

WA7890008967

DOE/RL-88-21

Form 1-PNL

01/09/95

FORM	State of Washington Department of Ecology  WASHINGTON STATE DANGEROUS WASTE PERMIT GENERAL INFORMATION (Read "Form 1 Instructions" before starting)	I. EPA/STATE I.D. NUMBER <table border="1" style="width:100%; text-align: center;"> <tr> <td>W</td><td>A</td><td>7</td><td>8</td><td>9</td><td>0</td><td>0</td><td>0</td><td>8</td><td>9</td><td>6</td><td>7</td> </tr> </table>	W	A	7	8	9	0	0	0	8	9	6	7
W	A	7	8	9	0	0	0	8	9	6	7			

II. NAME OF FACILITY					
US DEPARTMENT OF ENERGY - HANFORD FACILITY					
III. FACILITY CONTACT					
A. NAME & TITLE (last, first, & title)				B. PHONE (area code & no.)	
WAGONER, JOHN MANAGER				509 376 7395	
IV. FACILITY MAILING ADDRESS					
A. STREET OR P.O. BOX					
PO BOX 550					
B. CITY OR TOWN			C. STATE	D. ZIP CODE	
RICHLAND			WA	99352	
V. FACILITY LOCATION					
A. STREET, ROUTE NO., OR OTHER SPECIFIC IDENTIFIER					
HANFORD SITE					
B. COUNTY NAME					
BENTON					
C. CITY OR TOWN			D. STATE	E. ZIP CODE	F. COUNTY CODE
RICHLAND			WA	99352	005
VI. SIC CODES (4-digit, in order of priority)					
A. FIRST			B. SECOND		
8733	RESEARCH, NONCOMMERCIAL		9999	NONCLASSIFIABLE	
C. THIRD			D. FOURTH		
VII. OPERATOR INFORMATION					
A. NAME					B. Is the name listed in item VII-A also the owner? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO **
DEPARTMENT OF ENERGY, RICHLAND OPERATIONS					
PACIFIC NORTHWEST LABORATORY (PNL)					
C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box; if "Other", specify)				D. PHONE (area code & no.)	
F = FEDERAL	M = PUBLIC (other than federal or				

S = STATE P = PRIVATE	state) O = OTHER (specify)	F (specify)	509 376 7395	
E. STREET OR P.O. BOX			509 375-6600	
PO BOX 550 / PO BOX 999				
F. CITY OR TOWN		G. STATE	H. ZIP CODE	VIII. INDIAN LAND
RICHLAND		WA	99352	Is the facility located on Indian lands? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
** DOE-RL: OWNER/OPERATOR		PNL: CO-OPERATOR FOR CERTAIN UNITS ON THE HANFORD SITE		
IX. MAP				
Attach to this application a topographic map of the area extending to at least one mile beyond property boundaries. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers, and other surface water bodies in the map area. See instructions for precise requirements.				
X. NATURE OF BUSINESS (provide a brief description)				
<ul style="list-style-type: none"> • RESEARCH, NONCOMMERCIAL • NONCLASSIFIABLE-OPERATIONS AND MANAGEMENT SERVICES 				
XI. CERTIFICATION (see instructions)				
I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the application, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.				
A. NAME & OFFICIAL TITLE (type or print)		B. SIGNATURE		C. DATE SIGNED
SEE ATTACHMENT				

FORM 1

DANGEROUS WASTE PERMIT GENERAL INFORMATION

XI. OPERATOR CERTIFICATION

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

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

1/9/95
Date

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

10/28/94
Date

