (if a code is not entered in D(1))
1	K049	1000	P	TO3				
2	P030	2.0	P	TOB				
3	U043	800	P	103				
4	0051	300	P	103				
5	0052	400	Т	T03	1.1			
6	0188	150	T	TO3	1.1			
7	U151	10	P	103			1.1	
8	0205	30	P	103	1.1.	1.1		
9	0210	10	P	TO3			1.1	
10	K028	300	P	TO3	1.1			
11	K031	5	Ρ	T03				
12	K046	20	P	T03	4.4	1.4		
13	K050	15	P	TO 3	-1-1-			
14				1.1			11	
15				1.1	1.1			
16					1.1			
17				11	11	11	1.1	
18			3 8	1.1		1.1	-t-t-	
19				11	1.6	1.1		
20				11		11		
21				1.1		1.1		
22		16		11			1.1	
23				111			1.1	
24					11	11	-1-1	
25		r.		11		11	1.1	
26				-i	11	1.1		
-	23 - 26		2.0	10 + 19	87 . 18	27 - 12	22 * 28	

EPA Form 3510-3 (6-80)

٠,

*

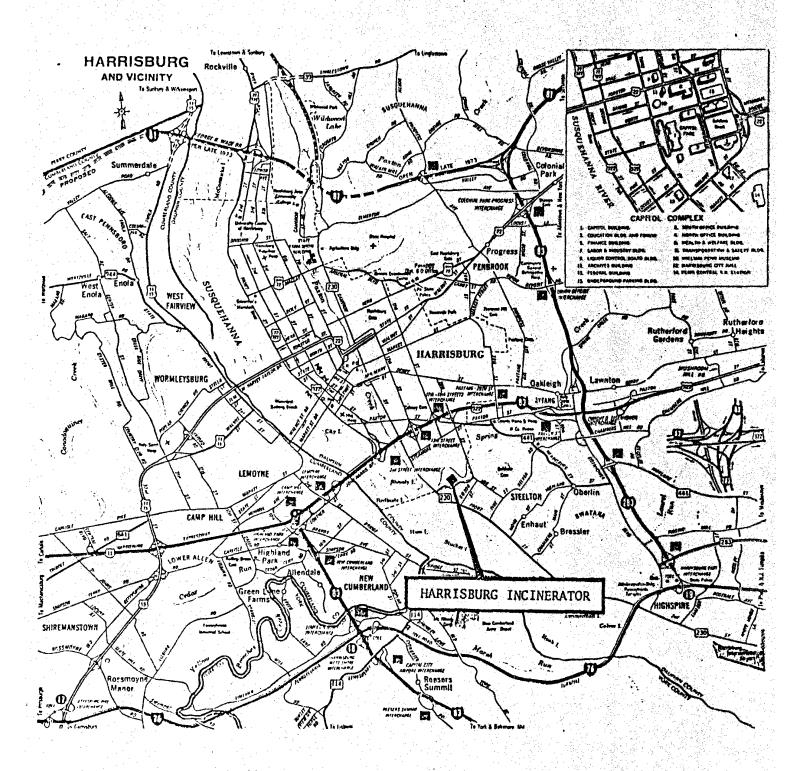
CONTINUE ON REVERSE

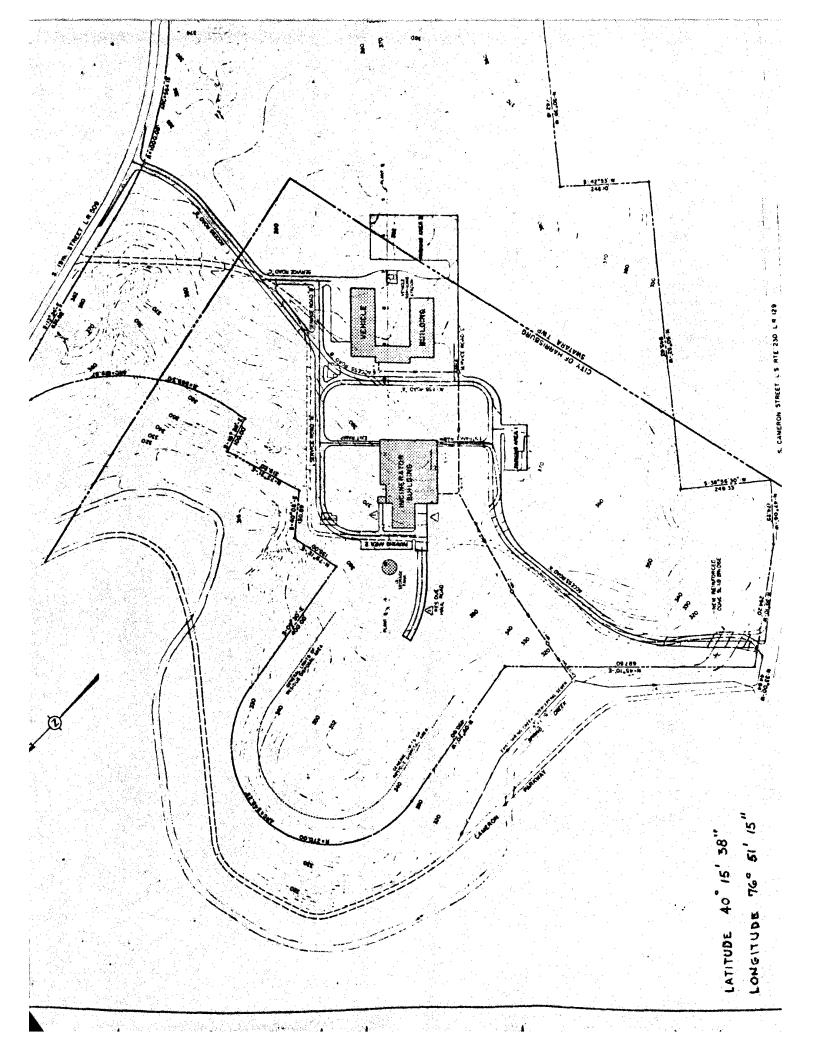
PAGE 3 ____ OF 5 (enter "A", "B", "C", etc. behind the "3" to identify photocopied pages)

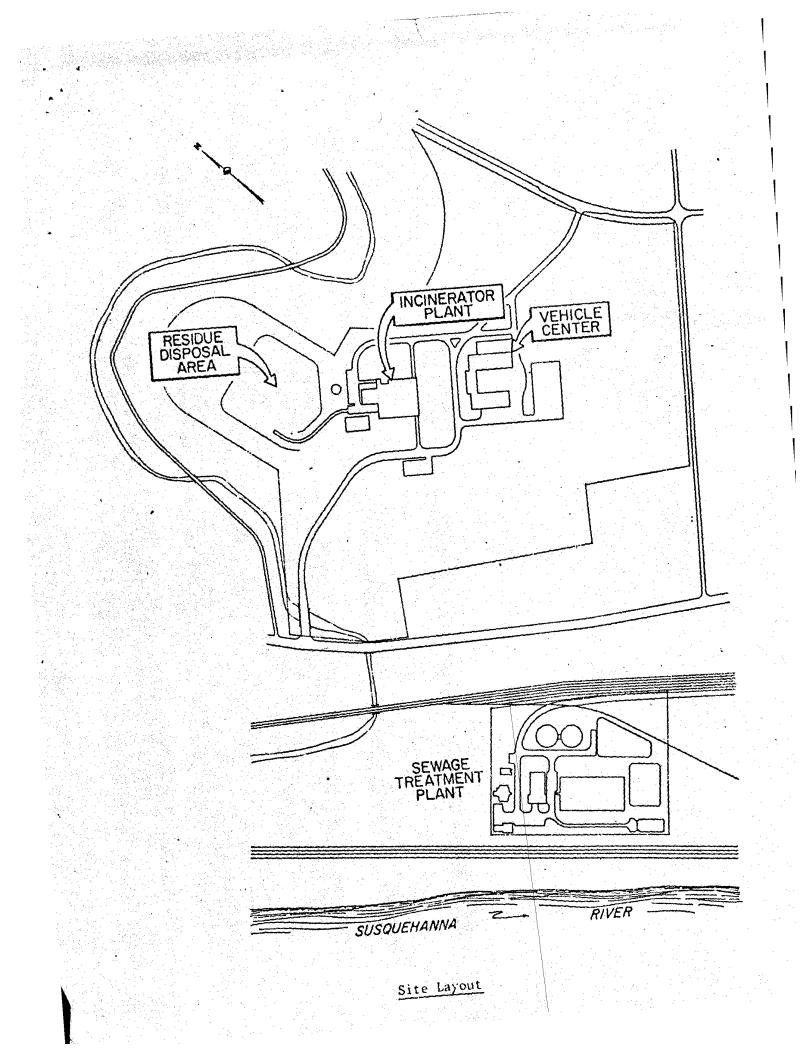
.....

		in the second second	N internal
L. USE THIS SPACE TO LIST ADDITION	ONAL PROCESS CODES FROM ITEM I	D(1) ON PAGE 3.	
			3.0
EPA I.D. NO. (enfer from page 1)			
Plandola 3 1/ 81 M			
ADDODET-DECE	6		in the second
FACILITY DRAWING			A STATE
PHOTOGRAPHS	provided on page 5 a scale drawing of the faci	lity (see instructions for more	r detail),
	graphs (aerial or ground-level) that clea	rly delineate all existing st	ructures; existing storage,
reatment and disposal areas; and sites o	future storage, treatment or disposal an	eas (see instructions for m	ore detail).
II. FACILITY GEOGRAPHIC LOCATI		And a second second	
LATITUDE (degrees, minut	es, & seconds)	LONGITUDE (degree	a, minutes, & seconds)
1 - 1 -	A 17 A	TT ()	
40 15	038	76	51 015
H. FACILITY OWNER	038	76	51 015
A. If the facility owner is also the facility	operator as listed in Section VIII on Form 1,	"General Information", place	5 1 0 1 5 1 3 3 3 3 3 3 3 3 3 3
A. If the facility owner is also the facility skip to Section IX below.		n o plant	
A. If the facility owner is also the facility skip to Section IX below.		n o plant	
 A. If the facility owner is also the facility skip to Section IX below. B. If the facility owner is not the facility 1. NAM 	operator as listed in Section VIII on Form 1,	n o plant	
 A. If the facility owner is also the facility skip to Section IX below. B. If the facility owner is not the facility 1. NAM 	operator as listed in Section VIII on Form 1,	n o plant	2. PHONE NO. (ates code & n
 A. If the facility owner is also the facility skip to Section IX below. B. If the facility owner is not the facility 1. NAM 	operator as listed in Section VIII on Form 1,	complete the following item	
 A. If the facility owner is also the facility skip to Section IX below. B. If the facility owner is not the facility f. NAM 	operator as listed in Section VIII on Form 1, AE OF FACILITY'S LEGAL OWNER 4, CITY	complete the following item	2. PHONE NO. (ates code & n
A. If the facility owner is also the facility skip to Section IX below. B. If the facility owner is not the facility I. NAM 3. STREET OR P.O. BOX	operator as listed in Section VIII on Form 1, HE OF FACILITY'S LEGAL OWNER 4. CITY	complete the following item	2. PHONE NO. (area code & n 0. M - M - M - M - M - M - M - M - M - M
A. If the facility owner is also the facility skip to Section IX below. B. If the facility owner is not the facility 1. NAM 3. STREET OR P.O. BOX 36. C. OWNER CERTIFICATION	operator as listed in Section VIII on Form 1, te OF FACILITY'S LEGAL OWNER 4. CITY	complete the following item OH TOWN	2. PHONE NO. (area code & n
A. If the facility owner is also the facility skip to Section IX below. B. If the facility owner is not the facility 1. NAM 3. STREET OR P.O. BOX 3. COWNER CERTIFICATION Certify under penalty of law that I have	operator as listed in Section VIII on Form 1, AE OF FACILITY'S LEGAL OWNER 4. CITY 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	COM TOWN	2. PHONE NO. (area code & n a. fm - bal as - ar ar s. ST. S. ZIF CODE 41 A2 A2 A3 tred in this and all attached
A. If the facility owner is also the facility skip to Section IX below. B. If the facility owner is not the facility 1. NAM 3. STREET OR P.O. BOX 34 C. OWNER CERTIFICATION Cortify under penalty of law that I have bournents, and that based on my inquir ibmitted information is true, accurate,	operator as listed in Section VIII on Form 1, AE OF FACILITY'S LEGAL OWNER 4. CITY C 4. CITY 5. C	Complete the following item OH TOWN th the information submi nsible for obtaining the in	2. PHONE NO. (area coils & n a. Int - at - at - at - at - at - at - at -
A. If the facility owner is also the facility skip to Section IX below. B. If the facility owner is not the facility 1. NAM 3. STREET OR P.O. BOX 3. STREET OR P.O. SOX 3. STREET OR SOX 3. STREET OR	operator as listed in Section VIII on Form 1, AE OF FACILITY'S LEGAL OWNER 4. CITY C C 4. CITY 2. CITY 2. CITY 4. CITY 4. CITY 4. CITY 4. CITY 5	Complete the following item OH TOWN th the information submi nsible for obtaining the in	2. PHONE NO. (area code & n 3. PHONE NO. (area code & n 5. ST. 6. ZIP CODE 4. 42 42 42 tred in this and all attached formation, I believe that the bomitting false information,
A. If the facility owner is also the facility skip to Section IX below. B. If the facility owner is not the facility 1. NAM 3. STREET OR P.O. BOX 3. STREET OR P.O. BOX 3. STREET OR P.O. BOX 3. OWNER CERTIFICATION corrify under penalty of law that I have bocuments, and that based on my inquir bmitted information is true, accurate, cluding the possibility of fine and impo	operator as listed in Section VIII on Form 1, AE OF FACILITY'S LEGAL OWNER 4. CITY C 4. CITY 5. C	Complete the following item OH TOWN th the information submi nsible for obtaining the in	2. PHONE NO. (area coils & n a. Int - at - at - at - at - at - at - at -
A. If the facility owner is also the facility skip to Section IX below. B. If the facility owner is not the facility 1. NAM 3. STREET OR P.O. BOX 3. STREET OR P.O. BOX 3. STREET OR P.O. BOX 3. OWNER CERTIFICATION corrify under penalty of law that I have bocuments, and that based on my inquir bmitted information is true, accurate, cluding the possibility of fine and impo	operator as listed in Section VIII on Form 1, AE OF FACILITY'S LEGAL OWNER 4. CITY C C 4. CITY 2. CITY 2. CITY 4. CITY 4. CITY 4. CITY 4. CITY 5	Complete the following item OH TOWN th the information submi nsible for obtaining the in	2. PHONE NO. (area code & n 3. PHONE NO. (area code & n 5. ST. 6. ZIP CODE 4. 42 42 42 tred in this and all attached formation, I believe that the bomitting false information,
A. If the facility owner is also the facility skip to Section IX below. B. If the facility owner is not the facility 1.NAN 3. STREET OR P.O. BOX 3. STREET OR P.O. BOX 3. COWNER CERTIFICATION Cartify under penalty of law that I have bocuments, and that based on my inquir ibmitted information is true, accurate, cluding the possibility of fine and impli- NAME (print or type)	30 6 1		
A. If the facility owner is also the facility skip to Section IX below. B. If the facility owner is not the facility 1. NAM 3. STREET OR P.O. BOX 3. STREET OR P.O. STREET OR P.O. STREET OR P.O. STRE	operator as listed in Section VIII on Form 1, AE OF FACILITY'S LEGAL OWNER 4. CITY C C C C C C C C C C C C C	COMPOSED IN TOWN	Tred in this and all attached C. DATE SIGNED
A. If the facility owner is also the facility skip to Section IX below. B. If the facility owner is not the facility I.NAN 3. STREET OR P.O. BOX 3. STREET OR P.O. SOX 3. STREET OR SOX 3. STREET OR SOX 3. STREET OR SOX 3.	operator as listed in Section VIII on Form 1, AE OF FACILITY'S LEGAL OWNER	COM TOWN ON TOWN (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	2. PHONE NO. (area coile & n a. area coile & n a. area coile & n a. area coile & n b. br. b. coile & n b. br. coile & n b. br.
A. If the facility owner is also the facility skip to Section IX below. B. If the facility owner is not the facility 1. NAM 3. STREET OR P.O. BOX 3. STREET OR P.O. SOX 3. STREE	operator as listed in Section VIII on Form 1, AE OF FACILITY'S LEGAL OWNER 4. CITY C 4. CITY C 4. CITY 4. COM TOWN ON TOWN (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	2. PHONE NO. (area code & n s. m s. m s. m s. s. r s. s. r <tr< td=""></tr<>	
A. If the facility owner is also the facility skip to Section IX below. B. If the facility owner is not the facility 1. NAM 3. STREET OR P.O. BOX 3. STREET OR P.O. SOX 3. STREET	operator as listed in Section VIII on Form 1, AE OF FACILITY'S LEGAL OWNER	COM TOWN ON TOWN (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	2. PHONE NO. (area coile & n a. area coile & n a. area coile & n a. area coile & n b. br. b. coile & n b. br. b. coile & n b. br. coile & n b. br. </td
A. If the facility owner is also the facility skip to Section IX below. B. If the facility owner is not the facility 1. NAM 3. STREET OR P.O. BOX 3. STREET OR P.O. STREET OR P.O. STREET OR P.O. STRE	operator as listed in Section VIII on Form 1, AE OF FACILITY'S LEGAL OWNER 4. CITY C 4. CITY C 4. CITY 4. COM TOWN ON TOWN (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	2. PHONE NO. (area code & n s. m s. m s. m s. s. r s. s. r <tr< td=""></tr<>	

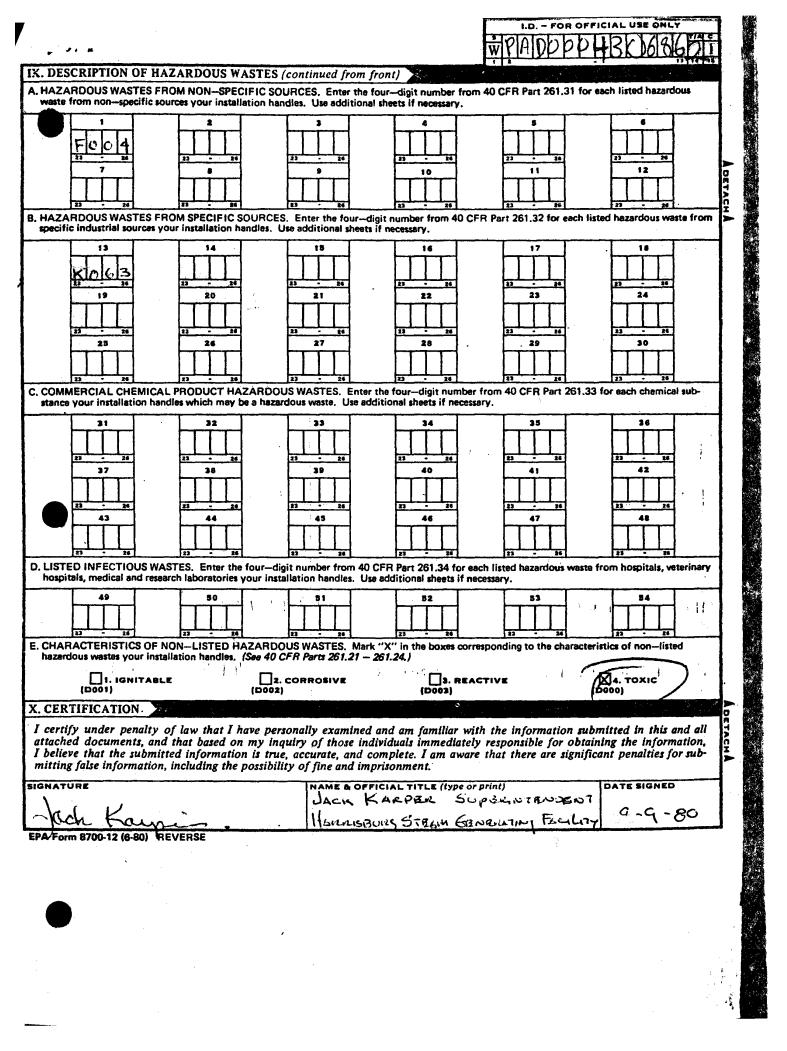
*







SEPA	NOTIFICA	OF HAZARDO	US WASTE A		INSTRUCTIONS: If you received a preprinted label, affix it in the space at left. If any of the information on the label is incorrect, see	
TION'S EPA	PAD0004300	586			through it and supply the correct information in the appropriate section below. If the label is complete and correct, leave items I, II, and III	
TALLA-	HARRISBURG	ROF INCIN			below blank, if you did not receive a preprinted label, complete all items. "Installation" means a	
II. MAILING ADDRESS	CITY HALL HARRISBURG	5. FA 17101			single site where hazardous waste is generated, treated, stored and/or disposed of, or a trans-	
,					porter's principal place of business. Please refer to the INSTRUCTIONS_FOR_EILING_NOTIFI-	- 💹
LOCATION III OF INSTAL- LATION	CITY HALL HARRISBUR	5, PA 17101			CATION before completing this form. The information requested herein is required by law (Section 3010 of the Resource Conservation and Recovery Act).	
FOR OFFICIAL	JSE ONLY				BEACHURA STANDARD	
		сом	MENTS			
INSTALLATI	ON'S EPA 1.D. NUM	Trate T.T.	(yr., mo., & day)		500100023	
FPADOO	043068		RICIOIIU	4		Ĺ
I. NAME OF INS						
HARKII	SBURG	STEAM 68	NERATI	NGIF		
II. INSTALLATI	ON MAILING AD	STREET OR P.O. BOX			2011年1月1日日 第3回第3回第3回第3回第3回第3回第3回第3回第3回第3回第3回第3回第3回第	
31670	SIATH	STREET				
18 14	CITY	OR TOWN		ST. ZIP	P CODE	
4 HARRI	SBURG			PAIN	1104	
III CATION O	OF INSTALLATIO	N AND AND AND AND AND AND AND AND AND AN	40	41 42 47		
		ET OR ROUTE NUMBER				
5 6 70	S 19TH	STREET				
		OR TOWN		ST. ZIP	CODE	
15 16	SBURG					
IV. INSTALLAT	the second second second second second second second second second second second second second second second s	ND TITLE (last, first, & job	titie)		PHONE NO. (area code & no.)	
ZJACK	KARPER	SUPERIN	TENDEN	117	717.255.6495	
V. OWNERSHIP						
eralit		A. NAME OF INSTALL	ATION'S LEGAL	OWNER	, , , , , , , , , , , , , , , , , , , 	
	OF HAR					
B. TYPE OF (enter the appropri	OWNERSHIP ate letter into box)	VI. TYPE OF HAZAR			enter "X" in the appropriate box(es))	
F = FEDERA M = NON-FE	DERAL	87 S9 59 59	PONE/DISPOSE		UNDERGROUND INJECTION	
		N (transporters only –				
61 A. AIR	B. RAIL	C. HIGHWAY	D. WATER	E. OTHEI	н (specijy):	
Mark "X" in the ap	propriate box to indi	CATERNATION CATERNATICA TRAVILO CATERNATICA TRAVILO CATERNATICA TRAVILO CATERNATICA TRAVILO CATERNATICA TRAVILO CATERNATICA TRAVILA TRAVILA TRAVILO CATERNATICA TR	stallation's first not	ification of hat bace provided b	szardous waste activity or a subsequent notification. below.	
	NOTIFICATION			i (complete iter		
	ON OF HAZARDO					
		provide the requested info	rmation,			
EPA Form 8700-12	2 (6-80)				CONTINUE ON REVERSE	



Gannell Fleming Gudly; Grpanter Inc. Engineer & Cily Gond P. Vogler -

HEST. City Solicitor F.J. CARREIND

Rick Snyder

Local 521 Union Misident

Actime Director of Public Works Executive Assi. to Mayon Rect. O. FRADA De CARCIA

Michael A. Namosti Soild Waste Specialist Hlog. Regional Office

Deputy Director of Public Works/ Acting Plant Super. S.G.F. Laray T. Lippi, Jr.

F. FAFR DER OP Sup.

WILL STORE UNERCENERATE REFUSE IN PET FOR FOUR WEEKS - THEN BEDEN REMINAL

and the second second second second second second second second second second second second second second second

WERL ANSWER NOU TO THES INTENT.

الارت میکند. به مراحل میکند به میکند به میکند به میکند و به میکند و به میکند به میکند و میکند و میکند. او از میکنوند است میکند و به میکند و به میکند و آن میکند و آن میکند. امیکند و میکند و میکند و میکند و میکند و م میکند میکند و میکند و میکند و میکند و میکند و میکند و میکند و از میکند و میکند و میکند و میکند و میکند و میکند و

BUREAU OF SOLID WASTE MANAGEMENT One Ararst Boulevard Harrisburg, Pennsylvania 17110 (717) 657-4588 July 19, 1985

Mr. Charles King Jr., Director Department of Incineration and Steam Generation 1670 South 19th Street Harrisburg, FA 17104

Dear Mr. King:

This letter is a confirmation of our meeting held on July 3, 1985 at the Harrisburg Regional Office of the Department of Environmental Resources.

Our discussion focused on the historical and present non-compliant status of the Harrisburg Indimerator facility with respect to the permit conditions and design oritoria of the residue dispesal sites. The existing condition of Residue Disponal Sites A and B-1 causes concern for their potential impact on human health and the environment. As a result of our discussion, it was agreed that the City of Harrisburg would take the following steps toward achieving compliance with State Law:

1. Remove the unincinerated refuse from Site P-1 by September 1, 1985.

2. Grade Site B-1 to meet design specifications by September 9, 1985.

3. Remove excess residue, ensure proper collection instruments are in service, and grade Site A to must approved design specifications by October 31, 1985.

4. Perform a baserdous waste deterministion for residues disposed in Site A and B-1 (see attachment for strategy). Results of sample analysis should be forwarded to the Department by August 9, 1985. If the determination classifies the residue from Site A or Site B as busardous, notify both the Department and the Environmental Protection Agency immediately.

5. Reinstitute groundwater monitoring for the facility by no laterthan July 31, 1985. Methods used for final closure of Residue Sites A and B-1 are contingent upon the results of the hazardous waste determination. If the residue in either Site A or B-1 is hazardous, the disposal sites containing the hazardous residue will be required to meet RCEA requirements for closure of a hazardous waste disposal facility. If the residue is determined to be non-hazardous, the sitem will follow closure according to original design specifications. Following the submittal of all analytical results for the hazardous waste determination, a meeting will be scheduled to discuss pertinent findings, plan for final closure of the residue sites, and to further define future residue disposal needs for the Harrisburg Incinerator.

-2-

Your cooperation in this matter is imperative. If you have any further questions, please call.

Sincerely,

Michael R. Steiner Regional Solid Waste Manager Harrisburg Regional Office

MRS: flw

cc: John B. Moyer Francis P. Fair Timothy A. Alexander File



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL RESOURCES BUREAU OF WASTE MANAGEMENT One Ararat Boulevard Harrisburg, Pennsylvania 17110 (717) 657-4588 May 20, 1987

PRELIMINARY ASSESSMENT

SITE NAME:	Harrisburg Ste	am Generating	Facility
SITE NUMBER:	PA-0435		
SITE LOCATION:	1670 South 19t	h Street	
	Harrisburg, PA	17104	

The Harrisburg Steam Generating Facility is a refuse incinerator which burns the following wastes; municipal waste, sewage sludge, and other various permitted waste streams. The total area of the site is around sixty acres. The residual (fly ash and bottom ash) has been disposed on approximately twelve acres of the site. The possibility exists of soil and/or groundwater contamination due to the disposal of the residue. The facility has been in operation since 1972. The present daily volume burned is around six hundred tons. The residue has been disposed onto the ground in Residue Area A, while in Residue Area B1 it is disposed on a PVC liner.

. 1		
*	·.•	

	IAL HAZARDOUS WAST	·		3	7A-0435
DTE: The initial identificat activity or confirmatio be assessed under the a hazurdous waste pro	n that an actual health o EPA's Hazardous Wast	or environmental t	hreat exists. A	11 identi	fied sites will
SITE NAME Marrich Sta	a la Facilt		other identitions		- <u></u>
Marrisburg Steam Gene	ATTAS PACIFIY	D. STATE	E. ZIP CODE	F. COU	NTY NAME
Marrisburg OWNER/OPERATOR (11 known)		PA	17104		auphin
City of Harrist	burs			(-717	ephone number) 236 - 536/
1. FEDERAL 2. STATE	3. COUNTY 24.	MUNICIPAL	. PRIVATE] 6. UNKN	0 W N
The Harrisburg Ste located on sixty residue(fly ash and area of approxi	acres of land. d battom a sh) mately twelve ac	there cre hes been ircs.	two areas	f, co	vering: Gn
HOW IDENTIFIED (i.e., citizen's ca	malaine. OSHA citations, are	.)	<u></u>		K. DATE IDENTIFIED
Cercla SUMMARY OF POTENTIAL OR KNO		···			(mo., day, & vr.) 8/1/80
Potential for 501 of residue (fly ask	and bottom ash?) at two a	areas on s	ite .	· ·
				-	
· .					
. PREPARER INFORMATION					
I. NAME	fra	2. T G	ELEPHONE NUMB 1)657-457	en 88	5/19/87
Anthony L. Rath					
Horthony L. Rath					

SEPA F	NTIAL HAZA PRELIMINAR SITE INFORM	Y ASSES	SMENT		1. IDENTIF 01 STATE 02 PA	ICATION SITE NUMBER 04/35
II. SITE NAME AND LOCATION						
01 SITE NAME (Legal commun, or descriptive name of silo)		1		R SPECIFIC LOCATIO		
Harrisburg Steam Generating Facil	ity	1670	South 105 ZIP CODE	19th Stree	+	·
	l	1	1	OG COUNTY		07COUNTY CODE
Havrisburg Og Coordinates Latitude Longi	TUDE	PA	17104	Dauphin		22
40° 14' 43".N 76_ 51	19"W	1				
10 DIFLECTIONS TO SITE istarting from nearest public roads I-83 Soudthe to 17th St. Exit. Left Street. Turn right onto 19th the right	to Paxton Street An	street d go	l, left or pproximation	Parton S dy 1.0 mile	, facility	1944 15 on
III. RESPONSIBLE PARTIES						
			T (Business, mailing		- ·.	
City of Harrisburg		1670	South 105 ZIP CODE	19th Street	NUMBER	
Harrisburg				17123		
07 OPERATOR (# known and different train owner)		08 STREE	T (Business, meiling,	residentiel)		L
Same		11.70	South	9th Street 12 TELEPHON		
OP CITY			11 ZIP CODE			
Harrisburg		7A	17104	<u>ב(נור)</u>	6-5361	
13 TYPE OF OWNERSHIP (Creck and)			_ C. STA		r 💼 E. MUR	
© F. OTHER:	(Agency name)					
IV. CHARACTERIZATION OF POTENTIAL HAZARD	all ther apply)	PA CONTRA		03 c) DATE RECEIV		
	CTOR NAME(S):				(Specity)	
		RATION				
🛍 A. ACTIVE 🖾 B. INACTIVE 🗖 C. UNKNOWN	-	1972 BEGINNING YE				I
04 DESCRIPTION OF SUBSTANCES POSSIBLY PRESENT, KNOWN, O Joxic residue from incinerat		trash.				
, 						· · · · · · · · · · · · · · · · · · ·
os description of potential hazard to environment and/or Potential exists for Contamina	rpopulation tion st	soil a	nJ/or g	roundwater		
os description of potential hazard to environment and/or Potential exists for Contamina V. PRIORITY ASSESSMENT	tion of		v 1 3 - Description of h L2 D. NO	iezardous Conditions and In	ciden(s)	lan komu
05 DESCRIPTION OF POTENTIAL HAZARD TO ENVIRONMENT AND/OF Potential exists for Contamina: V. PRIORITY ASSESSMENT 01 PRIORITY FOR INSPECTION (Check one. If high or medium is checked, con Li A. HIGH (Inspection required promotity) Linepection (equired) VI. INFORMATION AVAILABLE FROM	tion sf poloie Pari 2 · Waste Ini E C. LOW (Inspect on In	formation and Pa the available base	v 1 3 - Description of h L2 D. NO	lezardous Conditions and In NE	icidente) lete current dispost	
OS DESCRIPTION OF POTENTIAL HAZARD TO ENVIRONMENT AND/OF Potential exists for Contamina V. PRIORITY ASSESSMENT OI PRIORITY FOR INSPECTION (Check one. If high or medium is checked, con D A. HIGH (Inspection required promptly) VI. INFORMATION AVAILABLE FROM OI CONTACT	tion sf apploise Part 2 - Waste Int Inc. LOW (Inspect on Un 02 OF (Agency-Organ	iormation and Pa ne available base nrateun)	ri 3 - Description of h L3 D. NO 1) (No h	lezardous Conditions and In NE	cidents) lete current dispost	ion lame 03 TELEPHONE 1 (717)236-

•

070-12(7-81) EPAFO

UNIFORM HAZARDOUS	DFFICIAL PENNSYLVANIA MANIF 1. Generator's US EPA ID No.		2. Page 1	Information		rpires \$-30-91
WASTE MANIFEST	10 00 430 686	Manifest Document No.	of 1	is not requi	fred by Fee	deral law
A	ty of Harrisburg		A. State M	initest Docum		
	70 S. 19th Street		PAL	4864	123	1
	rrisburg, Pa. 17104	And and	B. State Ge	100.0020		
Generator's Phone (717) 23 Transporter 1 Company Name	6-5361 Attn: John L		C. State Tr	SAME ans. ID	-	
eystone Block Transportatio	n Co. P A D 980 6	92 008	PA-	AHL	023	61
. Transporter 2 Company Name	8. US EPA ID Nu	mber	D. Transpo E. State Tr	rter's Phone	(215)9	26-6915
Designated Facility Name and Site Address	10. US EPA ID N	umber	PA-			1
Envirite Corporation 1600 Pennsylvania Ave.				rter's Phone	()	
York, Pa. 17404	1	S. W. A.	G. State Fr	scility's ID s Phone (71	-	Sec.
		5 4 0 4 5 12. Contai		13.	7' 846	-1900
1, US DOT Description (Including Proper Shipp	Ning Name, Hazard Class, and ID Number)	No.	Type	Total Quantity	Unit Wt/Vol	Waste No
RC, HAZARDOUS WASTE SOLID,	N.O.S. (D0006,D0008)					
ORM-E NA9189 (incluerator ash contaminat	ad with Cadmium and I as	1 001	IC x R	0180	Ol.	D006
(Inconstator ash containing)	ed with cadintum and tea	001	1 m	010	- IP	
					1	
					-	
					101	
					-	1
					1 1 1	1
						1.
Additional Descriptions for Materials Listed Al Lab Pack Physical State	Lab Pack Physical State		K. Handlin	g Codes for W	astes Liste	d Above
all Isl			1. Bi	-081	c.	
			-101		-	
b 5. Special Handling Instructions and Additional	a 🗌 🔛		b.		d.	-
11a. Appr #YS 0639 DOT ERG	#31 EME	RGENCY CONI		D EGENRI 17-236-5	EDER 361	
			ourately descri	bed above by p	roper shippi anal governm	ing name and an nent regulations.
					letennined to	be aconomical
If I am a large quantity generator, I certify that I practicable and that I have selected the practicable and the environment; OR, if I am a small quantit available to me and that I can allord.	have a program in place to reduce the volume is method of treatment, storage, or disposal curr y generator. I have made a good faith effort to n				letermined to future threa le manageme	be economically t to human health int method that i
If I am a large quantity generator, I certify that I practicable and that I have selected the practicab and the environment, OR, if I am a small quantit available to me and that I can afford Printed/Typed Name					etermined to future threat managemeter MONTH	DAY YEA
If I am a large quantity generator, I certify that I practicable and that I have selected the practicab and the environment, OR, if I am a small quantit available to me and that I can alford. Printed/Typed Name John A. Lakens 17. Transporter I Acknowledgement of Receipt of Materia	have a program in place to reduce the volume is method of treatment, storage, or disposal curr y generator. I have made a good faith effort to n Signature				1 2	DAY YEA
If I am a large quantity generator, I certify that I practicable and that I have selected the practicab and the convrorment, OR, if I am a small quantit available to me and that I can afford Printed/Typed Name John A. Lukens	have a program in place to reduce the volume is method of treatment, storage, or disposal curry y generator. I have made a good faith effort to n Signature					DAY YEA
If I am a large quantity generator, I certify that I practicable and that I have selected the practicab and the convolution of I am a small quantit available to me and that I can afford Printed/Typed Name John A. Lukens IV. Transporter I Acknowledgement of Receipt of Materia Printed/Typed Name	have a program in place to reduce the volume is method of treatment, storage, or disposal curry y generator. I have made a good fain effort to r Signature Signature				MONTH 12 MONTH	DAY YEA
If I am a large quantity generator, I certify that I practicable and that I have selected the practicab and the convolution of I am a small quantit available to me and that I can afford Printed/Typed Name John A. Lukens If Transporter I Acknowledgement of Receipt of Materia Printed/Typed Name	have a program in place to reduce the volume is method of treatment, storage, or disposal curr y generator. I have made a good faith effort to n Signature				1 2	DAY YEA
If I am a large quantity generator, I certify that I practicable and that I have selected the practicab and the orivrorment, OR, II am a small quantity available to me and that I can afford Printed/Typed Name John A. Lukens IT Transporter I Acknowledgement of Receipt of Materia Printed/Typed Name It. transporter 2 Acknowledgement of Receipt of Materia Printed/Typed Name It. transporter 2 Acknowledgement of Receipt of Materia Printed/Typed Name	have a program in place to reduce the volume is method of treatment, storage, or disposal curry y generator. I have made a good fain effort to r Signature Signature	and toxicity of watte g inity available to me w informed and the second second the second second second second the second second second second second the second se			MONTH 12 MONTH	DAY YEA
Printed/Typed Name John A. Likens 17. Transporter 1 Acknowledgement of Receipt of Materia Printed/Typed Name 18. Transporter 2 Acknowledgement of Receipt of Materia Printed/Typed Name 19. Discrepancy Indication Space 29, 680 # /E N 20. Facility Owner or Operator: Certification of	have a program in place to reduce the volume is method of treatment, storage, or disposal curry y generator. I have mede a good faith effort to Signature Signature Signature Signature	and toxicity of watte p inity available to me w informed per mote and the second second second second the second second second second second the second seco	enerated to the hich miningses internation of set	degroe I have d De present and Pre best wast	MONTH 12 MONTH	DAY YEAN DAY YEAN DAY YEAN DAY YEAN

Copy 1 - TSD Facility: Mail to Destination State

	PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL RESOU Bureau of Waste Management						CES	FOR SHIPMENT AND CHEMOTH		OUS, INFECTIOUS WASTE.
		P. O. Box 8550 Harrisburg, PA 17105-8550					1	50639		Form approved.
• ER	-WM-51 REV. 1/91	OFFICI,	-	I, PA 17105-8 LVANIA MAN		DRM	i	- 1		OMB No. 2050-0039 Expires 9-30-91
	UNIFORM HAZARDOU	S 1. Genera	itor's US EPA	ID No.	M Docu	anifest ment No.	2. Page			haded areas
	WASTE MANIFEST		<u>043</u>	0686	00	0 0 1	^of	but is rea	quired by F quired by S	tate law.
	3. Generator's Name and Mailing A	Address City of	Harrist	ourg	· ·		A. State	Manifest Docu	ment Numi	per
	Waste Energy Facil:		19th St				<u> </u>	AC 486	414:)
		Harrisb	urg, Pa.	17104	_		B. State	Gen. ID		
	4. Generator's Phone (717 5. Transporter 1 Company Nam	<u>) 236-536</u> 1e	<u>1 Attr</u>	1: John L 6. US EPA ID	ukens_		C State	SAME		
					• • • • • • • • • •				h	
	Keystone Block Trai 7. Transporter 2 Company Nam		PAD	9 0 U 0 8. US EPA ID	<u> </u>	008		<u>A</u> FI sporter's Phone	$\frac{0}{015}$	925-6915
11								Trans. ID	<u>21)</u>	925-0915
	9. Designated Facility Name and S			10. US EPA II	D Number		PA	-	l s	
	Envirite Corporatio						F. Tran	sporter's Phone	()	
	1600 Pennsylvania York, Pa. 17404	Ave.	_					e Facility's ID		
	101K, Fa. 17404		PAD	01 01	54	0 4 5	H. Faci	lity's Phone (7]	7) 846	-1900
	11. US DOT Description (Including	g Proper Shipping Name	Hazard Class	, and ID Numb	er)	12. Contai	ners	13. Total	14. Unit	I. Waste No.
	a.					No.	Туре	Quantity	Wt/V	
	RQ, HAZARDOUS WAST	E SOLTD NOS	(100004	ເກດາດຈາ			CM		Р	D0006
	ORM-E NA9189 (INC.	INERATOR ASH C	ONTAMONA	TED WITH	Cd Ph	0-1		3242		D0008
	b.					~ ~ /		JXTX	4-	
GENER										
E										
R	c							·		┦───┦
A T						. 1				
O R										
ï	d							<u> </u>	F	-
	J. Additional Descriptions for Mate	erials Listed Above	Lab Pack	Physical Sta				dling Codes for	Wastes Lis	ted Above
							20		h se in s	
	aS		c.			·····	1-78	·/	۵	
	b .		d.				Ь. К	en en en en en en en en en en en en en e	d.	
	15. Special Handling Instructions									
	11a. APPR. #YS 0639			Emer	gency	Contact	: Ed	Egenriede	er	
							236	-5361		
										1
						·				
	16. GENERATOR'S CERTIF classified, packed, marked, and la	ICATION: I hereby decla abeled and are in all respects	are that the cor in proper condi	ntents of this con tion for transport	signment ar by highway a	e fully and according to an	curately de	escribed above by iternational and na	proper ship	ping name and are
					/	÷ .			~	-
	If I am a large quantity generato practicable and that I have select	or, I certify that I have a pro	gram in place to f treatment stor	o reduce the volu age, or disposal	me and toxic currently avail	ity of waste ge	enerated to	the degree I have	determined	to be economically eat to human health
	and the environment; OR, if 1 an available to me and that 1 can affor	n a small quantity generator. ord.	I have made a	good faith effort	to minimize r	ny waste gene	ration and	select the best wa	iste managei	nent method that is
	Printed/Typed Name		^	Signature		, 0		1	MONT	
₫	EDWARD EG	ENRIEDE	<u>e </u>	<u> </u>	aek	Cife	ne	de	10	
Ă	17. Transporter 1 Acknowledgement of Printed/Typed Name	neceipt of Materials		Signature	0		1	9-1-1	MONT	H DAY YEAR
N S	Samuel 1	(Istahaomi	42		r maar	s Z	A	Ale	1/2	17911
TRANSPORTER	18. Transporter 2 Acknowledgement of	Receipt of Materials		Simulation	and all	111	<u></u>	<u>~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ </u>		
Ē	Printed/Typed Name			Signature	l	/			MONT	H DAY YEAR
<u> R</u>	19. Discrepancy Indication Space	-				·····-			5. -	┹╍╍╼┹╍╍╌╸┩┞
F	19. Discrepancy mulcation space	je								
A C		4.0	1	- 1.1 -	_	0			1. (1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	
	, , , , , , , , ,	30.80	<u> 40#- L</u>	ENVIR	ITE.	<u>SLAC</u>	Ē	- 4 4- 41	<u> 16 (a</u>	· · · · · · · · · · · · · · · · · · ·
1	20. Facility Owner or Operator: Printed/Typed Name	Certification of receipt of	ot hazardous n	naterials covere Signature	ed by this n	nanifest exce	pt as not	ea in Item 19.	MONT	H DAY YEAR
Y		(La	62	Gignarure	Yea.	\sim \prec	1	tell	mont	
	CLEAN			;	<u> </u>			m	10	
EP/	A Form 8700-22 (Rev. 9/88) Previous	editions are obsolete								· · · ·

Copy 1 - TSD Facility: Mail to Destination State

In case of an emergency or spill immediately call the National Response Center (800) 424-8802 and the PA DER (717) 787-4343

ŞEI	A	F	PRELIMINARY	ADOUS WASTE ASSESSMENT E INFORMATION	SITE	1. IDENTIFICATI 01 STATE 02 SITE A PA D4	UMBER
II. WASTE S	TATES, QUANTITIES, AN	D CHARACTERIS	TICS				
N A. SOLID I I B. POWDE I I C. SLUDGE	TATES (Check of Instruct) () E. SLURRY R. FINES () F. LIQUID () I. G. GAS		asin quantities	03 WASTE CHARACTE III A. TOXIC I I B. CORROS I I C. RADIOA I I C. RADIOA I I O. PERSIST	CTIVE [] G. FLAMMA	E LII. HIGHLY DUS LIJ. EXPLOS BLE LIK. REACTI	IVE VE ATIGLE
	(Specity)	NO. OF DRUMS					
III. WASTE T	YPE	_		-			
CATEGORY	SUUSTANCEN	AME	1 GROSS AMOUNT	02 UNIT OF MEASURE	03 COMMENTS		
SLU	SLUDGE						
OLW	OILY WASTE		<u></u>			·····	
SOL	SOLVENTS						
PSD	PESTICIDES						·
೦೦೦೦	OTHER ORGANIC CH						
100	INORGANIC CHEMIC	ALS					
ACD	ACIDS						
BAS MES	UASES HEAVY METALS		INKLOWN		METALS IN BOT		<u></u>
CATEGORY	CKS (See Appendix for CAS Number 01 FEEDSTOC	· · · · · · · · · · · · · · · · · · ·	02 CAS NUMBER	CATEGORY	01 FEEDSTOC	< NAME	02 CAS NU
FDS				FDS			
FDS				FDS			
				FDS			
FDS	1			FDS		l	
FDS	OF INFORMATION (CHO	pecific references. e.a., sia	le liles, sample ansivals, r	eports)			

SEPA	PREL	AL HAZARDOUS WASTE SITE IMINARY ASSESSMENT F HAZARDOUS CONDITIONS AND INCIDE	UTS	I. IDENTIF 01 STATE 03 PA	ICATION SITE NUMBER
HAZARDOUS CONDITI					
01 # A. GROUNDWATER 03 POPULATION POTENTI	CONTAMINATION ALLY AFFECTED: Unknown	02 LI OBSERVED (DATE:) 04 NARRATIVE DESCRIPTION with heavy metals.	1	POTENTIAL	l'I ALLEGED
		02 [] OBSERVED (DATE:) 04 NARRATIVE DESCRIPTION ace water due to rug-off.		POTENTIAL	(') ALLEGED
01 BI C. CONTAMINATION 03 POPULATION POTENTI	ally affected: <u>Unicnow</u>	02 DOBSERVED (DATE:)	CA (POTENTIAL	L) ALLEGED
01 値 D. FIRE/EXPLOSIVE D3 POPULATION POTENTI 人っれe		02 [] OBSERVED (DATE:) 04 NARRATIVE DESCRIPTION	01	POTENTIAL	() ALLEGED
	ALLY AFFECTED: UNKnown	02 (] OBSERVED (DATE:) 04 NARRATIVE DESCRIPTION irect contact with the asl		POTENTIAL	L] ALLEGED
01 B F. CONTAMINATION 03 AREA POTENTIALLY A	FECTED: 12	02 C) OBSERVED (DATE:) 04 NARRATIVE DESCRIPTION		POTENTIAL	L'I ALLEGED
sotton ash and and possible f	fly ash has bee ailure of 7xc line	in deposited onto the ground r under Residue Aren B-1.	at	Res. Ine	Aren A
01 1 G. DRINKING WATER	CONTAMINATION	02 OBSERVED (DATE:) 04 NARRATIVE DESCRIPTION		OTENTIAL	L'I ALLEGED
Potential is sr	nall due to the	- fact that surface water inclues surrounding the site	r (pu ?.	blic wat	er) is
01 M H. WORKER EXPOS 03 WORKERS POTENTIAL	URE/INJURY LY AFFECTED: UNKNOWN	02 LJ OBSERVED (DATE:) 04 NARRATIVE DESCRIPTION	1	OTENTIAL	
Possible long	term health effe	ects due to exposure to	orte	ash.	
	ALLY AFFECTED: Unknown	02 [] OBSERVED (DATE:) 04 NARRATIVE DESCRIPTION due to exposure to the as		POTENTIAL	C ALLEGED

L IDENTIFICATION POTENTIAL HAZARDOUS WASTE SITE 01 STATE 02 SITE NUMBER PRELIMINARY ASSESSMENT PA 0435 PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS IL HAZARDOUS CONDITIONS AND INCIDENTS (Continued) ON # J. DAMAGE TO FLORA 02 []] OBSERVED (DATE: POTENTIAL [] ALLEGED) **GA NARRATIVE DESCRIPTION** None noted OT M K. DAMAGE TO FAUNA 02 DOBSERVED (DATE: _ **B POTENTIAL** C ALLEGED 04 NARRATIVE DESCRIPTION (Include name(s) of species) None noted 回相 员 L. CONTAMINATION OF FOOD CHAIN 02 C OBSERVED (DATE: _____) POTENTIAL ALLEGED **04 MARRATIVE DESCRIPTION** Potential for contamination of gardens. OT BL M. UNSTABLE CONTAINMENT OF WASTES POTENTIAL LI ALLEGED 02 LI OBSERVED (DATE: __ ___) (Spith/runoil/standing bouids/seeking drums) CB POPULATION POTENTIALLY AFFECTED: Unknown 04 NARRATIVE DESCRIPTION Ranoft and/or erosion, also potential for failure of puc liner under Residue Pres B-7. IT A N. DAMAGE TO OFFSITE PROPERTY 02 C OBSERVED (DATE: ____ D ALLEGED POTENTIAL _) **D4 NARRATIVE DESCRIPTION** Potential due to run-off and/or evosion of ash. JT 🔮 O. CONTAMINATION OF SEWERS, STORM DRAINS, WWTPs 02 🗆 OBSERVED (DATE: ____ POTENTIAL C ALLEGED .) **G4 NARRATIVE DESCRIPTION** Possible for contamination of sewer. OR P. ILLEGAL/UNAUTHORIZED DUMPING 02 C OBSERVED (DATE: ___ D POTENTIAL □ ALLEGED _} **04 NARRATIVE DESCRIPTION** None noted 05 DESCRIPTION OF ANY OTHER KNOWN, POTENTIAL, OR ALLEGED HAZARDS III TOTAL POPULATION POTENTIALLY AFFECTED: UNKNOWN IN. COMMENTS V. SOURCES OF INFORMATION (Cito specific references, e. g., state files, sample analysis, reports) State Files Sample Analysis EPA FORM 2070-12 (7-81)

FIELD TRIP SUMMARY REPORT

IPA Case Number <i>9A - 64</i>	·25	Site Name	Harrisburg Steam Generating Facilit
Site Description The Harrisburg Stean located on 60 acre (fly ask and bottom	Generating Facility s of land. There ash) has been di	is a ref are two sposed, co	use incinerator which is to areas where residue overing approximately 12 acres.
Area of site (acres)		Hazardous	portion, if not entire site
40			acres
has been/is being d HSGF property. Waste handling/disposal p	lisposed of on si	te at t	ity. The flyash and bottom as we spots located on the
The bottom ash and at Residue Area Ar c	fly ash has been and onto a PVC	disposed liner et	of orto the ground Residue Area B-1.
Site topography and runof Refer to site sket		S	
Surface or subsurface dra None noted	inage areas (leach	ate) noted	? Odors/stains noted? None Stressed vegetation noted None
Location and description flow direction and observ Refer +5	vations. Note loca		

.

FIEL

·. .

~~ • , •

Population within ½ mile of site:	Population within 1 mile of site:					
. 0-10	0-10					
□ 10-100	□ 10-100					
🛛 greater than 100	□ 100-1000					
	🛛 greater than 1000					
Surrounding land use (woodlot, agricultura	l. recreation, industrial, etc.)					
	· · · · · · · · · · · · · · · · · · ·					
NORTH Woodlot	EAST Industrial					
SOUTH	WEST Woodlot					
Industrial	Wood/ot					
Municipal water supply within 3-mile radius (note use of surface water and/or wells) Riverton Consulidated Water Co Surface water Steefton Reservoir - Wells Harrisburg Reservoir - Wells Reference: Topo map						
Domestic wells. Approximate number within List nearest wells below and show location						
Owner/Resident Add	ress Phone					
· · · · · · · · · · · · · · · · · · ·						
· · · · · · · · · · · · · · · · · · ·						
Groundwater flow direction, if known						
Toward the Susquehance River						
Description of odor/taste problems						
None						

State inspection activity (including permits held) Waste Management Permits *100758, *100759, and *100992 Air Quality Permit # 22-310-007 Expired June 30,1986 # 22-301-052 Expired Nov. 30,1986 Renumal issued Dec. 1, 1956 State/Federal/Private remedial activities None

Additional commentsFurthe	r description of site	
Pesidue Area B-1 is	lined with a puc liver a	while Residue Aren
A is unlined.		
•		•
SITE CONTACTS		
Name and Title	Affiliation	Phone
Bill Strauss	Superintendent	(717)236-5361
John Lukens	Maintenance Supervisor	
) 	
<u></u>		
,		
INSPECTION INFORMATION		
Name and title of increases	(s) Anthony L Rathton	
Name and title of inspector		<u> </u>
Agency DER	Phone nur	nber (717)457-4588
Date1/26/87	Time on s	site <u>3.5 Hrs.</u>

Weather conditions: Sunny, cold, light wind Low 30's.

ATTACHMENTS

۰.

, **.** .

- o Topographic map identifying site location. Include name of quadrangle map.
- o Site sketch map showing location of monitoring wells, domestic wells, municipal water supplies, and areas of concern (lagoons, leachate seeps, drums, etc.)
- o Any available sampling results or state monitoring data with map showing sample locations.

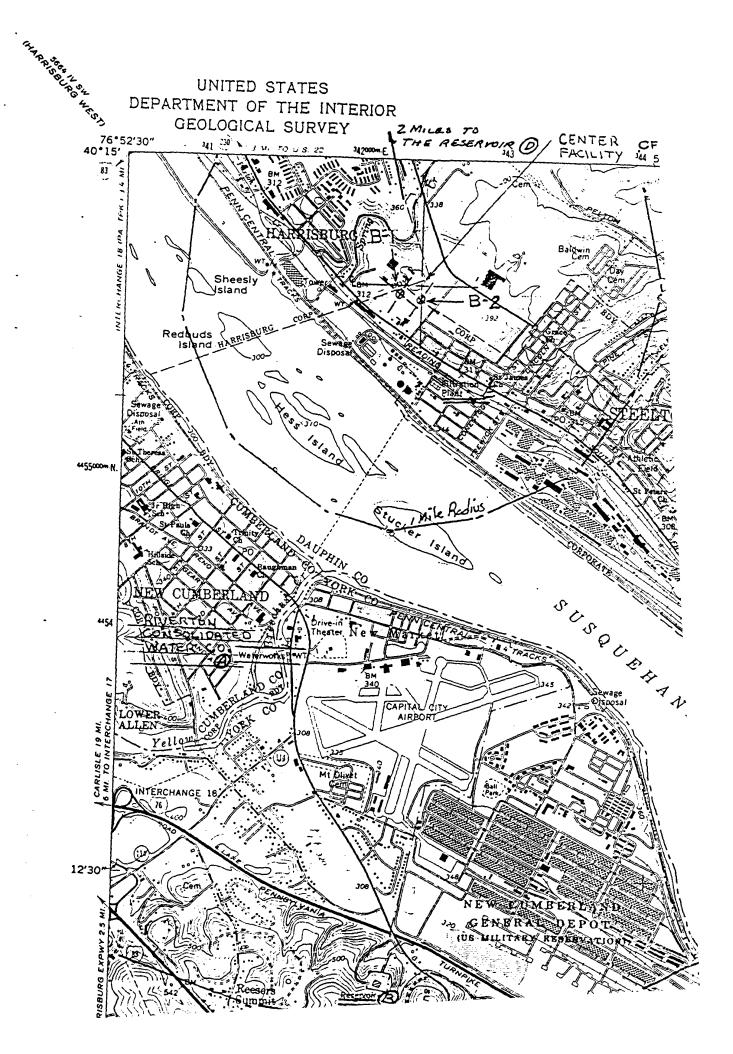
· . ·		17	-		-				
SITE	NAME	Harrisburg	Steam	Generatins	Facility	SITE	I.D.	NO.	PA . 0435
				. 7					

ACTIVITY:

- PA $ s$	JOINT PA	JOINT SI
Other (specify)		• •
NAME Anthony L. Rathfon	DATE 1/26/87	HOURS 6.0
11 11	1/27/87 1/28/87	2.0 5.0
 	1/30/87 2/1/87 2/3/87 2/6/87	7.5 3.0 4.5 4.5
))))	2/12/87 2/27/87	4.0 4.5
Francis P. Fair	5/19/87	3.0
(rance i		76.0 HRS

INSTRUCTIONS:

- 1. Complete & attach this form to each PA, SI, etc.
- 2. Submit this form separately for joint activities in cases where EPA/FIT will prepare the report.
- 3. Use a separate form for each site or project.
- 4. Report time to the nearest hundredth hour (e.g., 4.75)
- 5. Include supervisory time (quality review/assurance, etc.) and time spent preparing final report (typing duplicating, etc.)



A DIVISION OF SKELLY AND LOY 2601 North Front Street Harrisburg, PA 17110 (717) 232-0593

LABORATORY ANALYSIS REPORT

4668 NAME: CITY OF HARRISBURG PROJECT NO: ADDRESS: HARRISBURG STEAM GENERATING FA CLIENT NO: 160 1670 SOUTH 19TH STREET SAMPLE NO: 23181 HARRISBURG, PA 17104 ATTENTION: CHUCK KING DATE RECVD: 9/26/85 REF. NO: PO # 23896-85

THU, OCT 24 1985

SAMPLE IDENTIFICATION: WELL AT 19TH STREET FIELD

.

DATE: 9/30/85

	DETERMINATION	RESULTS	UNITS
	ANNUAL SAMPLE ANALYSIS		
AL	ALUMINUM, TOTAL	<. 1	MG/L
ALB	ALUMINUM, TOTAL ALBUMINOID NITROGEN ALKALINITY, TOTAL (as CaCO3)	<. 1	MG/L
ALKT	ALKALINITY, TOTAL (as CaCO3)	145	MG/L
	ARSENIC, TOTAL	<. 005	MG/L
BOD	BIOCHEMICAL OXYGEN DEMAND 5 DY	2	MG/L
	CADMIUM, TOTAL	<. 01	MG/L
CL	CHLORIDE	З	MG/L
COD	CHLORIDE CHEMICAL OXYGEN DEMAND CHROMIUM, TOTAL FLUORIDE IRON, TOTAL MANGANESE, TOTAL AMMONIA NITROGEN NITRITE NITROGEN NITRATE NITROGEN LEAD, TOTAL PH. LAB	2.7	MG/L
CR	CHROMIUM, TOTAL	<. 01	MG/L
F	FLUGRIDE	< 1	MG/L
FE	IRON, TOTAL	. 01	MG7L
MN	MANGANESE, TOTAL	. 20	MG/L
NHG	AMMONIA NITROGEN	<. 1	MG/L
N02	NITRITE NITROGEN	<. 005	MG/L
NOG	NITRATE NITROGEN	. 56	MG/L
PB	LEAD, TOTAL	<. 03	MG/L
PH	PH, LAB	7.84	PH UNITS
	PHOSPHORUS, ORTHO	<. 003	MG/L
SC	SPECIFIC CONDUCTANCE AT 250	318	UMHOS/CM
S04	SULFATE	38	MG/L
55	SUSPENDED SOLIDS	` <1	MG/L
STS	SETTLEABLE SOLIDS	0.3	ML/L
	TOTAL ORGANIC CARBON	<1	MG/L
TS	TOTAL SOLIDS (TOTAL RESIDUE)	261	MG/L

DAVID W. LANE LABORATORY MANAGER

ANALYTICAL LABURATURIES

A DIVISION OF SKELLY AND LOY

2601 North Front Street Harrisburg, PA 17110

(717) 232-0593

LABORATORY ANALYSIS REPORT

CITY OF HARRISBURG NAME: PROJECT NO: 4668 ADDRESS: HARRISBURG STEAM GENERATING FA 160 CLIENT NO: SAMPLE NO: 1670 SOUTH 19TH STREET 23139 HARRISBURG, PA 17104 ATTENTION: CHUCK KING DATE RECVD: 9/26/85 REF. NO: PO # 23896-85

THU, OCT 24 1985

SAMPLE IDENTIFICATION: WELL-EXIT SIDE OF BLDG

DATE: 9/26/85

ANNUAL SAMPLE ANALYSIS	
ALALUMINUM, TOTAL<. 1MG/LALBALBUMINOID NITROGEN<. 1	
ALKT ALKALINITY, TOTAL (as CaCO3) 295 MG/L	
AS ARSENIC, TOTAL C 005 MG/L	
BOD BIOCHEMICAL DXYGEN DEMAND 5 DY <1 MG/L	
CD CADMIUM, TOTAL <. 01 MG/L	
CL CHLORIDE 453 MG/L	
COD CHEMICAL OXYGEN DEMAND 10.4 MG/L	
CR CHROMIUM, TOTAL .02 MG/L	
F FLUORIDE C. 1 MG/L	
FE IRON, TOTAL .03 MG/L	
MN MANGANESE, TOTAL . 01 MG/L	
NH3 AMMONIA NITROGEN <. 1 MG/L	
ND2 NITRITE NITROGEN C.005 MG/L	
ND3 NITRATE NITROGEN 4.6 MG/L	
PB LEAD, TOTAL C. 03 MG/L	
PH PH, LAB 7.58 PH UN	ITS
PHPH, LAB7.58PH UNP040PHOSPHORUS, ORTHO.003MG/LSCSPECIFIC CONDUCTANCE AT 25C1,484UMHOS	
	/CM
SO4 SULFATE 212 MG/L	
SS SUSPENDED SOLIDS <1 MG/L	
STS SETTLEABLE SOLIDS <. 1 ML/L	
TOC TOTAL ORGANIC CARBON 3.3 MG/L	
TS TOTAL SOLIDS (TOTAL RESIDUE) 1,418 MG/L	

DAVID W. LANE

LABORATORY MANAGER

ANALTIIVAL LABURAIURICO

A DIVISION OF SKELLY AND LOY

2601 North Front Street Harrisburg, PA 17110 (717) 232-0593

LABORATORY ANALYSIS REPORT

NAME: CITY OF HARRISBURG PROJECT NO: 4668 160 HARRISBURG STEAM GENERATING FA CLIENT NO: ADDRESS: 1670 SOUTH 19TH STREET SAMPLE NO: 23138 HARRISBURG, PA 17104 DATE RECVD: 9/26/85 ATTENTION: CHUCK KING REF. NO: PO # 23896-85

THU, OCT 24 1985

SAMPLE IDENTIFICATION: WELL B1

DATE: 9/26/85

		•	
-TEST-	DETERMINATION	RESULTS	UNITS
	ANNUAL SAMPLE ANALYSIS		
AL	ALUMINUM, TOTAL ALBUMINDID NITROGEN	<. 1	MG/L
ALB	ALBUMINDID NITROGEN	. 3	MG/L
ALKT	ALKALINITY, TOTAL (as CaCO3)	. 3 430	MG/L
AS	ARSENIC, TOTAL	<. 005	MG/L
	BIOCHEMICAL OXYGEN DEMAND 5 DY	2.9	MG/L
CD	CADMIUM, TOTAL	<. 01	MG/L
CL	CHLORIDE	28	MG/L
COD	CHEMICAL DXYGEN DEMAND	29.5	MG/L
CR	CHROMIUM, TOTAL	. 03	MG/L
F	FLVORIDE	<. 1	MG/L
FE	IRON, TOTAL	. 83	MG/L
MN	MANGANESE, TOTAL	. 31	MG/L
NHG	AMMONIA NITROGEN	<. 1	MG/L
	NITRITE NITROGEN	<. 005	MG/L
NO3	NITRATE NITROGEN	5.3	MG/L
РВ	LEAD, TOTAL	<. 03	MG/L
РН	PH, LAB	7. 31	PH UNITS
P040	PHOSPHORUS, ORTHO	. 003	MG/L
SC	SPECIFIC CONDUCTANCE AT 250	1,908	UMHOS/CM
S04	SULFATE	42	MG/L
SS	SUSPENDED SOLIDS	<1	MG/L
STS	SETTLEABLE SOLIDS	<. 1	ML/L
тос	TOTAL ORGANIC CARBON	11	MG/L
TS	TOTAL SOLIDS (TOTAL RESIDUE)	1,389	MG/L
	میں بہت سے ایک ایک ایک بلیا ہے۔ ایک دینے کے ایک میں پرو ایک میں بالا جو ایک ایک ایک ایک ایک ایک ایک دینے ہے جب سے ایک ایک ایک		

DAVID W. LANE LABORATORY MANAGER

ANALYTILAL LABUKATUKIES

A DIVISION OF SKELLY AND LOY

2601 North Front Street Harrisburg, PA 17110 (717) 232-0593

LABORATORY ANALYSIS REPORT

NAME: CITY OF HARRISBURG PROJECT NO: 4668 ADDRESS: HARRISBURG STEAM GENERATING FA CLIENT NO: 160 1670 SOUTH 19TH STREET 23141 SAMPLE NO: HARRISBURG, PA 17104 CHUCK KING DATE RECVD: 9/26/85 ATTENTION: REF. NO: PO # 23896-85

THU, OCT 24 1985

SAMPLE IDENTIFICATION: DOWNSTREAM AT CAMERON

DATE: 9/26/85

-TEST-	DETERMINATION	RESULTS	
	ANNUAL SAMPLE ANALYSIS		
AL	ALUMINUM, TOTAL	<. 1	MG/L
	ALBUMINDID NITROGEN	<.1 .2	MG/L
ALKT	ALKALINITY, TOTAL (as CaCO3)	172	MG/L
AS	ARSENIC, TOTAL	<. 005	MG/L
BOD	BIOCHEMICAL OXYGEN DEMAND 5 DY	<1	MG/L
CD	CADMIUM, TOTAL	<. 01	MG/L
CL	CHLORIDE	31	MG/L
COD	CHEMICAL DXYGEN DEMAND	4.1	MG/L
CR	CHREMTUM, TETAI	<. 01	MG/L
F	FLUORIDE	<. 1	MG/L
FE	IRON, TOTAL	. 10	MG/L
MN	FLUGRIDE IRON, TOTAL MANGANESE, TOTAL AMMONIA NITROGEN NITRITE NITROGEN NITRATE NITROGEN LEAD, TOTAL PH, LAB	. 02	MG/L
NHG	AMMONIA NITROGEN	<. 1	MG/L
N02	NITRITE NITROGEN	. 008	MG/L
NO3	NITRATE NITROGEN	3.7	
PB	LEAD, TOTAL	<. 03	MG/L
PH	PH, LAB	8.07	PH UNITS
P040	PHOSPHORUS, ORTHO	. 047	MG/L
SC	SPECIFIC CONDUCTANCE AT 250	435	UMHOS/CM
	SULFATE	42	
		<1	
		<. 1	
	TDTAL ORGANIC CARBON		MG/L
	TOTAL SOLIDS (TOTAL RESIDUE)		MG/L

DAVID W. LANE LABORATORY MANAGER

ANALYTICAL LABURATURIES

A DIVISION OF SKELLY AND LOY

2601 North Front Street Harrisburg, PA 17110

.

(717) 232-0593

LABORATORY ANALYSIS REPORT

CITY OF HARRISBURG NAME: PROJECT NO: 4668 HARRISBURG STEAM GENERATING FA ADDRESS: CLIENT NO: 160 1670 SOUTH 19TH STREET 23140 SAMPLE NO: HARRISBURG, PA 17104 ATTENTION: CHUCK KING DATE RECVD: 9/26/85 REF. NO: PO # 23896-85

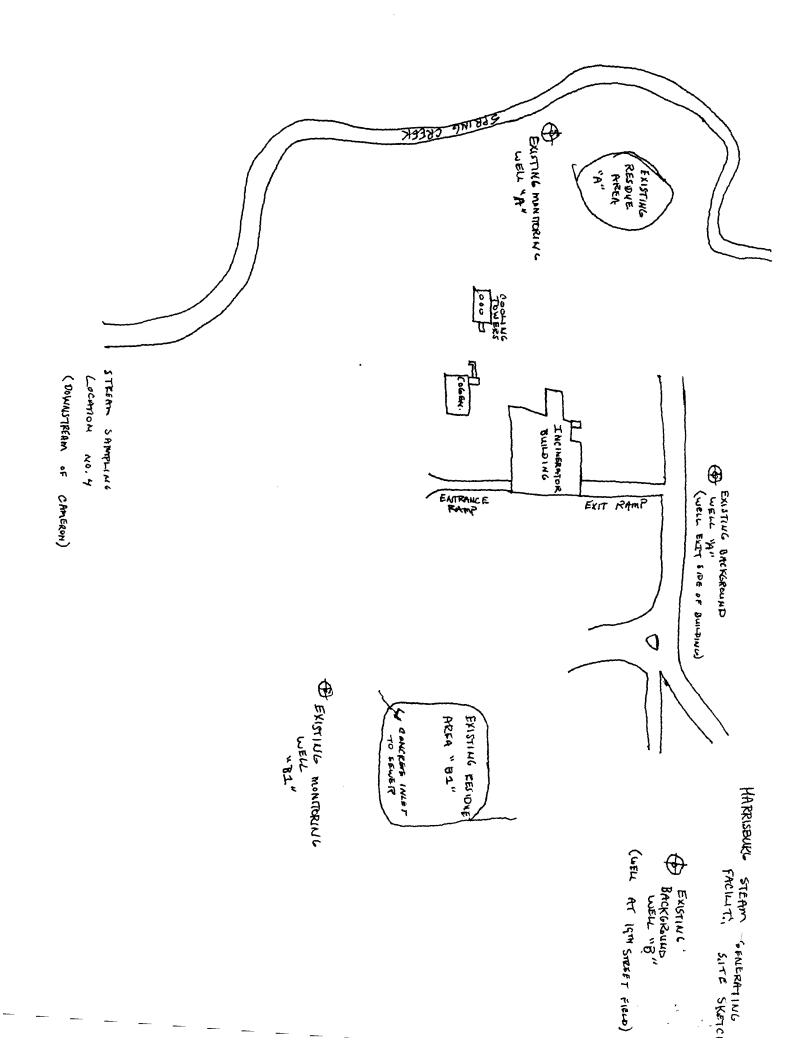
THU, OCT 24 1985

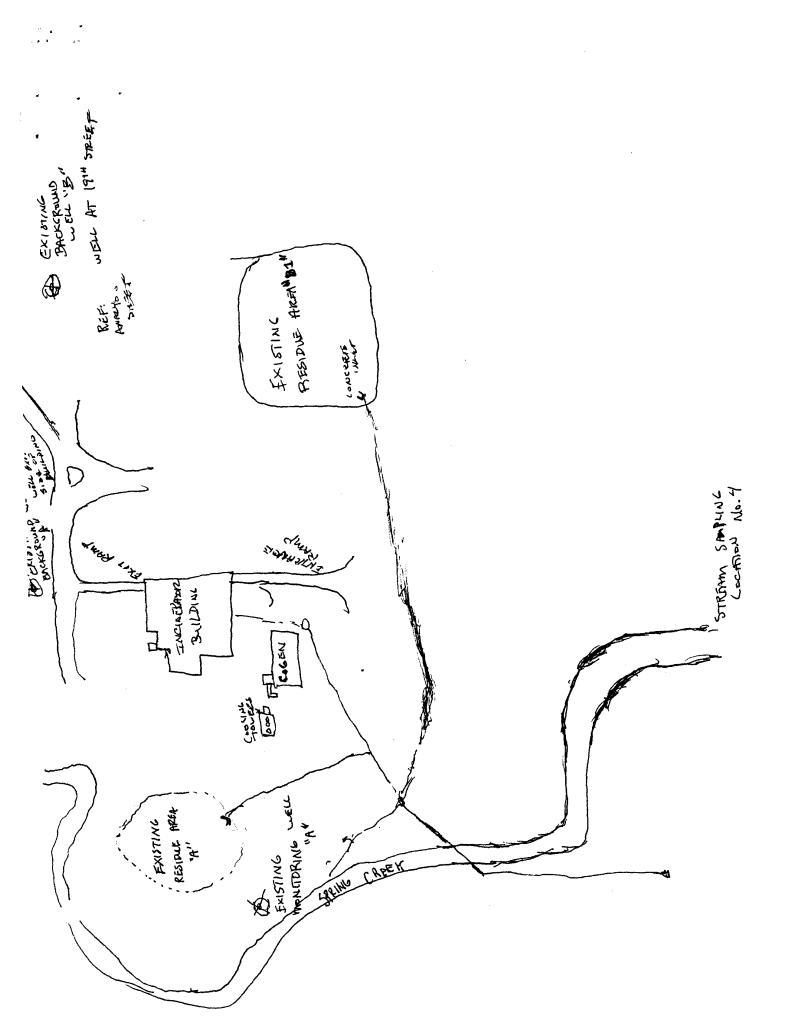
SAMPLE IDENTIFICATION: UPSTREAM AT 19TH STREET

DATE: 9/26/85

-TEST-		RESULTS	UNITS
	ANNUAL SAMPLE ANALYSIS		MO //
AL	ALUMINUM, TOTAL	<. 1	MG/L
ALB		. 2	MG/L
	ALKALINITY, TOTAL (as CaCO3)	167	MG/L
AS	ARSENIC, TOTAL	<. 005	MG/L
BOD	BIOCHEMICAL OXYGEN DEMAND 5 DY	<1	MG/L
CD	CADMIUM, TOTAL	<. 01	MG/L
CL	CHLORIDE	29	MG/L
COD	CHEMICAL OXYGEN DEMAND	14.1	MG/L
CR	CHREMIUM, TOTAL	. 01	MG/L
F	FLUGRIDE	<. 1	MG/L
FE	IRON, TOTAL	. 12	MG/L
MN	MANGANESE, TOTAL	. 02	MG/L
	AMMONIA NITROGEN	. 2	MG/L
	NITRITE NITROGEN	. 023	MG/L
	NITRATE NITROGEN	3.9	MG/L
	LEAD, TOTAL	<. 03	MG/L
	PH, LAB	7.89	PH UNITS
	PHOSPHORUS, ORTHO	. 075	MG/L
	SPECIFIC CONDUCTANCE AT 250	413	UMHOS/CM
	SULFATE	44	MG/L
	SUSPENDED SOLIDS	<1 <1	MG/L
			ML/L
		<. 1	
	TOTAL ORGANIC CARBON	4.7	MG/L
TS	TOTAL SOLIDS (TOTAL RESIDUE)	317	MG/L

DAVID W. LANE LABORATORY MANAGER





Please print or type with ELITE type (12 characters per inch) in the unshaded areas	only	Form Appro	oved. OMB No. 205	0-0028. Expires 9-30-88. GSA No. 0246-EPA-07			
United States Environmental Pro Washington, DC 204	tection Agency		Filing Notificati	the <i>Instructions for</i> <i>ion</i> before completing nformation requested			
SEPA Notification of Hazardous	s Waste	Activity	here is require 3010 of the Re	red by law (Section esource Conservation			
For Official Use Only			and Recovery A	4 <i>Cl).</i>			
	ments		······································				
Installation's EPA ID Number	Approved	Date Receiv (yr. mo.	ved day)	n 042			
c P A b f f f f f f f f f f		PROG		Doublin			
I. Name of Installation	an a say at bay spin at	010101/	Contraction of the second				
HARRISPURG STEA	N1 /1	Ks Z	TQ				
II. Installation Mailing Address	a palasi se ang	i par i e Marin e de la c					
	or P.O. Box		CITY of	HBG- 001			
3/0+B & WA/WWT.	57						
			State	ZIP Code			
4 H AR R 1 36 UR9			Pa	17105			
	oute Number		يسيايا کار در ارونه که په کې کې کې کې کې د د د د د د د د د د د د د د د د د د د				
$\frac{c}{5}$ / 0 + 6 + WA / $\frac{1}{4}$	5 A						
City or Town			State	ZIP Code			
6 HARRIS GURG			Pa	17105			
IV. Installation Contact	د ، د د مندو الروس (ماه و الروس) د	، المنشقة موليا الجامع من الم	an shere says at	an dana ging baddaran (1995). Talain			
Name and Title (last, first, and job title)		Pho	ne Number (area	a code and number)			
2 AONTE AMES E	NgA	5871	723	13887			
V. Ownership A. Name of Installation's Legal Owner	er en en en en en en en en en en en en en		B. Type of O	wnership <i>(enter code)</i>			
RHARRIS NURA STE	A M'N	K5, KT	1	2			
VI. Type of Regulated Waste Activity (Mark 'X' in the ap	propriate box						
A. Hazardous Waste Activity 1a. Generator 1b. Less than 1,000 kg/mo.		B. Used C ecification Used					
2. Transporter	(enter	'X' and mark appro	A Stant	2007			
3. Treater/Storer/Disposer		. Generator Market		•			
☐ 4. Underground Injection ☐ 5. Market or Burn Hazardous Waste Fuel		. Other Market	ی 1 ت ۹۴	28			
(enter 'X' and mark appropriate boxes below) a. Generator Marketing to Burner		. Burner ication Used Oil Fu	et Maskatar (or (n site Rurnerl			
b. Other Marketer	Who F	irst Claims the Oil	Meetsthe Speli	fication			
VII. Waste Fuel Burning: Type of Combustion Device (en	ter 'X' in all appro	opriate boxes to inc	licate type of con	bustion device(s) in			
which hazardous waste fuel or off-specification used oil fuel is burned.	See instructions	for definitions of o	ombustion devic	es, FE			
A. Utility Boiler B. Industrial Boiler Industrial Parnace							
	ther (specify)		APR 15	500			
IX. First or Subsequent Notification							
Mark 'X' in the appropriate box to indicate whether this is your instal notification. If this is not your first notification, enter your installation's	llation's first not EPA ID Number	tification of hazard in the space provid	ous waste activ	ity of a subsequent			
A. First Notification B. Subsequent Notification (complete it)	em C)	C. In	stallation's EPA	ID Number			

EPA Form 8700-12 (Rev. 11-85) Previous edition is obsolete.

-

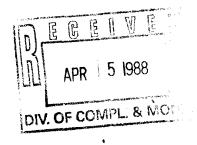
Continue on reverse

							Ċ	<u> </u>		<u> </u>	For Official			<u>î</u>	
								-						ľ	
	Descri	ation of	Hazar	dous Wastes	lean	tinued from									
				onspecific Sour			<u>-</u>	hor from		last 261	21 for each	listed bas	ardoue	40010	
				ur installation h								113104 1164		vasio	
		1	TT	2	TΤ	3			4 -	ТТ	5			6	
			1 -		1					1 F				ل از ا	
					JL					_ L					
		7		8		9			10		11			12	
				pecific Sources. lation handles. L					FR Part :	201.32	for each liste	d nazaro	ous was	te from	
-		13	1 1-	14	T-T	15			16		17	<u> </u>	1	18	
		Ť T	1		1 1		-1 1		<u>Г</u> Т	┥┢					
'															
		19		20] [21			22] [23			24	
	<u> </u>	25	$+$ \vdash	26	┥┝	27		<u> </u>	28	┥┝	29	<u> </u>	<u>├</u>		l
		25	┥┝╴		┥┝				28	- -	29			30	
				32		33			34		35	□.		36	
		37	┥┝	38		39			40	┥╽	41			42	
			11												
		43	┥┝			45	-1	┝╼╼╾┷╼╍╍	46	┥┟	47			48	<u> </u>
		<u> </u>	7 Г							7 1					
												<u>i l</u>			
				Enter the four-di arch laboratories								n hospita	ls, veter	inary h	0 \$-
												<u> </u>			
		49	-1	50	+	51			52	┨┟	53			<u>54</u>	
					1 1										
	your inst	allation h	andles. /S itable	ed Hazardous W See 40 CFR Parts	s 261.	21 — 261.24) 2. Corrosive	e boxes (correspon	- 3. R	Bactive	acteristics of	nonlisted	□ 4. T	oxic	stes'
XI	. Certi	<i>(D0)</i> ication				(D002)	ang ag a			003)	81 1 1 4 1 4	to its acc	/	000)	1. 30
	this ai obtain	nd all at ing the	tached informa	y of law that documents, a ation, I believe benalties for s	and t ethai	hat based of the submitt	n my ir ed info	nquiry o rmation	f those is true	indivi . accui	iduals imm rate, and co	ediatel) mplete	/ respo . I am a	onsible ware	e foi thai
Sic	nature							ial Title /		-			Signed		
- 16	- n	0	1	<u>_</u>									2/25		2
	Jan		<u> </u>	NTO.		1 1	- e -	D. C.	`~ ·				162	/00	,

ĩ

.

EPA	ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY (VERIFICATION)					
This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act(RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.						
documents required under Subti	the C of RCRA.					







All all and the

Envirite corporation

TECHNOLOGY FOR THE ENVIRONMENT

January 13, 1988

Ms. Serena A. DiMagno DiMAGNO ASSOCIATES, INC. 227 State Street Harrisburg, PA 17101

RE: Harrisburg Steam Works

Dear Serena:

Thank you for the opportunity to analyze the samples of sludge from the Harrisburg Steam Works. Enclosed please find our service proposals to handle the sludges from the steam process.

Our analyses have shown that these wastes can be delisted by our ENVIRITE treatment service. Treatment to delist removes your RCRA liabilities because your waste will no longer be chemically or legally recognized as hazardous. After our laboratory has verified our aftertreatment results, we will provide written certification to document this successful delisting. No other waste disposal option provides this unique benefit.

Enclosed are two "Module I" forms which must be approved by the PA D.E.R. prior to our acceptance of your waste. Waste generators are responsible for completing sections II, V and VI. ENVIRITE can perform the organic and inorganic analysis usually necessary to complete the "Module I" for a one-time fee of \$600.00 each. If you have any guestions, please call. We will be happy to assist you with any part of your portion.

Thank you for your interest in ENVIRITE. We look forward to future business together.

Sincerely,

ENVIRITE CORPORATION

Matthew C Kichmen

Matthew C. Kichman Technical Service Representative

MCK:11 enclosure



KLETT LIEBER ROONEY & SCHORLING

ATTORNEYS AT LAW

40TH FLOOR, ONE OXFORD CENTRE PITTSBURGH, PENNSYLVANIA 15219-6498 TELEPHONE (412) 392-2000

Howard J. Wein (412) 392-2160

October 19, 1990

DER WASTE MARAGEMENT

FACSIMILE (412) 392-2128

OCT 2 3 1990

HARRISBURG HEGION

Michael R. Steiner Assistant Regional Director Bureau of Waste Management Harrisburg Regional Office One Ararat Boulevard Harrisburg, PA 17116

Dear Mr. Steiner:

This letter is written in response to your letter of April 20, 1990, affirming the Department's position that certain batches of ash generated by the City's resource recovery facility (the "Facility") can be characterized as hazardous under state law, and thus must be disposed of as a hazardous waste.

Based on its understanding that such letter did not represent a final action by the Department, the City has taken the opportunity to consider fully the Department's position and its impact on the City and the Facility. After careful evaluation of federal and state laws and policies, as well as present, and perhaps future, costs of complying with the Department's interpretation of the law with respect to ash generated by resource recovery facilities, the City must respectfully disagree with the Department's position.

The City believes that the ash from the Facility is exempt under law from regulation as a hazardous waste; that safe disposal should be the main focus and that safety is best served by disposal at the City's B-2 site; that the cost of disposing of the ash as a hazardous waste is exorbitant and a threat to the existence of an environmentally beneficial facility; and that the DER's characterization of the ash as hazardous is in error.

Section 3001(i) of the Resource Conservation and Recovery Act, 42 U.S.C. §§ 6901, 6941(i) ("RCRA"), as interpreted by two recent federal cases, clearly exempts ash generated by resource recovery facilities from regulation as a hazardous waste. <u>Environmental Defense Fund v. Wheelabrator Technologies,</u> <u>Inc.</u>, No. 88 Civ. 0560 (S.D.N.Y. Nov. 21, 1989), <u>Environmental</u> <u>Defense Fund v. City of Chicago</u>, 84 C 3045 (N.D.Ill. Nov. 8, 1989). The City believes that the state is bound by this interpretation as well. Section 3001(i) initially exempted household waste from regulation under Subchapter C of RCRA. KLETT LIEBER ROONEY & SCHORLING

Michael R. Steiner Page 2 October 19, 1990

Pennsylvania adopted this exemption in the Solid Waste Management Act, 35 P.S. § 6018.10, et seq. ("SWMA"), and regulations interpreting it. 25 Pa. Code § 75.261(c)(6). Further, Pennsylvania, pursuant to Section 6926 of RCRA, developed its hazardous waste program to achieve primary authority for hazardous waste management activities within its borders. When Congress clarified that household waste was exempt from regulation as a hazardous waste by specifically acknowledging that ash generated by resource recovery facilities could qualify for this exemption, Pennsylvania, while not specifically adopting the clarification, did not reject it and so is bound by it.¹

Furthermore, Congress deliberately acted to verify that ash is included in the household waste exemption in accord with its policy to encourage resource recovery facilities. While a state may enact more stringent regulations than the federal government, it cannot act in conflict with clearly stated federal policy. <u>ENSCO, Inc. v. Dumas</u>, 807 F.2d 243 (8th Cir. 1986). By requiring the Facility to incur enormous expense, at a threat to its very existence, to dispose of its ash as a hazardous waste, the state is in direct conflict with a clear federal policy favoring resource recovery facilities. <u>See Wheelabrator; City of</u> Chicago.

Several bills pending before Congress concerning resource recovery facilities focus on the safe disposal of ash generated by such facilities. H.R. 2162, S. 196. The City's ash could be safely disposed of at the B-2 site. The technical specifications for the B-2 ash monofill, designed and constructed in accordance with current municipal waste regulations which went into effect in April, 1988, are more stringent than the specifications currently under consideration by Congress in the abovereferenced bills. Indeed, in nearly every technical aspect, the B-2 site is essentially the equivalent of a hazardous waste landfill under both current and proposed Pennsylvania regulations. Safety concerns will also be served by the elimination of the need to transport the ash great distances to a hazardous waste treatment or disposal facility. Based upon the above, it is the City's belief that the risk to the environment will be minimized if the City is permitted to dispose of the ash at the newly permitted and soon to be completed double-lined B-2 site.

¹ After Congress amended RCRA in 1984 and included this clarification, the Environmental Quality Board amended its hazardous waste regulations, without rejecting the application of this exemption.

KLETT LIEBER ROONEY & SCHORLING Michael R. Steiner Page 3 October 19, 1990

> The financial impact of handling and disposing of the ash as hazardous, however, could be financially devastating to the Facility and its customers, and further, could be harmful to the environment in the long run. The economic consequences caused by substantial additional ash disposal costs, over and above what the City has expended to design and construct the B-2 site, will cause a hardship to Harrisburg, its citizens and to other customers of the Facility including the Commonwealth. In addition, the state may risk the loss of a valuable resource recovery facility which conserves landfill space by reducing the volume needed for disposal, and generates steam and electrical energy as well.

> Finally, the City contends that the characterization of the ash as hazardous is improper, in that it relies on the EP toxicity test, which has frequently been criticized as being an inaccurate indicator of the presence of hazardous substances in ash material. The City believes it has adequate safeguards in place at the Facility to prevent the acceptance of hazardous waste. (See attached Rules and Regulations of Facility, which are disseminated to all users of the Facility.) The City contends that the resulting ash, which has occasionally barely exceeded the limitations for lead by virtue of the EP toxicity test, is not hazardous, and may safely be disposed of at the B-2 site.

If you have any questions on the City's position with respect to this issue, please call me.

Very truly yours,

them Milein Howard J. Wein

HJW/mts Enclosure

cc: Hon. Stephen R. Reed (w/o encl.)
 John Lukens (w/o encl.)
 Daniel R. Lispi (w/o encl.)
 Michael J. Heilman, Esq. (w/encl.)

86019-01

LAW OFFICES OF

SOCHA AND MAFFETT

2201 North Second Street Harrisburg, Pennsylvania 17110 JAN 25 1989

BRINJAC, KANDIC & ASSOC., INC.

FRANCIS M. SOCHA RICHARD F. MAFFETT, Jr.

January 23, 1989

Telephone (717) 233-4141

David A. Brinjac BRINJAC, KAMBIC & ASSOCIATES 910 N. Second Street Harrisburg, PA 17102

> Re: City of Harrisburg Harrisburg Steam Generating Facility Residue Disposal Area B, Site B-2 BKA No. 86019-01

Dear Mr. Brinjac:

In reference to your correspondence dated January 20, 1989, please be advised that, as attorney for Thomas J. Flynn, I am authorized to inform you that Mr. Flynn does not desire a sample of the Downtown Carwash well for purposes of obtaining certain construction and consumption information.

Please do not hesitate to contact the undersigned if you have any further questions in regard to this matter.

Sincerely, Francis M. Socha

FMS/spr

pc: Thomas J. Flynn

ER-WM-23: Rev. 10/85

Commonwealth of Pennsylvania Department of Environmental Resources Bureau of Waste Management

KOZ JAK ANJHOW Y HALL CALK FILE H by INC DAU / HIN CO WI ON WARR

SERVICE REQUEST

Received by F.P.FAJR		Time 8:15	Date // 2
Person requesting service JOHN LYKENS	Program	Municipality HARRES BARD	County DA4PHIN
Address HARRESBARG ENCENERATOR	Assigned to	YR.	Date /// 2
City HARL 55 BURG Z36-6455	Priorities		te Needed
Alleged Violator SULPIAUREC ACED SPICL	Urgent	72	4 Hours
Jacpitance in car Spice	Routine		
	Low Priority		
SPILL - OCCOURED 11/1/89	1:30 PM	950 galo	2 K
SPICE - OCCOURED 11/1/89 SUCPHUNJC ACTO SPICCED FRO	MA LEAKEN	IG LENE I.	NTO A
CONTATIONENT MONT. OHM	NATERIALS	AND ECO	REALE
RESPONDED - PUMPED AC.	TO BACK.	ENTO THI	
NEUTRACELED RESDUE I.	N THE MAN	al 8 A	
RESIDERE INTO THE SAW.	LTARG SE		
Directions			
Action or Findings	· · ·		<u> </u>
Completed by	Data		Hours
Completed by	Date		Hours

. NBG file Tracking

Horribus Star Great Specifity Correspondence

Evergreen Environmental, Inc.

June 9, 1993

Mr. Leif Ericson Regional Air Pollution Control Engineer Southcentral Region Office Pennsylvania DER One Ararat Boulevard Harrisburg, PA 17110



Dear Leif:

As I discussed with you during our phone conversation, the City of Harrisburg is encountering difficulties finding sufficient quantities of waste to enable them to repay the bonds they were planning to issue to upgrade the Harrisburg Resource Recovery Facility. Ironically, the shortage of waste available to Harrisburg is in part related to DER's Municipal Waste Planning, Recycling, and Waste Reduction Program implemented under the provisions of Act 101. The planning provisions of DER under this Act, and the local county plans developed under this Act, have essentially removed large market shares for a 10 year period and prevented the City from attracting these wastes. The City currently has an appeal of the approval of the Dauphin County Plan in Commonwealth Court to determine whether the Plan's prevention of these wastes was legal. In addition, the Governor's Executive Order, the proposed Pennsylvania Waste Shed Legislation, and similar proposals in Congress have all made the City's efforts to secure contracts for wastes more difficult The stark reality is that if waste streams are not found, revenues are not guaranteed, bonds cannot be issued, and money for upgrade of the facility will not be available.

In spite of the current difficulties, Harrisburg remains fully committed to proceeding with the upgrade and the City is working diligently trying to find other waste streams which they can capture. For example, I have been working with the City and their engineer to gain approval to take certain residual wastes which could be safely handled by the facility. It now appears unlikely that the schedule which the City presented to you can be maintained and I was asked by Dan Lispi and John Lukens for advice in attempting to secure an extension of the time by which they must be in compliance. In my initial discussions with the City and DER on this issue, I was of the understanding that there was a deadline under the CAA for municipal waste combusters to be in compliance in Pennsylvania by February 11, 1995, and that there were SIP implications for failure to meet this deadline. However, in discussing this situation with Central Office, I was told that Pennsylvania had never submitted a Plan for designated facilities and that there were no SIP implications of extending a compliance deadline for the incinerator. Furthermore, the federal regulations which address the adoption and submittal of state plans for designated facilities, Part 60, Subpart B, specifically allow States to provide for less stringent emission standards or longer compliance schedules, provided that the State demonstrates:

- 1. Unreasonable cost of control resulting from plant age, location, or basic process design;
- 2. Physical impossibility of installing necessary control equipment; or
- 3. Other factors specific to the facility that make application of a less stringent standard or final compliance time significantly more reasonable.

These specific exemptions are found at §60.24 (f).

My purpose in writing to you is to ask if DER would consider a convincing demonstration by the City of one or more of these above factors relative to an extension of the compliance time for the Harrisburg Resource Recovery Facility beyond the February 1995 deadline. I have enclosed copies of what I believe are the relevant federal requirements for your review. We would be happy to meet with you to discuss these issues.

Sincerely,

Fred P. Osman

cc: Mr. Salvaggio Mr. Steiner