

1 **PART V, CLOSURE UNIT 17 UNIT-SPECIFIC CONDITIONS**
2 **303-M Oxide Facility**
3 **(Clean Closed June 15, 2006)**

4 The 303-M Oxide Facility was located in the 300 Area. This document sets forth the conditions for the
5 303-M Oxide Facility.

6 **V.17.A COMPLIANCE WITH PERMIT CONDITIONS**

7 The Permittees shall comply with all requirements set forth in the Hanford Facility Dangerous Waste
8 Permit including all approved modifications. All chapters, subsections, figures, tables, and appendices
9 included in the following unit-specific Permit Conditions are enforceable in their entirety.

10 In the event that the Part III-Unit-Specific Conditions for Closure Unit 17, 303-M Oxide Facility conflict
11 with the Part I-Standard Conditions and/or Part II-General Facility Conditions of the Permit, the unit-
12 specific conditions for Closure Unit 17, 303-M Oxide Facility prevail.

13 **CLOSURE UNIT 17:**

14 Chapter 1.0 Part A Form, Revision 3, dated July 2005

January 2007

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 WASHINGTON STATE DEPARTMENT OF ECOLOG Y		Dangerous Waste Permit Application Part A Form	
		Date Received: _____ Reviewed by: <i>J.P. Davis</i> Date: 1 0 1 0 2 0 0 5 Month Day Year Approved by: <i>J.P. Davis</i> Date: 1 0 3 0 2 0 0 5 0 9 3 0 2 0 0 5 Closed on June 15, 2006	
I. This form is submitted to: (place an "X" in the appropriate box)			
<input checked="" type="checkbox"/>	Request modification to a final status permit (commonly called a "Part B" permit)		
<input type="checkbox"/>	Request a change under interim status		
<input type="checkbox"/>	Apply for a final status permit. This includes the application for the initial final status permit for a site or for a permit renewal (i.e., a new permit to replace an expiring permit).		
<input type="checkbox"/>	Establish interim status because of the wastes newly regulated on:	(Date)	
List waste codes:			
II. EPA/State ID Number WA 7 8 9 0 0 0 8 9 6 7			
III. Name of Facility US Department of Energy – Hanford Facility			
IV. Facility Location (Physical address not P.O. Box or Route Number)			
A. Street			
825 Jadwin			
City or Town		State	ZIP Code
Richland		WA	99352
County Code (if known)	County Name		
0 0 5	Benton		
B. Land Type	C. Geographic Location		D. Facility Existence Date
	Latitude (degrees, mins, secs)		Month Day Year
F	S E E T O P O M A P		0 3 0 2 1 9 4 3
V. Facility Mailing Address			
Street or P.O. Box			
P.O. Box 550			
City or Town		State	ZIP Code
Richland		WA	99352

VI. Facility contact (Person to be contacted regarding waste activities at facility)												
Name (last)						(first)						
Klein						Keith						
Job Title						Phone Number (area code and number)						
Manager						(509) 376-7395						
Contact Address												
Street or P.O. Box												
P.O. Box 550												
City or Town						State		ZIP Code				
Richland						WA		99352				
VII. Facility Operator Information												
A. Name						Phone Number (area code and number)						
Department of Energy * Owner/Operator Washington Closure Hanford LLC** Co-Operator for						(509) 376-7375 * (509) 372-9951**						
Street or P.O. Box												
P.O. Box 550 * 3070 George Washington Way**												
City or Town						State		ZIP Code				
Richland						WA		99352				
B. Operator Type		F										
C. Does the name in VII.A reflect a proposed change in operator?						<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No						
If yes, provide the scheduled date for the change:						Month		Day		Year		
D. Is the name listed in VII.A. also the owner? If yes, skip to Section VIII.C.						<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No						
VIII. Facility Owner Information												
A. Name						Phone Number (area code and number)						
Keith A. Klein, Operator/Facility-Property Owner*						(509) 376-7395*						
Street or P.O. Box												
P.O. Box 550												
City or Town						State		ZIP Code				
Richland						WA		99352				
B. Operator Type		F										
C. Does the name in VII.A reflect a proposed change in operator?						<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No						
If yes, provide the scheduled date for the change:						Month		Day		Year		
IX. NAICS Codes (5/6 digit codes)												
A. First						B. Second						
5	6	2	2	1		9	2	4	1	1	0	Administration of Air & Water Resource & Solid Waste Management Programs
C. Third						D. Fourth						
9	9	9	9	9	9	5	6	2	9	1	0	Remediation Services

X. Other Environmental Permits (see instructions)														
A. Permit Type			B. Permit Number										C. Description	
														None

XI. Nature of Business (provide a brief description that includes both dangerous waste and non-dangerous waste areas and activities)

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The 303-M Oxide Facility began waste management operations in May of 1983 and is located in the 300 Area. The 303-M was used to treat mixed waste generated during fuel fabrication operations. During treatment, saw fines and lathe turnings known as chips, consisting of uranium and zirconium, were treated by incineration to eliminate their pyrophoric nature and to allow for transportation without the possibility of spontaneous combustion. The chips and fines were received in water-filled, 114-liter (30 gallon) containers that were drained, weighed, and prepared for the treatment process. Before treatment, the chips were reduced in size by a chip chopper. The chips and fines were incinerated in 2.3-kilogram (5 pound) batches. A maximum of 0.09 metric ton (0.10 ton) of waste per hour could be treated by incineration. The oxidized material was shipped to Westinghouse Material Company of Ohio where the material was used for the production of fissionable uranium.

The mixed waste treated at the 303-M Oxide Facility was designated as an ignitable waste (D001) due to its zirconium content, which was a pyrophoric material. The 303-M Oxide Facility could have treated 30,844 kilograms (68,000 pounds) of mixed waste per year.

EXAMPLE FOR COMPLETING ITEMS XII and XIII (shown in lines numbered X-1, X-2, and X-3 below): A facility has two storage tanks that hold 1200 gallons and 400 gallons respectively. There is also treatment in tanks at 20 gallons/hr. Finally, a one-quarter acre area that is two meters deep will undergo *in situ vitrification*.

Section XII. Process Codes and Design Capacities							Section XIII. Other Process Codes							
Line Number	A. Process Codes (enter code)			B. Process Design Capacity		C. Process Total Number of Units	Line Number	A. Process Codes (enter code)			B. Process Design Capacity		C. Process Total Number of Units	D. Process Description
	1. Amount	2. Unit of Measure (enter code)		1. Amount	2. Unit of Measure (enter code)			1. Amount	2. Unit of Measure (enter code)					
X 1	S	0	2	1,600	G	002	X 1	T	0	4	700	C	001	In situ vitrification
X 2	T	0	3	20	E	001								
X 3	T	0	4	700	C	001								
1	T	0	3	.09	W		1							
2							2							
3							3							
4							4							
5							5							
6							6							
7							7							
8							8							
9							9							
1 0							1 0							
1 1							1 1							
1 2							1 2							
1 3							1 3							
1 4							1 4							
1 5							1 5							
1 6							1 6							
1 7							1 7							
1 8							1 8							
1 9							1 9							
2 0							2 0							
2 1							2 1							
2 2							2 2							
2 3							2 3							
2 4							2 4							
2 5							2 5							

XIV. Description of Dangerous Wastes

Example for completing this section: A facility will receive three non-listed wastes, then store and treat them on-site. Two wastes are corrosive only, with the facility receiving and storing the wastes in containers. There will be about 200 pounds per year of each of these two wastes, which will be neutralized in a tank. The other waste is corrosive and ignitable and will be neutralized then blended into hazardous waste fuel. There will be about 100 pounds per year of that waste, which will be received in bulk and put into tanks.

Line Number	A. Dangerous Waste No. (enter code)	B. Estimated Annual Quantity of Waste	C. Unit of Measure (enter code)	D. Processes											
				(1) Process Codes (enter)						(2) Process Description [If a code is not entered in D (1)]					
X 1	D 0 0 2	400	P	S	0	1	T	0	1						
X 2	D 0 0 1	100	P	S	0	2	T	0	1						
X 3	D 0 0 2														Included with above
	1 D 0 0 1	30,844	K	T	0	3									Incineration
	2														
	3														
	4														
	5														
	6														
	7														
	8														
	9														
	1 0														
	1 1														
	1 2														
	1 3														
	1 4														
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	1 7														
	1 8														
	1 9														
	2 0														
	2 1														
	2 2														
	2 3														
	2 4														
	2 5														

XV. Map

Attach to this application a topographic map of the area extending to at least one (1) 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 dangerous waste treatment, storage, recycling, or disposal units; and each well where fluids are injected underground. Include all springs, rivers, and other surface water bodies in this map area, plus drinking water wells listed in public records or otherwise known to the applicant within ¼ mile of the facility property boundary. The instructions provide additional information on meeting these requirements.

XVI. Facility Drawing

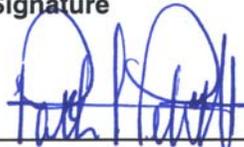
All existing facilities must include a scale drawing of the facility (refer to Instructions for more detail).

XVII. Photographs

All existing facilities must include photographs (aerial or ground-level) that clearly delineate all existing structures; existing storage, treatment, recycling, and disposal areas; and sites of future storage, treatment, recycling, or disposal areas (refer to Instructions for more detail).

XVIII. Certifications

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

<p>Operator* Name and Official Title (type or print) Keith A. Klein, Manager U.S. Department of Energy Richland Operations Office</p>	<p>Signature </p>	<p>Date Signed 8/25/05</p>
<p>Co-Operator** Name and Official Title (type or print) Patrick L. Pettiette Project Manager Washington Closure Hanford LLC</p>	<p>Signature </p>	<p>Date Signed 8-7-05</p>
<p>Co-Operator** – Address and Telephone Number 3070 George Washington Way Richland, WA 99352 (509) 372-9951</p>		
<p>Facility-Property Owner* Name and Official Title (type or print) Keith A. Klein, Manager U.S. Department of Energy Richland Operations Office</p>	<p>Signature </p>	<p>Date Signed 8/25/05</p>

Comments



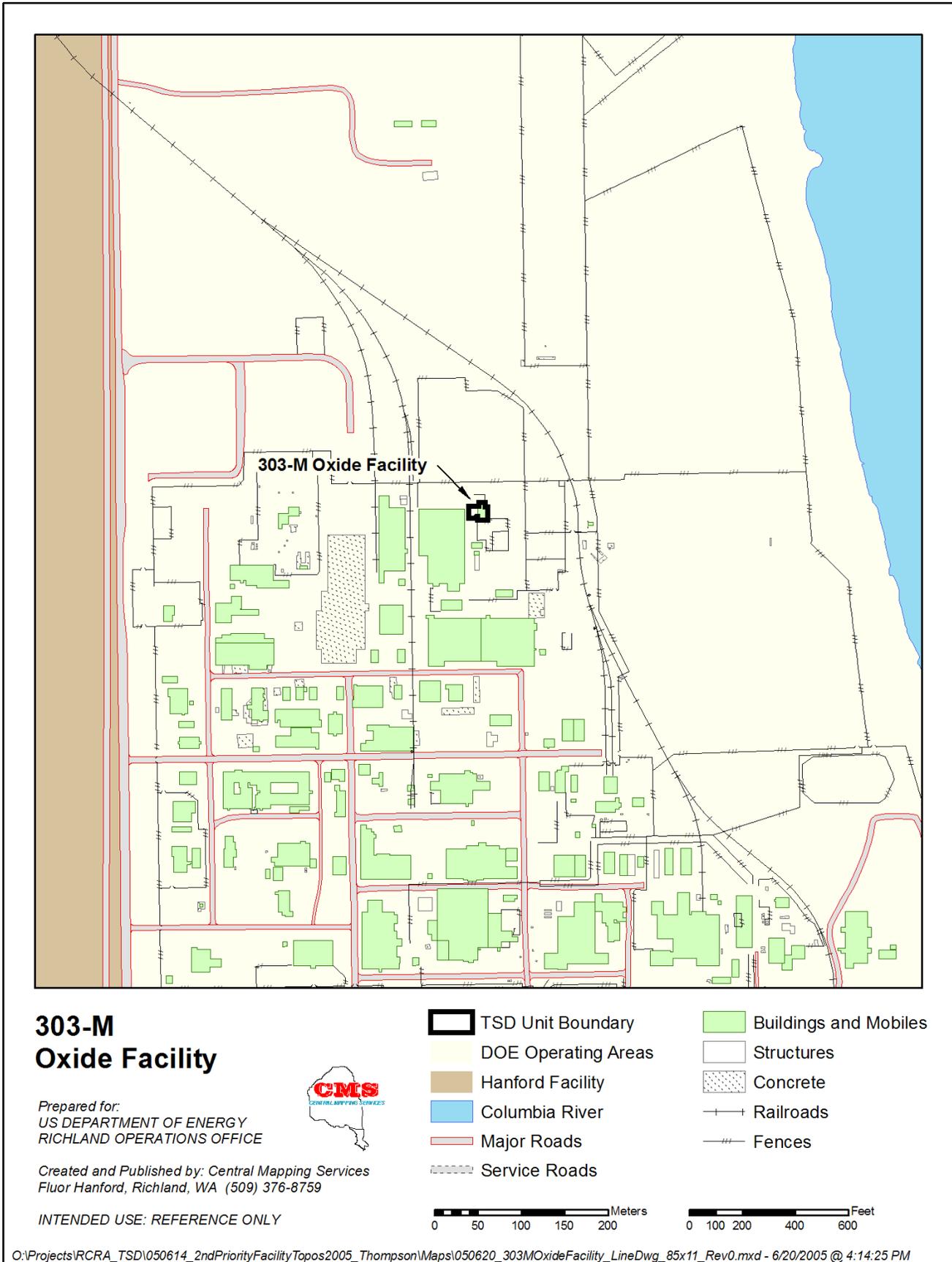
INCINERATOR

8304810-36CN
(PHOTO TAKEN 1983)



303-M OXIDE BUILDING

8306387-3CN
(PHOTO TAKEN 1983)



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