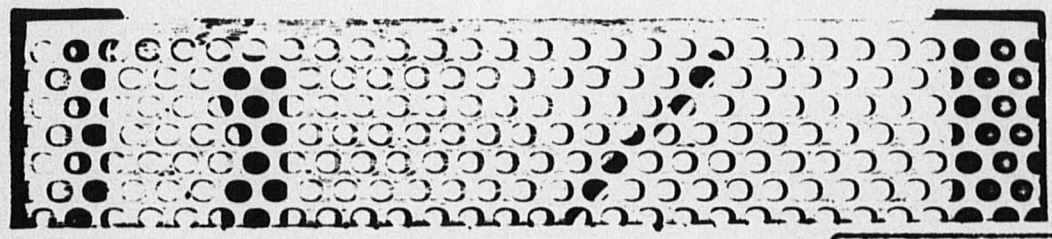


19.6.1

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Site: WELLS G&H
Date: 19.6
19.6.1

WELLS G AND H
ADMINISTRATIVE RECORD

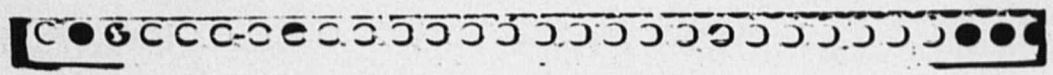
EPA **ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY (VERIFICATION)**

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.

EPA I.D. NUMBER	• HAD073814675
INSTALLATION ADDRESS	GRACE W R & CO INC 369 WASHINGTON ST WOBURN MA 01801
	369 WASHINGTON ST WOBURN MA 01801

EPA Form 8700-12B (4-80) 09/26/80

WEL 007



2638 F

CRYOVAC

PACKAGING/MARKETING SYSTEMS

October 10, 1980

*Changed
11/19
EK*

EPA Region I
Permits Branch
P. O. Box 8748
Boston, Mass. 02114

Reference: RCRA
Notification of Hazardous Waste Activity
W. R. Grace & Co.
369 Washington St.
Woburn, Mass. 01801
EPA ID # MAD073814675

Dear Sir:

In August 1980, a Notification of Hazardous Waste Activity Form was filed with the EPA for the above referenced plant site. In filing the application, Box VI A, Generation and Box VI C, Treat/Store/Dispose were checked. After a thorough understanding of the Resource Conservation and Recovery Act Regulations, it has been determined that this plant site is only a Generator of Hazardous Waste. All hazardous wastes generated will be removed from our site in less than 90 days and disposed of at an off-site EPA Registered disposal facility. Thus, we are excluded from the requirements to obtain a permit as provided in 40 CFR 262.34 and EPA Permit Application Forms "Part A" will not be filed.

We are striving to insure a clean environment through the best waste handling procedures. Please let me know if any additional information is required.

Yours truly,

Sam M. Knight
Sam M. Knight
Division Environmental Control Officer

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WELLS G AND H
ADMINISTRATIVE RECORD

WEL 007

2639

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RCRA
FILE DOCKET

GRACE WR & CO CRYOVAC DIV
369 WASHINGTON ST
WOBURN

MA 01801

MAD073214675

R V SHALLINE

DATE	DOCUMENT DESCRIPTION	CLIP #
	Docket	1
	Checkout Card	2
8/5/80	Notification	2

WELLS G AND H
ADMINISTRATIVE RECORD

WEL 007

2640

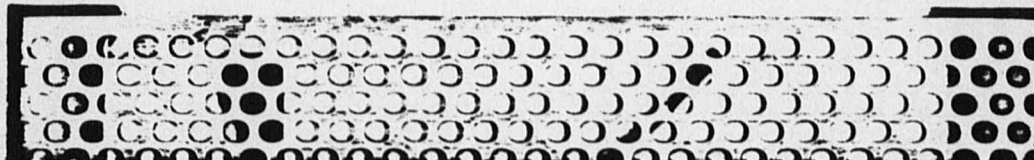
CROSS-REFERENCE LOG

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WELLS G AND H
ADMINISTRATIVE RECORD

WEL 007

2641



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.

EPA I.D. NUMBER

HAD073814675

GRACE W R & CO INC
369 WASHINGTON ST
WOBURN

MA 01801

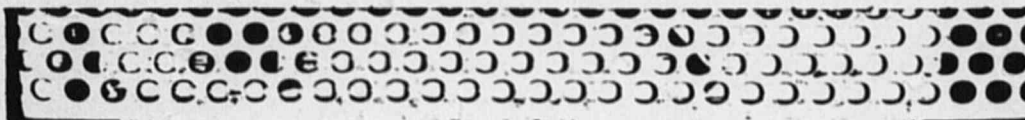
INSTALLATION ADDRESS

369 WASHINGTON ST
WOBURN

MA 01801

EPA Form 8700-12B (4-80)

09/26/80



Please print or type with ELITE type (12 characters/line) in the unshaded areas only.

Form Approved OMB No. 158-S79016
GSA 0246-EPA-07

EPA U.S. ENVIRONMENTAL PROTECTION AGENCY		NOTIFICATION OF HAZARDOUS WASTE ACTIVITY	
INSTALLATION'S EPA I.D. NO.	MAD073814675		
I. NAME OF INSTALLATION	GRADE W R & CO INC		
II. INSTALLATION MAILING ADDRESS	369 WASHINGTON ST WOBURN MA 01801		
III. LOCATION OF INSTALLATION	369 WASHINGTON ST WOBURN MA 01801		
INSTRUCTIONS: If you received a preprinted label, affix it in the space at left. If any of the information on the label is incorrect, draw a line 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 below blank. If you did not receive a preprinted label, complete all items. "Installation" means a single site where hazardous waste is generated, treated, stored and/or disposed of, or a transporter's principal place of business. Please refer to the INSTRUCTIONS FOR FILING NOTIFICATION before completing this form. The information requested herein is required by law (Section 3010 of the Resource Conservation and Recovery Act).			
FOR OFFICIAL USE ONLY			
COMMENTS			
C			
INSTALLATION'S EPA I.D. NUMBER		APPROVED	DATE RECEIVED (yr., mo., & day)
EMAD07381467531			800905
Aug 5 11 09 PM '80			
I. NAME OF INSTALLATION			
II. INSTALLATION MAILING ADDRESS			
STREET OR P.O. BOX			
CITY OR TOWN ST. ZIP CODE			
III. LOCATION OF INSTALLATION			
STREET OR ROUTE NUMBER			
CITY OR TOWN ST. ZIP CODE			
IV. INSTALLATION CONTACT			
NAME AND TITLE (last, first, & job title)			PHONE NO. (area code & no.)
2 KNIGHT S ENV CONTROL OFFICER			803-433-2329
V. OWNERSHIP			
A. NAME OF INSTALLATION'S LEGAL OWNER			
8 W R GRACE & CO			
B. TYPE OF OWNERSHIP (enter the appropriate letter into box)			
VI. TYPE OF HAZARDOUS WASTE ACTIVITY (enter "X" in the appropriate box(es))			
<input type="checkbox"/> A. GENERATION <input type="checkbox"/> B. TRANSPORTATION (complete item VII) <input checked="" type="checkbox"/> C. TREAT/STORE/DISPOSE <input type="checkbox"/> D. UNDERGROUND INJECTION			
VII. MODE OF TRANSPORTATION (transporters only - enter "X" in the appropriate box(es))			
<input type="checkbox"/> A. AIR <input type="checkbox"/> B. RAIL <input type="checkbox"/> C. HIGHWAY <input type="checkbox"/> D. WATER <input type="checkbox"/> E. OTHER (specify):			
VIII. FIRST OR SUBSEQUENT NOTIFICATION			
Mark "X" in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your installation's EPA I.D. Number in the space provided below.			
<input checked="" type="checkbox"/> A. FIRST NOTIFICATION <input type="checkbox"/> B. SUBSEQUENT NOTIFICATION (complete item C)		C. INSTALLATION'S EPA I.D. NO.	
		MAD073814675	
IX. DESCRIPTION OF HAZARDOUS WASTES			
Please go to the reverse of this form and provide the requested information.			

DETACH

DETACH

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WELLS G AND H ADMINISTRATIVE RECORD

WEL 007

2642

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I.D. - FOR OFFICIAL USE ONLY
 WMAAD07381467521

IX. DESCRIPTION OF HAZARDOUS WASTES (continued from front)

A. HAZARDOUS WASTES FROM NON-SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from non-specific sources your installation handles. Use additional sheets if necessary.

1 FO17	2	3	4	5	6
7	8	9	10	11	12

B. HAZARDOUS WASTES FROM SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific industrial sources your installation handles. Use additional sheets if necessary.

13	14	15	16	17	18
19	20	21	22	23	24
25	26	27	28	29	30

C. COMMERCIAL CHEMICAL PRODUCT HAZARDOUS WASTES. Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

31	32	33	34	35	36
37	38	39	40	41	42
43	44	45	46	47	48

D. LISTED INFECTIOUS WASTES. Enter the four-digit number from 40 CFR Part 261.34 for each listed hazardous waste from hospitals, veterinary hospitals, medical and research laboratories your installation handles. Use additional sheets if necessary.

49	50	51	52	53	54
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E. CHARACTERISTICS OF NON-LISTED HAZARDOUS WASTES. Mark "X" in the boxes corresponding to the characteristics of non-listed hazardous wastes your installation handles. (See 40 CFR Parts 261.21 - 261.24.)

1. IGNITABLE (D001) 2. CORROSIVE (D002) 3. REACTIVE (D003) 4. TOXIC (D004)

X. 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.

SIGNATURE V. A. Forte	NAME & OFFICIAL TITLE (type or print) V. A. Forte, General Manager	DATE SIGNED 8/4/80
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EPA Form 8700-12 (8-80) REVERSE

WELLS G AND H
 ADMINISTRATIVE RECORD

WEL 007

26431L