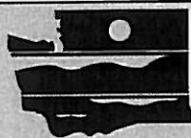


USE THE TAB KEY TO MOVE FROM CELL TO CELL IN THE ELECTRONIC VERSION OF THIS FORM.
Please enter information only in unshaded areas

Unit Name Mixed Waste Facility

Rev. 1, Date: May 2011



WASHINGTON STATE
DEPARTMENT OF
E C O L O G Y

**Dangerous Waste Permit Application
Part A Form**

Date Received			Reviewed by:			Date:		
Month	Day	Year	Approved by:			Date:		
			Please refer to instructions for completing this form.					

I. This form is submitted to: (place an "X" in the appropriate box)

<input 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 checked="" 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

W A R 0 0 0 0 1 0 3 5 5

III. Name of Facility

Perma-Fix Northwest Richland, Inc.

IV. Facility Location (Physical address not P.O. Box or Route Number)

A. Street

2025 Battelle Boulevard

City or Town	State	ZIP Code
Richland	WA	99354

County Code (if known)	County Name
	Benton

B. Land Type	C. Geographic Location		D. Facility Existence Date		
	Latitude (degrees, mins, secs)	Longitude (degrees, mins, secs)	Month	Day	Year
P	4 6 2 0 3 2 N	11 9 1 7 5 2 W	0 7	0 7	1 9 9 9

V. Facility Mailing Address

Street or P.O. Box

2025 Battelle Boulevard

City or Town	State	ZIP Code
Richland	WA	99354

USE THE TAB KEY TO MOVE FROM CELL TO CELL IN THE ELECTRONIC VERSION OF THIS FORM.
Please enter information only in unshaded areas

VI. Facility contact (Person to be contacted regarding waste activities at facility)											
Name (last)						(first)					
Grondin						Richard					
Job Title						Phone Number (area code and number)					
Vice President and General Manager						(509) 375-7026					
Contact Address											
Street or P.O. Box											
2025 Battelle Boulevard											
City or Town						State		ZIP Code			
Richland						WA		99354			
VII. Facility Operator Information											
A. Name						Phone Number (area code and number)					
Perma-Fix Northwest Richland, Inc.						(509) 375-5160					
Street or P.O. Box											
2025 Battelle Boulevard											
City or Town						State		ZIP Code			
Richland						WA		99354			
B. Operator Type		P									
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 IX.						<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
VIII. Facility Owner Information											
A. Name						Phone Number (area code and number)					
Street or P.O. Box											
City or Town						State		ZIP Code			
B. Operator Type											
C. Does the name in VIII.A reflect a proposed change in owner?						<input type="checkbox"/> Yes <input 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	1						
C. Third						D. Fourth					

USE THE TAB KEY TO MOVE FROM CELL TO CELL IN THE ELECTRONIC VERSION OF THIS FORM.
Please enter information only in unshaded areas

X. Other Environmental Permits (see instructions)															
A. Permit Type		B. Permit Number										C. Description			
	E		U	N	K	N	O	W	N					City of Richland substantial development permit	
	E		W	N	I	0	5	0	8	1				Washington Department of Health Radioactive Materials License (mixed waste)	
	E		O	O	A	2	0	0	5	0	0	2		Benton Clean Air Authority Order of Approval (thermal desorber and plasma furnace)	
	E		N	O	C	2	0	0	5	0	0	2		Benton Clean Air Authority Notice of Construction Order (thermal desorber and plasma furnace)	
	E		N	O	C	6	2	2						Washington Department of Health Notice of Construction Approval (mixed waste thermal processing)	
	E		N	O	C	4	5	9						Washington Department of Health Notice of Construction Approval (mixed waste non-thermal processing)	
	E		O	O	A	2	0	0	7	0	0	0	9	Benton Clean Air Authority Order of Approval (back-up generator for Building 13)	
	E		N	O	C	2	0	0	7	0	0	0	9	Benton Clean Air Authority Notice of Construction Order (back-up generator for Building 13)	
	E		N	O	C	2	0	0	8	0	0	0	9	Benton Clean Air Authority Notice of Construction Order (extraction mixing)	
	E		W	A	R	0	0	0	0	1	0	3	5	5	Department of Ecology and EPA Region 10 Mixed Waste and TSCA-Regulated Storage and Treatment Permit

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

Storage and treatment of waste (hazardous, dangerous, low-level radioactive, mixed and/or mixed PCB-contaminated).

USE THE TAB KEY TO MOVE FROM CELL TO CELL IN THE ELECTRONIC VERSION OF THIS FORM.
Please enter information only in unshaded areas

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	S	0	1	6033	Y	016	1	T	0	4	2.5	D	001	Size Reduc.
2	S	0	2	1000	G	001	2	T	0	4	5.0	D	001	Cut/Shear
3	X	0	3	1.0	D	001	3	T	0	4	1.0	D	004	Liq. Treat
4	T	0	4	31	D	018	4	T	0	4	5.0	D	002	Compact
5							5	T	0	4	2.5	D	002	Extract Mix
6							6	T	0	4	5.0	D	001	Hi Cap Mix
7							7	T	0	4	1.0	D	001	Lo Cap Mix
8							8	T	0	4	2.5	D	001	In-Contain
9							9	T	0	4	5.0	D	001	Phys Extr
1 0							1 0	T	0	4	0.5	D	002	Hg Amalga
1 1							1 1	T	0	4	1.0	D	002	Debris Wash
1 2							1 2							
1 3							1 3							
1 4							1 4							
1 5							1 5							
1 6							1 6							
1 7							1 7	Please see Pg. 15 Comments for full Description.						
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							

USE THE TAB KEY TO MOVE FROM CELL TO CELL IN THE ELECTRONIC VERSION OF THIS FORM.
Please enter information only in unshaded areas

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	11	M	S	0	1	X	0	3	0	0	0
								S	0	2	T	0	4			
	2	D	0	0	2	973	M	S	0	1	X	0	3	0	0	0
								S	0	2	T	0	4			
	3	D	0	0	3	69	M	S	0	1	X	0	3	0	0	0
								S	0	2	T	0	4			
	4	D	0	0	4	254	M	S	0	1	X	0	3	0	0	0
								S	0	2	T	0	4			
	5	D	0	0	5	805	M	S	0	1	X	0	3	0	0	0
								S	0	2	T	0	4			
	6	D	0	0	6	869	M	S	0	1	X	0	3	0	0	0
								S	0	2	T	0	4			
	7	D	0	0	7	902	M	S	0	1	X	0	3	0	0	0
								S	0	2	T	0	4			
	8	D	0	0	8	857	M	S	0	1	X	0	3	0	0	0
								S	0	2	T	0	4			
	9	D	0	0	9	838	M	S	0	1	X	0	3	0	0	0
								S	0	2	T	0	4			
	1 0	D	0	1	0	815	M	S	0	1	X	0	3	0	0	0
								S	0	2	T	0	4			
	1 1	D	0	1	1	820	M	S	0	1	X	0	3	0	0	0
								S	0	2	T	0	4			
	1 2	D	0	1	2	1	M	S	0	1	X	0	3	0	0	0
								S	0	2	T	0	4			
	1 3	D	0	1	3	1	M	S	0	1	X	0	3	0	0	0
								S	0	2	T	0	4			
	1 4	D	0	1	4	1	M	S	0	1	X	0	3	0	0	0
								S	0	2	T	0	4			
	1 5	D	0	1	5	1	M	S	0	1	X	0	3	0	0	0
								S	0	2	T	0	4			
	1 6	D	0	1	6	1	M	S	0	1	X	0	3	0	0	0
								S	0	2	T	0	4			
	1 7	D	0	1	7	1	M	S	0	1	X	0	3	0	0	0
								S	0	2	T	0	4			

USE THE TAB KEY TO MOVE FROM CELL TO CELL IN THE ELECTRONIC VERSION OF THIS FORM.
Please enter information only in unshaded areas

EPA/State ID Number W A R 0 0 0 0 1 0 3 5 5

Continuation of Section XIV. Description of Dangerous Waste

Line Number	A. Dangerous Waste No. (enter code)				B. Estimated Annual Quantity of Waste	C. Unit of Measure (enter code)	D. Process										
							(1) Process Codes (enter)				(2) Process Description [[if a code is not entered in D (1)]]						
1 8	D	0	1	8	5	M	S	0	1	X	0	3	0	0	0		
							S	0	2	T	0	4					
1 9	D	0	1	9	9	M	S	0	1	X	0	3	0	0	0		
							S	0	2	T	0	4					
2 0	D	0	2	0	1	M	S	0	1	X	0	3	0	0	0		
							S	0	2	T	0	4					
2 1	D	0	2	1	2	M	S	0	1	X	0	3	0	0	0		
							S	0	2	T	0	4					
2 2	D	0	2	2	1	M	S	0	1	X	0	3	0	0	0		
							S	0	2	T	0	4					
2 3	D	0	2	3	1	M	S	0	1	X	0	3	0	0	0		
							S	0	2	T	0	4					
2 4	D	0	2	4	1	M	S	0	1	X	0	3	0	0	0		
							S	0	2	T	0	4					
2 5	D	0	2	5	1	M	S	0	1	X	0	3	0	0	0		
							S	0	2	T	0	4					
2 6	D	0	2	6	1	M	S	0	1	X	0	3	0	0	0		
							S	0	2	T	0	4					
2 7	D	0	2	7	1	M	S	0	1	X	0	3	0	0	0		
							S	0	2	T	0	4					
2 8	D	0	2	8	5	M	S	0	1	X	0	3	0	0	0		
							S	0	2	T	0	4					
2 9	D	0	2	9	4	M	S	0	1	X	0	3	0	0	0		
							S	0	2	T	0	4					
3 0	D	0	3	0	1	M	S	0	1	X	0	3	0	0	0		
							S	0	2	T	0	4					
3 1	D	0	3	1	1	M	S	0	1	X	0	3	0	0	0		
							S	0	2	T	0	4					
3 2	D	0	3	2	1	M	S	0	1	X	0	3	0	0	0		
							S	0	2	T	0	4					
3 3	D	0	3	3	1	M	S	0	1	X	0	3	0	0	0		
							S	0	2	T	0	4					
3 4	D	0	3	4	1	M	S	0	1	X	0	3	0	0	0		
							S	0	2	T	0	4					
3 5	D	0	3	5	5	M	S	0	1	X	0	3	0	0	0		
							S	0	2	T	0	4					
3 6	D	0	3	6	1	M	S	0	1	X	0	3	0	0	0		
							S	0	2	T	0	4					
3 7	D	0	3	7	1	M	S	0	1	X	0	3	0	0	0		
							S	0	2	T	0	4					

USE THE TAB KEY TO MOVE FROM CELL TO CELL IN THE ELECTRONIC VERSION OF THIS FORM.
Please enter information only in unshaded areas

Line Number	A. Dangerous Waste No. (enter code)					B. Estimated Annual Quantity of Waste	C. Unit of Measure (enter code)	D. Process								
	(1) Process Codes (enter)								(2) Process Description [If a code is not entered in D (1)]							
3 8	D	0	3	8	4	M	S	0	1	X	0	3	0	0	0	
							S	0	2	T	0	4				
3 9	D	0	3	9	4	M	S	0	1	X	0	3	0	0	0	
							S	0	2	T	0	4				
4 0	D	0	4	0	6	M	S	0	1	X	0	3	0	0	0	
							S	0	2	T	0	4				
4 1	D	0	4	1	1	M	S	0	1	X	0	3	0	0	0	
							S	0	2	T	0	4				
4 2	D	0	4	2	2	M	S	0	1	X	0	3	0	0	0	
							S	0	2	T	0	4				
4 3	D	0	4	3	4	M	S	0	1	X	0	3	0	0	0	
							S	0	2	T	0	4				
4 4	F	0	0	1	77	M	S	0	1	X	0	3	0	0	0	
							S	0	2	T	0	4				
4 5	F	0	0	2	106	M	S	0	1	X	0	3	0	0	0	
							S	0	2	T	0	4				
4 6	F	0	0	3	836	M	S	0	1	X	0	3	0	0	0	
							S	0	2	T	0	4				
4 7	F	0	0	4	2	M	S	0	1	X	0	3	0	0	0	
							S	0	2	T	0	4				
4 8	F	0	0	5	855	M	S	0	1	X	0	3	0	0	0	
							S	0	2	T	0	4				
4 9	F	0	0	6	43	M	S	0	1	X	0	3	0	0	0	
							S	0	2	T	0	4				
5 0	F	0	0	7	44	M	S	0	1	X	0	3	0	0	0	
							S	0	2	T	0	4				
5 1	F	0	0	8	1	M	S	0	1	X	0	3	0	0	0	
							S	0	2	T	0	4				
5 2	F	0	0	9	44	M	S	0	1	X	0	3	0	0	0	
							S	0	2	T	0	4				
5 3	F	0	1	0	87	M	S	0	1	X	0	3	0	0	0	
							S	0	2	T	0	4				
5 4	F	0	1	1	29	M	S	0	1	X	0	3	0	0	0	
							S	0	2	T	0	4				
5 5	F	0	1	2	1	M	S	0	1	X	0	3	0	0	0	
							S	0	2	T	0	4				
5 6	F	0	1	9	1	M	S	0	1	X	0	3	0	0	0	
							S	0	2	T	0	4				
5 7	Left Intentionally Blank															
5 8	Left Intentionally Blank															
5 9	Left Intentionally Blank															
6 0	Left Intentionally Blank															
6 1	F	0	2	4	1	M	S	0	1	X	0	3	0	0	0	
							S	0	2	T	0	4				
6 2	F	0	2	5	1	M	S	0	1	X	0	3	0	0	0	
							S	0	2	T	0	4				

USE THE TAB KEY TO MOVE FROM CELL TO CELL IN THE ELECTRONIC VERSION OF THIS FORM.
Please enter information only in unshaded areas

Line Number	A. Dangerous Waste No. (enter code)	B. Estimated Annual Quantity of Waste	C. Unit of Measure (enter code)	D. Process										
				(1) Process Codes (enter)					(2) Process Description [If a code is not entered in D (1)]					
6 3				Left Intentionally Blank										
6 4														
6 5														
6 6	F 0 3 2	1	M	S 0 1	X 0 3	0 0 0								
				S 0 2	T 0 4									
6 7	F 0 3 4	1	M	S 0 1	X 0 3	0 0 0								
				S 0 2	T 0 4									
6 8	F 0 3 5	1	M	S 0 1	X 0 3	0 0 0								
				S 0 2	T 0 4									
6 9	F 0 3 7	1	M	S 0 1	X 0 3	0 0 0								
				S 0 2	T 0 4									
7 0	F 0 3 8	1	M	S 0 1	X 0 3	0 0 0								
				S 0 2	T 0 4									
7 1	F 0 3 9	42	M	S 0 1	X 0 3	0 0 0								
				S 0 2	T 0 4									
7 2	K 0 0 1	1	M	S 0 1	X 0 3	0 0 0								
				S 0 2	T 0 4									
7 3	Through			S 0 2	T 0 4									
7 4	K 0 1 1													
7 5	K 0 1 3	1	M	S 0 1	X 0 3	0 0 0								
				S 0 2	T 0 4									
7 6	Through			S 0 2	T 0 4									
7 7	K 0 5 2													
7 8	K 0 6 0	1	M	S 0 1	X 0 3	0 0 0								
				S 0 2	T 0 4									
7 9	K 0 6 1	1	M	S 0 1	X 0 3	0 0 0								
				S 0 2	T 0 4									
8 0	K 0 6 2	1	M	S 0 1	X 0 3	0 0 0								
				S 0 2	T 0 4									
8 1	K 0 6 9	1	M	S 0 1	X 0 3	0 0 0								
				S 0 2	T 0 4									
8 2	K 0 7 1	1	M	S 0 1	X 0 3	0 0 0								
				S 0 2	T 0 4									
8 3	K 0 7 3	1	M	S 0 1	X 0 3	0 0 0								
				S 0 2	T 0 4									
8 4	K 0 8 3	1	M	S 0 1	X 0 3	0 0 0								
				S 0 2	T 0 4									
8 5	Through			S 0 2	T 0 4									
8 6	K 0 8 8													
8 7	K 0 9 3	1	M	S 0 1	X 0 3	0 0 0								
				S 0 2	T 0 4									
8 8	Through			S 0 2	T 0 4									
8 9	K 1 1 8													
9 0	K 1 2 3	1	M	S 0 1	X 0 3	0 0 0								
				S 0 2	T 0 4									
9 1	K 1 2 4	1	M	S 0 1	X 0 3	0 0 0								
				S 0 2	T 0 4									
9 2	K 1 2 5	1	M	S 0 1	X 0 3	0 0 0								
				S 0 2	T 0 4									

USE THE TAB KEY TO MOVE FROM CELL TO CELL IN THE ELECTRONIC VERSION OF THIS FORM.
Please enter information only in unshaded areas

Line Number	A. Dangerous Waste No. (enter code)						B. Estimated Annual Quantity of Waste	C. Unit of Measure (enter code)	D. Process										
									(1) Process Codes (enter)				(2) Process Description [If a code is not entered in D (1)]						
9 3	K	1	2	6			1	M	S	0	1	X	0	3	0	0	0		
									S	0	2	T	0	4					
9 4	K	1	3	1			1	M	S	0	1	X	0	3	0	0	0		
									S	0	2	T	0	4					
9 5	K	1	3	2			1	M	S	0	1	X	0	3	0	0	0		
									S	0	2	T	0	4					
9 6	K	1	3	6			1	M	S	0	1	X	0	3	0	0	0		
									S	0	2	T	0	4					
9 7	K	1	4	1			1	M	S	0	1	X	0	3	0	0	0		
9 8	Through									S	0	2	T	0	4				
9 9	K	1	4	5															
1 0 0	K	1	4	7			1	M	S	0	1	X	0	3	0	0	0		
									S	0	2	T	0	4					
1 0 1	K	1	4	8			1	M	S	0	1	X	0	3	0	0	0		
									S	0	2	T	0	4					
1 0 2	K	1	4	9			1	M	S	0	1	X	0	3	0	0	0		
									S	0	2	T	0	4					
1 0 3	K	1	5	0			1	M	S	0	1	X	0	3	0	0	0		
									S	0	2	T	0	4					
1 0 4	K	1	5	1			1	M	S	0	1	X	0	3	0	0	0		
									S	0	2	T	0	4					
1 0 5	K	1	5	6			1	M	S	0	1	X	0	3	0	0	0		
									S	0	2	T	0	4					
1 0 6	K	1	5	7			1	M	S	0	1	X	0	3	0	0	0		
									S	0	2	T	0	4					
1 0 7	K	1	5	8			1	M	S	0	1	X	0	3	0	0	0		
									S	0	2	T	0	4					
1 0 8	K	1	5	9			1	M	S	0	1	X	0	3	0	0	0		
									S	0	2	T	0	4					
1 0 9	K	1	6	1			1	M	S	0	1	X	0	3	0	0	0		
									S	0	2	T	0	4					
1 1 0	K	1	6	9			1	M	S	0	1	X	0	3	0	0	0		
1 1 1	Through									S	0	2	T	0	4				
1 1 2	K	1	7	2															
1 1 3							Left blank												
1 1 4							Left blank												
1 1 5							Left blank												
1 1 6							Left blank							3					
							Left blank												
1 1 7	P	0	0	1			1	M	S	0	1	X	0	3	0	0	0		
1 1 8	Through									S	0	2	T	0	4				
1 1 9	P	0	1	8															
1 2 0	P	0	2	0			1	M	S	0	1	X	0	3	0	0	0		
1 2 1	Through									S	0	2	T	0	4				
1 2 2	P	0	2	4															

USE THE TAB KEY TO MOVE FROM CELL TO CELL IN THE ELECTRONIC VERSION OF THIS FORM.
Please enter information only in unshaded areas

Line Number	A. Dangerous Waste No. (enter code)						B. Estimated Annual Quantity of Waste	C. Unit of Measure (enter code)	D. Process									
									(1) Process Codes (enter)				(2) Process Description [If a code is not entered in D (1)]					
1 2 3	P	0	2	6			1	M	S	0	1	X	0	3	0	0	0	
1 2 4	Through								S	0	2	T	0	4				
1 2 5	P	0	3	1														
1 2 6	P	0	3	3			1	M	S	0	1	X	0	3	0	0	0	
									S	0	2	T	0	4				
1 2 7	P	0	3	4			1	M	S	0	1	X	0	3	0	0	0	
									S	0	2	T	0	4				
1 2 8	P	0	3	6			1	M	S	0	1	X	0	3	0	0	0	
1 2 9	Through								S	0	2	T	0	4				
1 3 0	P	0	5	1														
1 3 1	P	0	5	4			1	M	S	0	1	X	0	3	0	0	0	
									S	0	2	T	0	4				
1 3 2	P	0	5	6			1	M	S	0	1	X	0	3	0	0	0	
1 3 3	Through								S	0	2	T	0	4				
1 3 4	P	0	6	0														
1 3 5	P	0	6	2			1	M	S	0	1	X	0	3	0	0	0	
1 3 6	Through								S	0	2	T	0	4				
1 3 7	P	0	7	8														
1 3 8	P	0	8	1			1	M	S	0	1	X	0	3	0	0	0	
									S	0	2	T	0	4				
1 3 9	P	0	8	2			1	M	S	0	1	X	0	3	0	0	0	
									S	0	2	T	0	4				
1 4 0	P	0	8	4			1	M	S	0	1	X	0	3	0	0	0	
									S	0	2	T	0	4				
1 4 1	P	0	8	5			1	M	S	0	1	X	0	3	0	0	0	
									S	0	2	T	0	4				
1 4 2	P	0	8	7			1	M	S	0	1	X	0	3	0	0	0	
									S	0	2	T	0	4				
1 4 3	P	0	8	8			1	M	S	0	1	X	0	3	0	0	0	
									S	0	2	T	0	4				
1 4 4	P	0	8	9			1	M	S	0	1	X	0	3	0	0	0	
									S	0	2	T	0	4				
1 4 5	P	0	9	2			1	M	S	0	1	X	0	3	0	0	0	
1 4 6	Through								S	0	2	T	0	4				
1 4 7	P	0	9	9														
1 4 8	P	1	0	1			1	M	S	0	1	X	0	3	0	0	0	
1 4 9	Through								S	0	2	T	0	4				
1 5 0	P	1	0	6														
1 5 1	P	1	0	8			1	M	S	0	1	X	0	3	0	0	0	
1 5 2	Through								S	0	2	T	0	4				
1 5 3	P	1	1	6														
1 5 4	P	1	1	8			1	M	S	0	1	X	0	3	0	0	0	
1 5 5	Through								S	0	2	T	0	4				
1 5 6	P	1	2	3														
1 5 7	P	1	2	7			1	M	S	0	1	X	0	3	0	0	0	
									S	0	2	T	0	4				

USE THE TAB KEY TO MOVE FROM CELL TO CELL IN THE ELECTRONIC VERSION OF THIS FORM.
Please enter information only in unshaded areas

Line Number	A. Dangerous Waste No. (enter code)			B. Estimated Annual Quantity of Waste	C. Unit of Measure (enter code)	D. Process										
						(1) Process Codes (enter)				(2) Process Description [If a code is not entered in D (1)]						
1 5 8	P	1	2	8	1	M	S	0	1	X	0	3	0	0	0	
							S	0	2	T	0	4				
1 5 9	P	1	8	5	1	M	S	0	1	X	0	3	0	0	0	
							S	0	2	T	0	4				
1 6 0	P	1	8	8	1	M	S	0	1	X	0	3	0	0	0	
1 6 1	Through						S	0	2	T	0	4				
1 6 2	P	1	9	2												
1 6 3	P	1	9	4	1	M	S	0	1	X	0	3	0	0	0	
							S	0	2	T	0	4				
1 6 4	P	1	9	6	1	M	S	0	1	X	0	3	0	0	0	
1 6 5	Through						S	0	2	T	0	4				
1 6 6	P	1	9	9												
1 6 7	P	2	0	1	1	M	S	0	1	X	0	3	0	0	0	
1 6 8	Through						S	0	2	T	0	4				
1 6 9	P	2	0	5												
1 7 0	U	0	0	1	1	M	S	0	1	X	0	3	0	0	0	
1 7 1	Through						S	0	2	T	0	4				
1 7 2	U	0	1	2												
1 7 3	U	0	1	4	1	M	S	0	1	X	0	3	0	0	0	
1 7 4	Through						S	0	2	T	0	4				
1 7 5	U	0	3	9												
1 7 6	U	0	4	1	1	M	S	0	1	X	0	3	0	0	0	
1 7 7	Through						S	0	2	T	0	4				
1 7 8	U	0	5	3												
1 7 9	U	0	5	5	1	M	S	0	1	X	0	3	0	0	0	
1 8 0	Through						S	0	2	T	0	4				
1 8 1	U	0	6	4												
1 8 2	U	0	6	6	1	M	S	0	1	X	0	3	0	0	0	
1 8 3	Through						S	0	2	T	0	4				
1 8 4	U	0	9	9												
1 8 5	U	1	0	1	1	M	S	0	1	X	0	3	0	0	0	
							S	0	2	T	0	4				
1 8 6	U	1	0	2	1	M	S	0	1	X	0	3	0	0	0	
							S	0	2	T	0	4				
1 8 7	U	1	0	3	1	M	S	0	1	X	0	3	0	0	0	
							S	0	2	T	0	4				
1 8 8	U	1	0	5	1	M	S	0	1	X	0	3	0	0	0	
1 8 9	Through						S	0	2	T	0	4				
1 9 0	U	1	3	8												
1 9 1	U	1	4	0	1	M	S	0	1	X	0	3	0	0	0	
1 9 2	Through						S	0	2	T	0	4				
1 9 3	U	1	7	4												
1 9 4	U	1	7	6	1	M	S	0	1	X	0	3	0	0	0	
1 9 5	Through						S	0	2	T	0	4				
1 9 6	U	1	9	4												

USE THE TAB KEY TO MOVE FROM CELL TO CELL IN THE ELECTRONIC VERSION OF THIS FORM.
Please enter information only in unshaded areas

Line Number	A. Dangerous Waste No. (enter code)					B. Estimated Annual Quantity of Waste	C. Unit of Measure (enter code)	D. Process												
	(1) Process Codes (enter)										(2) Process Description [If a code is not entered in D (1)]									
1	9	7	U	1	9	6	1	M	S	0	1	X	0	3	0	0	0			
									S	0	2	T	0	4						
1	9	8	U	1	9	7	1	M	S	0	1	X	0	3	0	0	0			
									S	0	2	T	0	4						
2	9	9	U	2	0	0	1	M	S	0	1	X	0	3	0	0	0			
2	0	0	Through							S	0	2	T	0	4					
2	0	1	U	2	1	1														
2	0	2	U	2	1	3	1	M	S	0	1	X	0	3	0	0	0			
2	0	3	Through							S	0	2	T	0	4					
2	0	4	U	2	2	3														
2	0	5	U	2	2	5	1	M	S	0	1	X	0	3	0	0	0			
2	0	6	Through							S	0	2	T	0	4					
2	0	7	U	2	2	8														
2	0	8	U	2	3	4	1	M	S	0	1	X	0	3	0	0	0			
2	0	9	Through							S	0	2	T	0	4					
2	1	0	U	2	4	0														
2	1	1	U	2	4	3	1	M	S	0	1	X	0	3	0	0	0			
2	1	2	Through							S	0	2	T	0	4					
2	1	3	U	2	4	9														
2	1	4	U	2	7	1	1	M	S	0	1	X	0	3	0	0	0			
									S	0	2	T	0	4						
2	1	5	U	2	7	8	1	M	S	0	1	X	0	3	0	0	0			
									S	0	2	T	0	4						
2	1	6	U	2	7	9	1	M	S	0	1	X	0	3	0	0	0			
									S	0	2	T	0	4						
2	1	7	U	2	8	0	1	M	S	0	1	X	0	3	0	0	0			
									S	0	2	T	0	4						
2	1	8	U	3	2	8	1	M	S	0	1	X	0	3	0	0	0			
									S	0	2	T	0	4						
2	1	9	U	3	5	3	1	M	S	0	1	X	0	3	0	0	0			
									S	0	2	T	0	4						
2	2	0	U	3	5	9	1	M	S	0	1	X	0	3	0	0	0			
									S	0	2	T	0	4						
2	2	1	U	3	6	4	1	M	S	0	1	X	0	3	0	0	0			
									S	0	2	T	0	4						
2	2	2	U	3	6	7	1	M	S	0	1	X	0	3	0	0	0			
									S	0	2	T	0	4						
2	2	3	U	3	7	2	1	M	S	0	1	X	0	3	0	0	0			
									S	0	2	T	0	4						
2	2	4	U	3	7	3	1	M	S	0	1	X	0	3	0	0	0			
									S	0	2	T	0	4						
2	2	5	U	3	8	7	1	M	S	0	1	X	0	3	0	0	0			
									S	0	2	T	0	4						
2	2	6	U	3	8	9	1	M	S	0	1	X	0	3	0	0	0			
									S	0	2	T	0	4						

USE THE TAB KEY TO MOVE FROM CELL TO CELL IN THE ELECTRONIC VERSION OF THIS FORM.
Please enter information only in unshaded areas

Line Number	A. Dangerous Waste No. (enter code)				B. Estimated Annual Quantity of Waste	C. Unit of Measure (enter code)	D. Process									
							(1) Process Codes (enter)				(2) Process Description [If a code is not entered in D (1)]					
2 2 7	U	3	9	4	1	M	S	0	1	X	0	3	0	0	0	
							S	0	2	T	0	4				
2 2 8	U	3	9	5	1	M	S	0	1	X	0	3	0	0	0	
							S	0	2	T	0	4				
2 2 9	U	4	0	4	1	M	S	0	1	X	0	3	0	0	0	
							S	0	2	T	0	4				
2 3 0	U	4	0	9	1	M	S	0	1	X	0	3	0	0	0	
							S	0	2	T	0	4				
2 3 1	U	4	1	0	1	M	S	0	1	X	0	3	0	0	0	
							S	0	2	T	0	4				
2 3 2	U	4	1	1	1	M	S	0	1	X	0	3	0	0	0	
							S	0	2	T	0	4				
2 3 3	Left Intentionally Blank															
2 3 4	Left Intentionally Blank															
2 3 5	Left Intentionally Blank															
2 3 6	W	P	0	1	100	M	S	0	1	X	0	3	0	0	0	
							S	0	2	T	0	4				
2 3 7	W	P	0	2	100	M	S	0	1	X	0	3	0	0	0	
							S	0	2	T	0	4				
2 3 8	W	P	0	3	100	M	S	0	1	X	0	3	0	0	0	
							S	0	2	T	0	4				
2 3 9	W	S	C	2	100	M	S	0	1	X	0	3	0	0	0	
							S	0	2	T	0	4				
2 4 0	W	T	0	1	100	M	S	0	1	X	0	3	0	0	0	
							S	0	2	T	0	4				
2 4 1	W	T	0	2	100	M	S	0	1	X	0	3	0	0	0	
							S	0	2	T	0	4				
2 4 2	W	P	C	B	100	M	S	0	1	X	0	3	0	0	0	
							S	0	2	T	0	4				

NOTES:

1. Hazardous waste debris carrying one or more of the above-listed dangerous wastes will be stored and/or treated at the facility.
2. A waste stream may have a combination of waste codes listed above.

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.

Operator Name and Official Title (type or print) Richard Grondin Vice President/General Manager	Signature 	Date Signed 5/10/11
Co-Operator Name and Official Title (type or print)	Signature	Date Signed
Co-Operator – Address and Telephone Number		
Facility/Property Owner Name and Official Title (type or print) Richard Grondin Vice President/General Manager	Signature 	Date Signed 5/10/11

Comments

Complete descriptions for thermal and other treatment processes listed on Page 4:

Process Code	Description**	Design Capacity	Unit of Measure
X03	Thermal Desorber (TT-08)*	1.0	D
T04	Size Reduction and Screening (TP-01)*	2.5	D
T04	Cutting/Shearing (TP-02)*	5.0	D
T04	Liquid Treatment Containers (TP-14) (4 units)	1.0	D
T04	Compaction & Macro-Encapsulation (TP-07) (1 in-drum compactor and 1 super compactor)*	5.0	D
T04	Extraction Mixing (TP-10)	2.5	D
T04	High-Capacity Mixing (TT-01)*	5.0	D
T04	Low-Capacity Mixing (TT-02)*	1.0	D
T04	In-Container Mixing & Metal Stabilization (TT-03) (1 mixer unit and 1 drum roller)*	2.5	D
T04	Physical Extraction (TT-05)*	5.0	D
T04	Mercury Amalgamation (TT-09) (1 bench scale unit and 1 bulk unit)	0.5	D
T04	Debris Washing (TT-10) (1 skid mixer and 1 vat system)	1.0	D

The following T04 Treatment Processes are treatment in containers: TP-14, TP-07 (In-Drum Compactor), TP-10, TT-01, TT-03, TT-09 and TT-10

*The stated design capacities of some of the units have increased over the stated designed capacities in previous permit applications. However, the process units have not been replaced or modified. The increase in design capacity is due to the fact that previous applications listed the lower actual operating capacities rather than maximum design capacities.

**More detailed process descriptions and design specifications for the process units are included in Section 4 and Section 12 of the Part B permit application.

<i>Comments and Additional Information Relevant to Section XV Maps</i>	
Information Requested in Instructions	Information Provided in this Revised Part A Permit Application to address instructions
Provide a topographic map or maps of the area extending at least to one (1) mile beyond the property boundaries of the facility that clearly show the following:	A USGS topographic map has been provided which shows the location of the facility. This map extends more than one mile beyond the property boundaries.
Legal boundaries of the facility;	The second topographical map and associated notes (DWG-SITE-CIVIL-003) is a survey of the property which shows the legal boundaries. This outer line also represents the boundary security fence.
Location and serial number of each of the existing and proposed intake and discharge structures;	It is presumed this instruction pertains to water intakes or discharges. The facilities are supplied with Richland city water at several locations, but these connections are not shown on the map. Sewage from bathrooms and lunch room sinks are connected to the Richland City sanitary sewer at

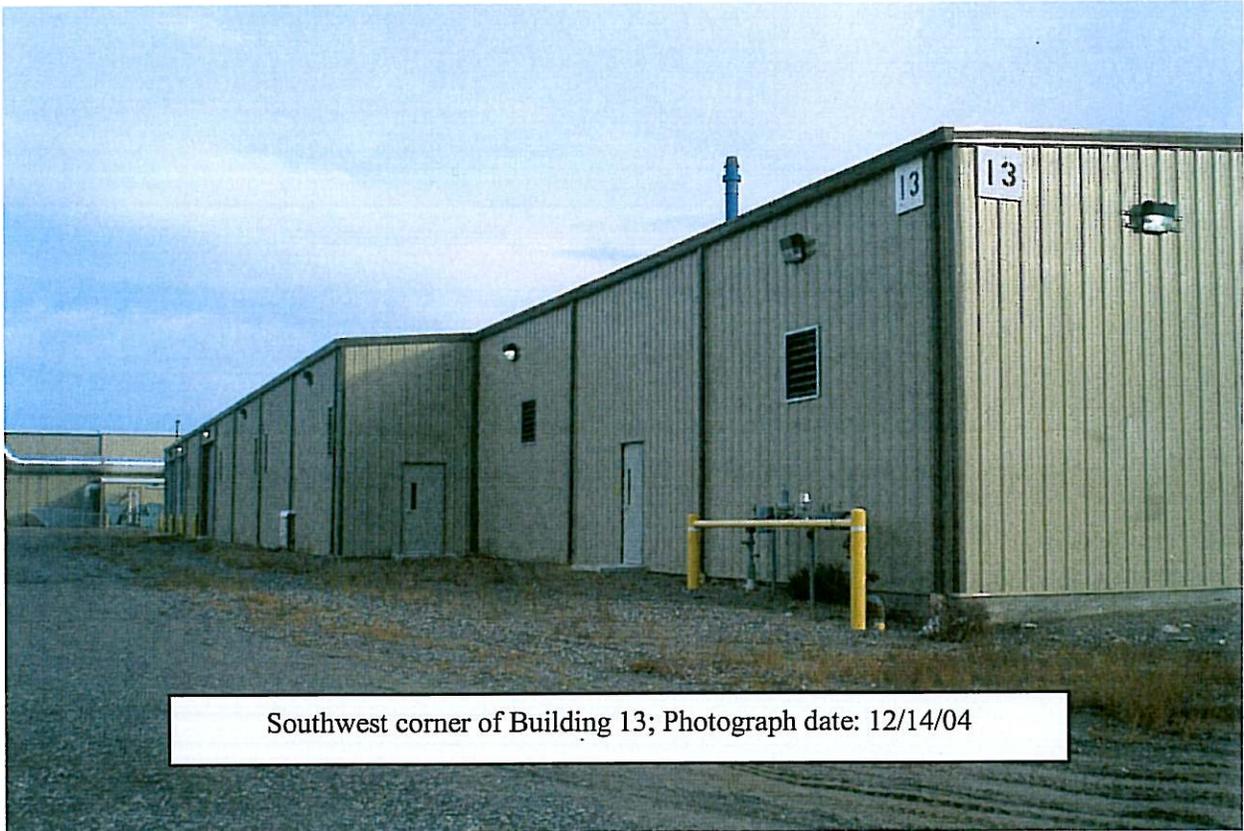
USE THE TAB KEY TO MOVE FROM CELL TO CELL IN THE ELECTRONIC VERSION OF THIS FORM.
Please enter information only in unshaded areas

<i>Comments and Additional Information Relevant to Section XV Maps</i>	
Information Requested in Instructions	Information Provided in this Revised Part A Permit Application to address instructions
	several locations, but these connections are not shown on the map. There are no connections to the Richland city sanitary sewer from operating areas. There are no dangerous waste disposal sites at the facility. There are no storm water catch basins and no connections to the Richland city storm water system at the site.
All dangerous waste management units. Identify the location of each tank;	All existing mixed waste management units are located inside Building 13, The location of each unit and tanks are not shown on this map due to scale but are shown on the Section XVI Facility Drawings.
Location of all dangerous waste management processes (those listed in Sections XII and XIII);	All existing mixed waste management processes take place inside Building 13. Location of individual processes are not shown due to the map scale but are shown on the Section XVI Facility Drawing.
Each well where you inject fluids underground; and	Not applicable.
All springs and surface water bodies in the area, plus all drinking water wells within ¼ mile of the facility that are identified in the public record or otherwise known to you.	No springs are known within one mile. A man-made pond is shown on the USGS Topographical map about 0.6 mile to the east northeast and the Columbia River is farther east.
If an intake or discharge structure, dangerous waste disposal site, or injection well associated with the facility is located more than one (1) mile from the facility, include it on the map, if possible. If not, attach additional sheets describing the location of the structure, disposal site, or well, and identify the U.S. Geological Survey (or other) map corresponding to the location.	No other intake or discharge structure, dangerous waste disposal site, or injection well associated with the facility is located more than one mile from the facility.
On each map, include the map scale, a meridian arrow showing north, and latitude and longitude at the nearest whole second. On all maps with rivers, show the direction of the currents; and in tidal waters, show the directions of the ebb and flow tides.	The map scale and a meridian arrow showing north are provided on the map. The latitude and longitude are provided as degrees with minutes to two decimal places rather than seconds to the nearest whole second. The Columbia River flows to the south but this flow direction is not shown on the map. This is not an area of tidal waters.

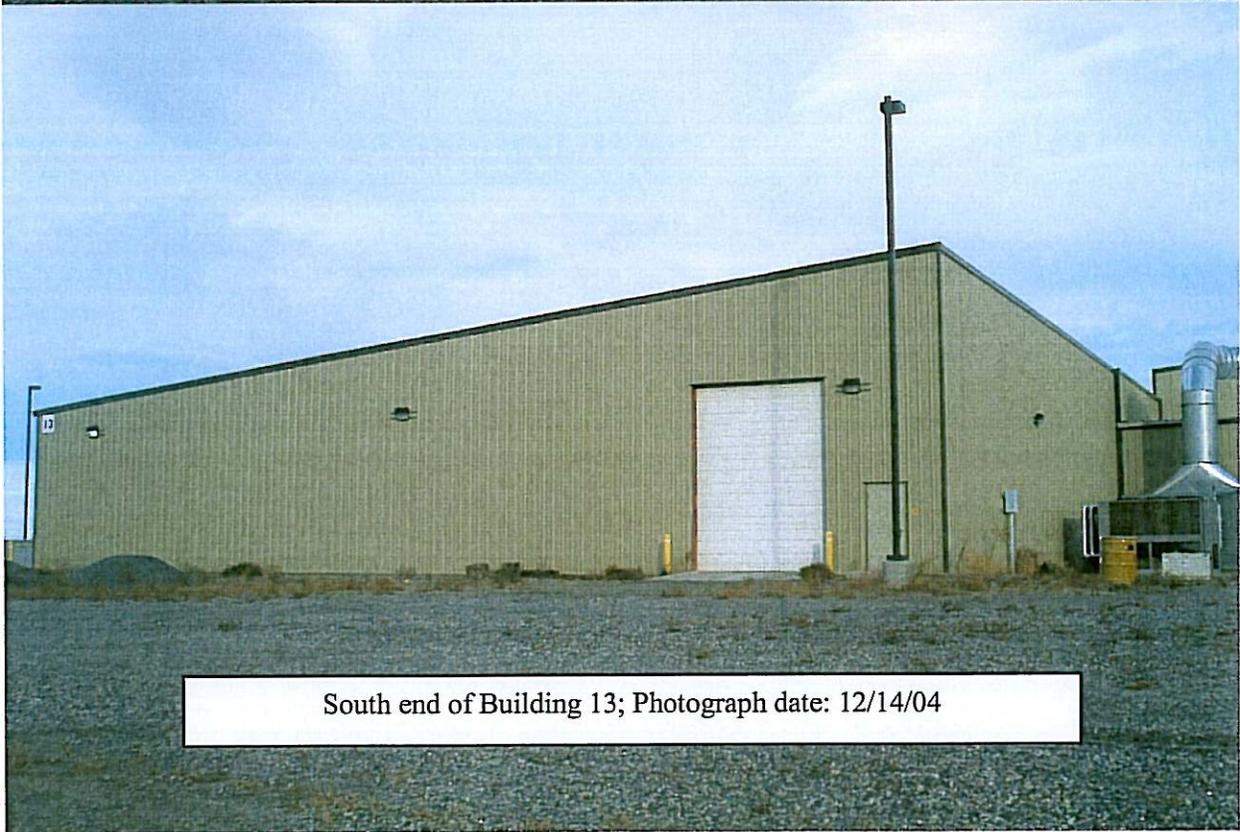
USE THE TAB KEY TO MOVE FROM CELL TO CELL IN THE ELECTRONIC VERSION OF THIS FORM.
Please enter information only in unshaded areas

<i>Comments and Additional Information Relevant to Section XVI Facility Drawing</i>	
Information Requested in Instructions	Information Provided in this Revised Part A Permit Application to address instructions
Property boundaries of the facility	Property boundaries are shown on the drawing DWG-SITE-CIVIL-003. Security fences with guarded or locked access gates are also located along the property boundary.
Areas occupied by all storage, treatment, or disposal operations that are in use	Areas occupied by all storage and treatment operations that are in use are shown on the drawing DWG-MW-GA-001. These areas include Building 13.
Name of each operation (example: multiple hearth incinerators, drum storage area, etc.)	Non-Thermal Area, Thermal Area, Waste Storage Area (Rooms WSB-1 through WSB-4) and Room SB-03 are shown on the drawing as portions of Building 13.
Areas of past storage, treatment, recycling, or disposal operations	All of the areas of Building 13 had past storage and treatment but not recycling or disposal operations by ATG (the original owner and operator) and PEcoS (operator of the storage and treatment facilities from 2003 to 2007) and PFNW-R (owner and operator since 2007).
Areas of future storage, treatment, recycling, or disposal operations	Areas of future storage and treatment operations are shown on the drawing DWG-SITE-CIVIL-001 as Building 13 and 20.
Approximate dimensions of the property boundaries and all storage, treatment, and disposal areas. (Where applicable, use the process codes listed in Items XII and XIII to indicate the location of all storage, treatment, and disposal areas.) Include other major structures/operations even if not used for dangerous waste management	Approximate dimensions of the property boundaries and other selected facility features are shown on the drawings DWG-SITE-CIVIL-003 and DWG-MW-GA-001. Individual rooms in Building 13 (WSB-1, WSB-2, WSB-3, WSB-4, SB-02, SB-03, SB-04, SB-05, SB-06, SB-07, SB-08, SB-09, SB-11 MWT-01, MWT-02, and, MWT-04) are shown.

Section XVII. Photographs

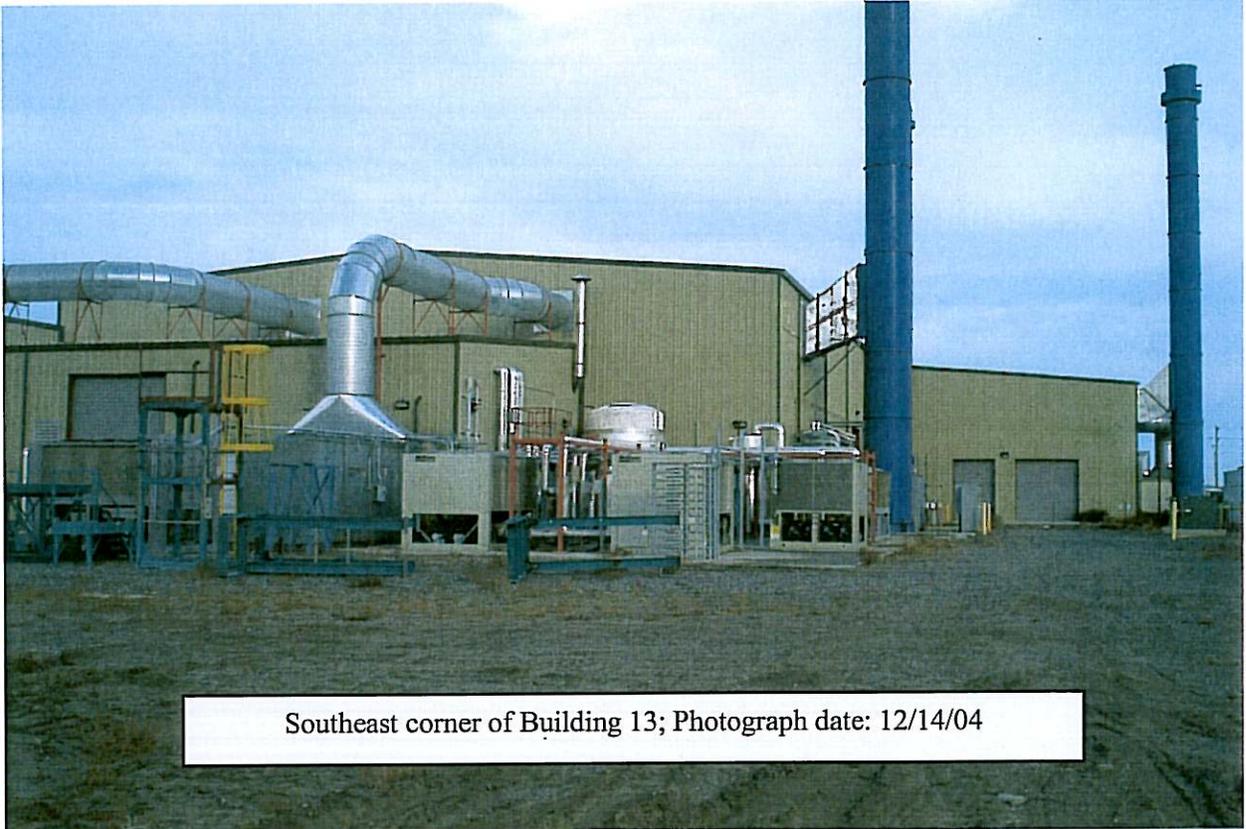


Southwest corner of Building 13; Photograph date: 12/14/04

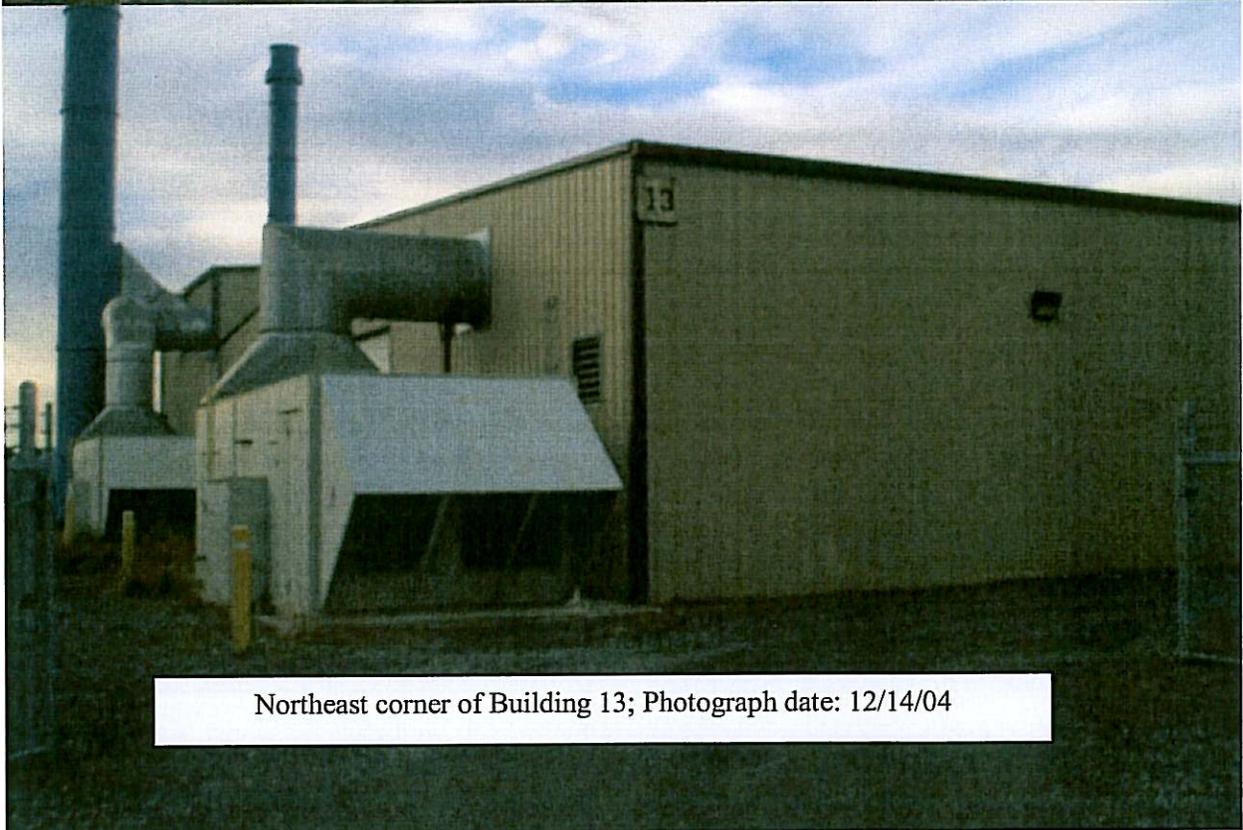


South end of Building 13; Photograph date: 12/14/04

Section XVII. Photographs

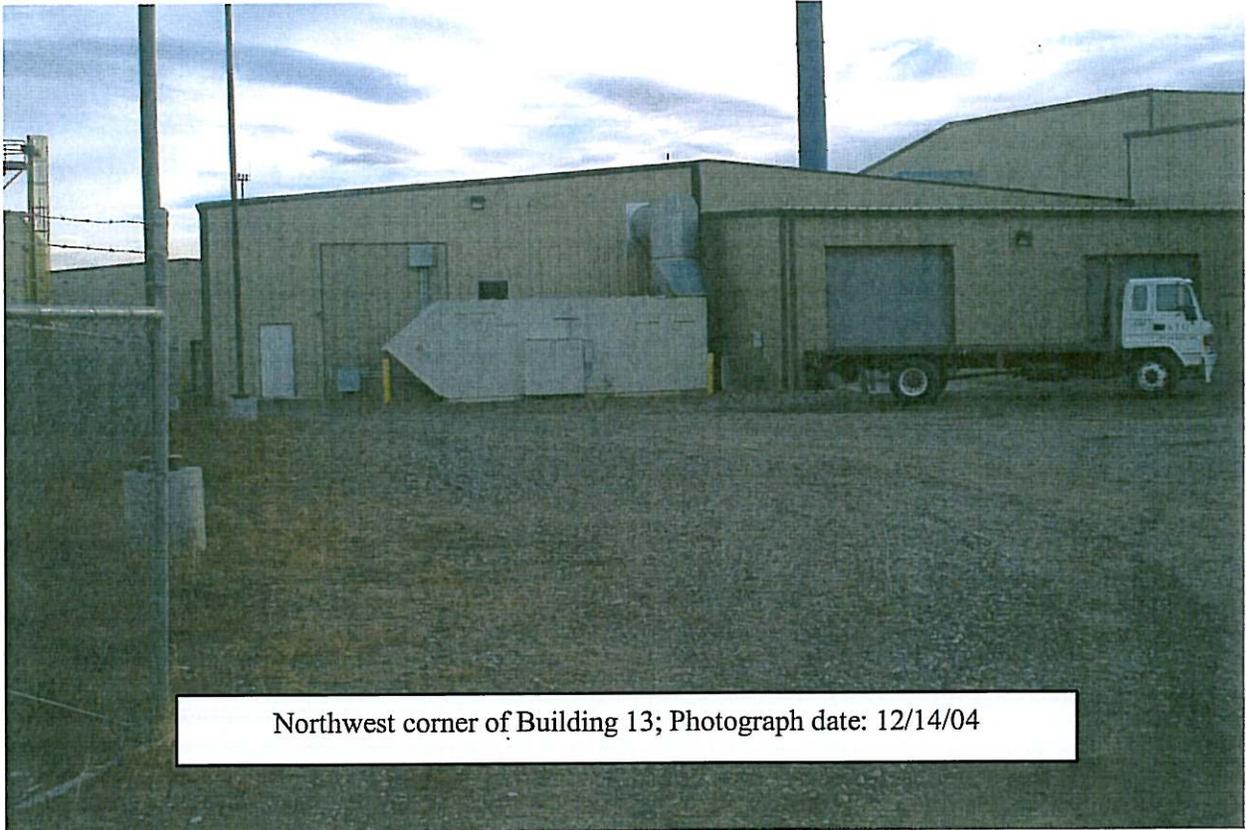


Southeast corner of Building 13; Photograph date: 12/14/04



Northeast corner of Building 13; Photograph date: 12/14/04

Section XVII. Photographs



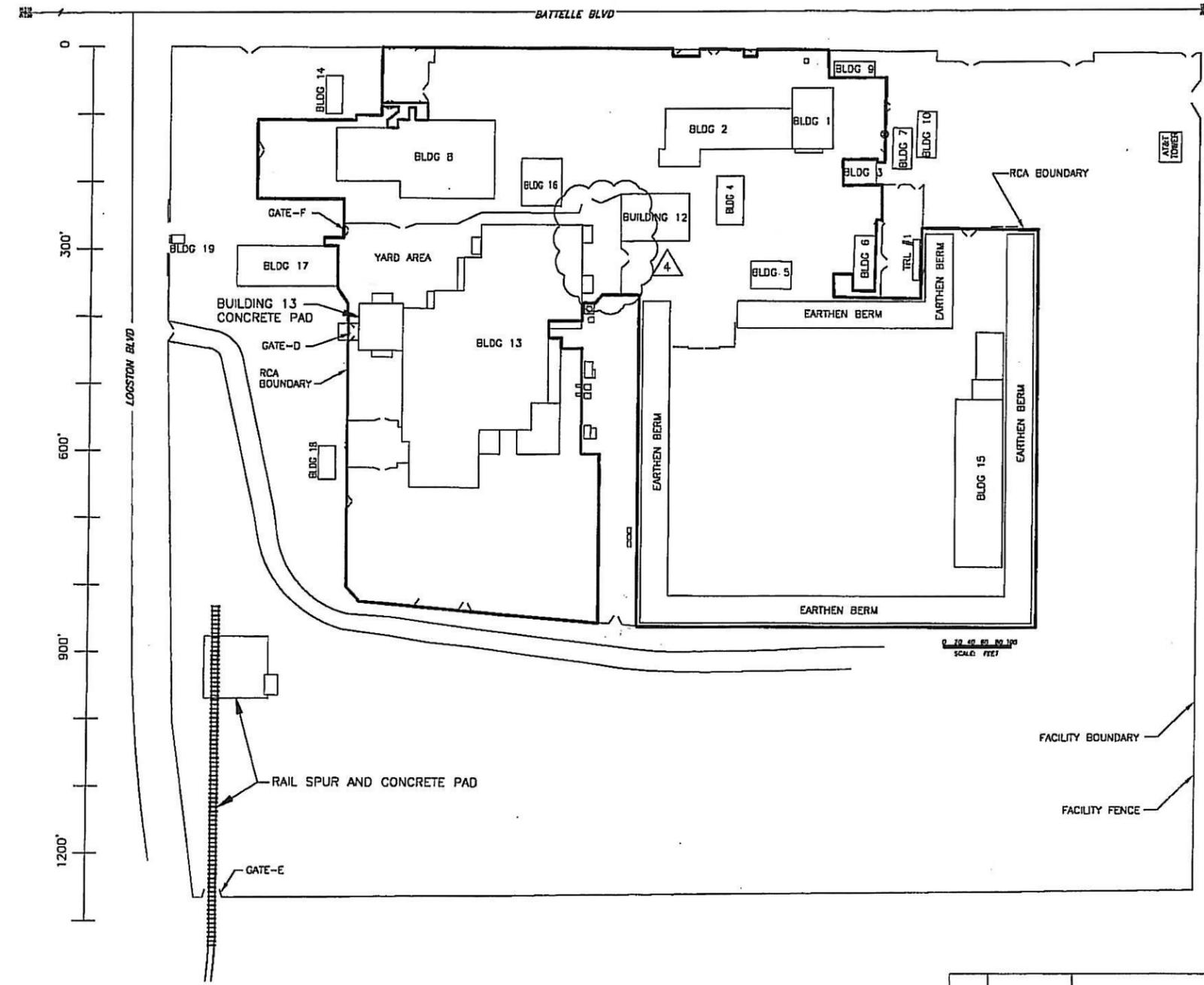
Northwest corner of Building 13; Photograph date: 12/14/04

Facility Plot Plan

Drawing DWG-SITE-CIVIL-001

13 12 11 10 9 8 7 6 5 4 3 2 1

0 300' 600' 900' 1200'



BUILDING LEGEND

BLDG 1	LOW LEVEL NON THERMAL (LLNT)
BLDG 2	LOW LEVEL NON THERMAL (LLNT)
BLDG 3	WAREHOUSE AND MACHINE SHOP
BLDG 4	RAD STORAGE
BLDG 5	MAINTENANCE SHOP
BLDG 6	CLEAN RELEASE
BLDG 7	OFFICE
BLDG 8	LOW LEVEL THERMAL (LLT)
BLDG 9	OFFICE
BLDG 10	OFFICE
BLDG 12	RAD STORAGE
BLDG 13	MIXED WASTE (MW)
BLDG 14	OFFICE
BLDG 15	RAD STORAGE
BLDG 16	LOW LEVEL THERMAL (LLTH)
BLDG 17	ADMINISTRATION
BLDG 18	AIR AND NITROGEN COMPRESSORS
TRL #1	WHOLE BODY COUNTER
BLDG 19	GUARD SHACK
RCA	RADIOLOGICAL CONTROL AREA

REV	DATE	DESCRIPTION	REFERENCES
4	02-22-11	REVISED FENCELINE BY BUILDING #12	
3	02-21-11	ADDED RAIL SPUR AND CONCRETE PAD AND GATE "E". ADDED BUILDING 13 YARD PAD. REVISED FENCELINE FROM BUILDING 17 TO GATE "D".	
2	11-08-10	ADDED GATE DESIGNATION 'D' & 'F' AND REVISED FENCELINE @ GATE 'F' REMOVED BLDG 11 & TRLR #2	
1	01/06/09	PERMIT RENEWAL	
0	10/24/08	INITIAL AS-BUILT	60001-C-001 REV 0



PERMAFIX NORTHWEST RICHLAND, INC.
2025 BATTELLE BLVD.
RICHLAND, WA

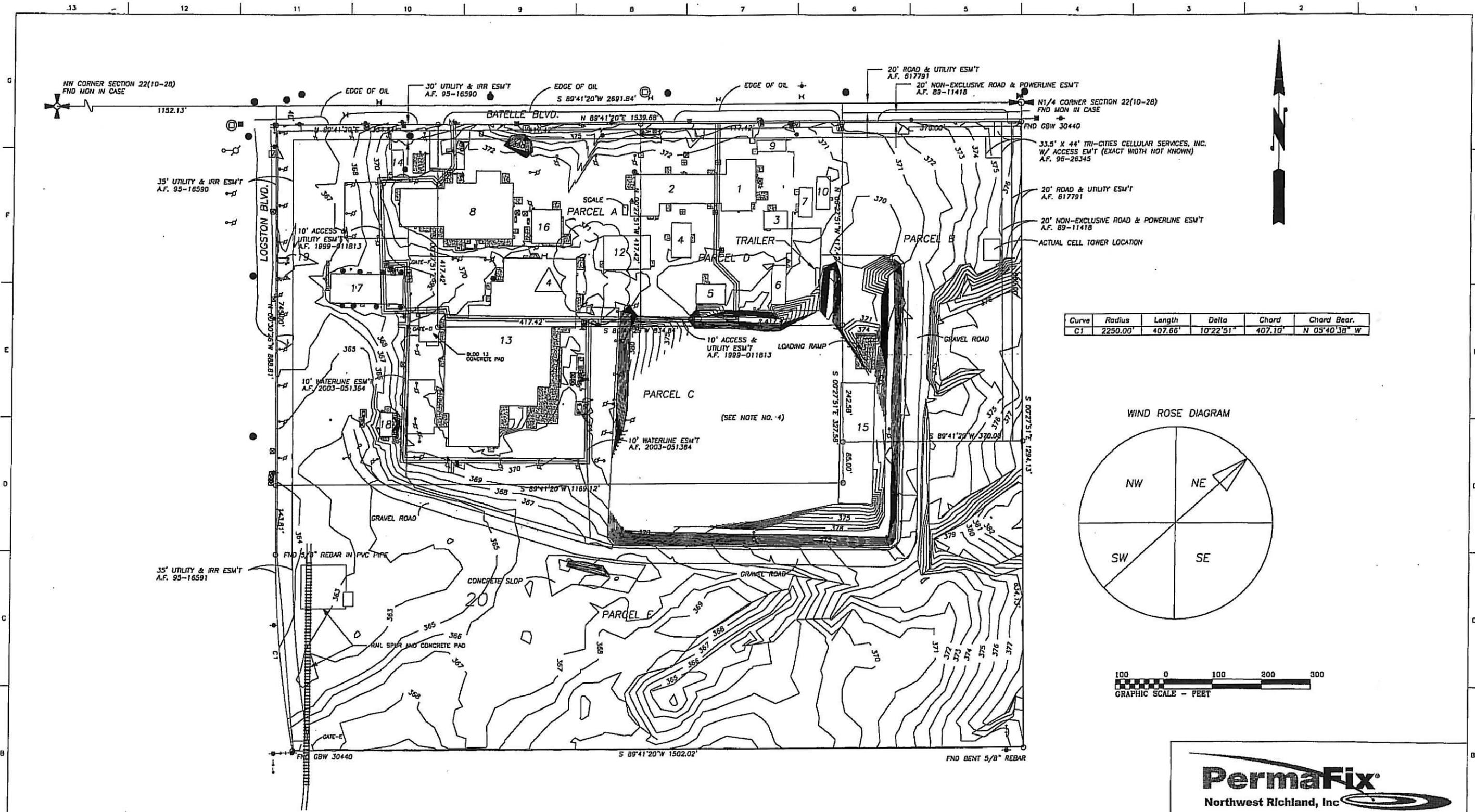
DATE		PERMAFIX NORTHWEST SITE FACILITY LAYOUT	
DRAWN	S.NORTON	SCALE: AS SHOWN	SHT: 1 OF 1
ENGR		PERMAFIX-DWG-SITE-CIVIL-001	REV 4

PROFESSIONAL ENGINEERING CERTIFICATION
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 upon 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.

13 12 11 10 9 8 7 6 5 4 3 2 1

Facility Topographical Map

Drawing DWG-SITE-CIVIL-003



PERMAFIX NORTHWEST RICHLAND, INC.
2025 BATTELLE BLVD.
RICHLAND, WA

(AS-BUILT)	PERMAFIX NORTHWEST RICHLAND SITE TOPOGRAPHY
SCALE: AS SHOWN	SHT: 1 OF 2
PERMAFIX-DWG-SITE-CIVIL-003	REV 4

REV	DATE	DESCRIPTION	REFERENCES
2	11-08-10	ADDED GATE DESIGNATION 'D' & 'F' AND REVISED FENCELINE @ GATE 'F' REMOVED BLDG 11 & TRLR #2	
4	02-22-11	REVISED FENCELINE BY BUILDING 12.	
3	02-21-11	ADDED RAIL SPUR AND CONCRETE PAD. ADDED GATE "E" IN SOUTH FENCELINE ON RAIL SPUR. ADDED BUILDING 13 YARD PAD. REVISED FENCELINE FROM BUILDING 17 TO GATE "D".	

PROFESSIONAL ENGINEERING CERTIFICATION
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 upon 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.

ALTA/ACSM LAND TITLE SURVEY

PORTION OF THE NW1/4 SECTION 22, T. 10 N., R 28 E, W.M.
RICHLAND, BENTON COUNTY, WASHINGTON

DESCRIPTION

PARCEL A PARCEL ID: 1-2208-200-0006-000

THAT PORTION OF THE NORTHWEST QUARTER OF SECTION 22, TOWNSHIP 10 NORTH, RANGE 28 EAST, W.M., RECORDS OF BENTON COUNTY, WASHINGTON DESCRIBED AS FOLLOWS:

BEGINNING AT THE NORTH QUARTER CORNER OF SAID SECTION 22; THENCE SOUTH 89°41'20" WEST 787.42 FEET ALONG THE NORTH LINE OF SAID SECTION 22; THENCE SOUTH 00°27'51" EAST 40.00 FEET, PARALLEL TO THE EAST LINE OF SAID NORTHWEST QUARTER AND THE TRU POINT OF BEGINNING; THENCE CONTINUING SOUTH 00°27'51" EAST, 417.42 FEET; THENCE SOUTH 89°41'20" WEST, 417.42 FEET, TO A POINT 40 FEET SOUTH OF THE NORTH LINE OF SAID SECTION 22; THENCE NORTH 89°41'20" EAST, 417.42 FEET TO THE TRUE POINT OF BEGINNING.

4.00 ACRES, MORE OR LESS

PARCEL B PARCEL ID: 1-2208-200-0001-000

THE EAST 370 FEET OF THE NORTH 700 FEET AS MEASURED ALONG THE NORTH AND EAST LINES OF THE NORTHEAST QUARTER OF THE NORTHWEST QUARTER OF SECTION 22, TOWNSHIP 10 NORTH, RANGE 28 EAST, W.M., RECORDS OF BENTON COUNTY, WASHINGTON.

5.61 ACRES, MORE OR LESS

PARCEL C PARCEL ID: 1-2208-200-0009-000

THAT PORTION OF THE NORTHWEST QUARTER OF SECTION 22, TOWNSHIP 10 NORTH, RANGE 28 EAST, W.M., RECORDS OF BENTON COUNTY, WASHINGTON DESCRIBED AS FOLLOWS:

BEGINNING AT THE NORTH QUARTER CORNER OF SAID SECTION 22; THENCE SOUTH 89°41'20" WEST, 1539.71 FEET ALONG THE NORTH LINE OF SAID SECTION 22; THENCE SOUTH 00°30'26" EAST, 40.00 FEET TO THE TRUE POINT OF BEGINNING; THENCE CONTINUING SOUTH 00°30'26" EAST, 745.00 FEET; THENCE NORTH 89°41'20" EAST 1169.12 FEET; THENCE NORTH 00°27'51" WEST, 327.58 FEET TO THE SOUTHEAST CORNER OF A RECORD OF SURVEY, RECORDED IN VOLUME 1 OF SURVEYS, PAGE 1192, RECORDS OF BENTON COUNTY, WASHINGTON; THENCE SOUTH 89°41'20" WEST, 834.84 FEET ALONG THE SOUTH LINE OF SAID RECORD SURVEY 1192 TO THE SOUTHWEST CORNER OF RECORD OF SURVEY, RECORDED IN VOLUME 1 OF SURVEYS, PAGE 1277, RECORDS OF BENTON COUNTY, WASHINGTON; THENCE NORTH 00°27'51" WEST ALONG THE WEST LINE OF SAID RECORD OF SURVEY NO. 1277; THENCE SOUTH 89°41'20" WEST, 334.84 FEET TO THE POINT OF BEGINNING

12.00 ACRES, MORE OR LESS

PARCEL D PARCEL ID: 1-2208-200-0004-000

THAT PORTION OF THE NORTHWEST QUARTER OF SECTION 22, TOWNSHIP 10 NORTH, RANGE 28 EAST, W.M., RECORDS OF BENTON COUNTY, WASHINGTON DESCRIBED AS FOLLOWS:

BEGINNING AT THE NORTH QUARTER CORNER OF SAID SECTION 22, THENCE ALONG THE NORTH LINE OF SAID SECTION 22, SOUTH 89°41'20" WEST, 370.00 FEET; THENCE SOUTH 00°27'46" EAST, PARALLEL TO THE EAST LINE OF SAID NORTHWEST QUARTER, 40.00 FEET TO THE TRUE POINT OF BEGINNING; THENCE CONTINUING SOUTH 00°27'46" EAST, 417.42 FEET; THENCE SOUTH 89°41'20" WEST, 417.42 FEET; THENCE SOUTH 89°41'20" WEST, 417.42 FEET; THENCE NORTH 00°27'46" WEST 417.42 FEET, TO A POINT 40.00 FEET SOUTH OF THE NORTH LINE OF SECTION 22; THENCE NORTH 89°41'20" EAST, 417.42 FEET TO THE TRUE POINT OF BEGINNING.

4.00 ACRES, MORE OR LESS

PARCEL E PARCEL ID: 1-2208-200-0011-000

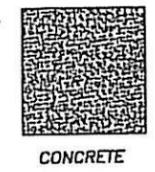
A PARCEL OF LAND SITUATED IN THE NORTHWEST QUARTER OF SECTION 22, TOWNSHIP 10 NORTH, RANGE 28 EAST, W.M., RECORDS OF BENTON COUNTY, WASHINGTON, DESCRIBED AS FOLLOWS:

BEGINNING AT THE NORTHEAST CORNER OF SAID NORTHWEST QUARTER; THENCE SOUTH 89°41'20" WEST ALONG THE NORTH LINE OF SAID NORTHWEST QUARTER A DISTANCE OF 1539.71 FEET; THENCE SOUTH 00°30'26" EAST A DISTANCE OF 785.00 FEET TO THE TRUE POINT OF BEGINNING AND BEING THE SOUTHWEST CORNER OF A PARCEL RECORDED UNDER AUDITOR'S FILE NO. 91-24454; THENCE NORTH 89°41'20" EAST ALONG THE SOUTH LINE OF SAID AUDITOR'S FILE NO. 91-24454 A DISTANCE OF 1169.12 FEET TO THE SOUTHEAST CORNER OF SAID AUDITOR'S FILE NO. 91-24454; THENCE NORTH 00°27'51" WEST A DISTANCE OF 85.00 FEET TO THE SOUTHWEST CORNER OF A PARCEL RECORDED UNDER AUDITOR'S FILE NO. 617791; THENCE NORTH 89°41'20" EAST ALONG THE SOUTH SAID AUDITOR'S FILE NO. 617791 A DISTANCE OF 370.00 FEET TO THE EAST LINE OF SAID NORTHWEST QUARTER; THENCE SOUTH 00°27'51" EAST ALONG THE EAST LINE OF SAID NORTHWEST QUARTER A DISTANCE OF 634.12 FEET; THENCE SOUTH 89°41'20" WEST A DISTANCE OF 1502.02 FEET TO A POINT ON CURVE; THENCE ALONG A CURVE TO THE RIGHT HAVING A CENTRAL ANGLE OF 10°22'51", A RADIUS OF 2250.00 FEET AND A CHORD BEARING OF NORTH05°40'38" WEST AND A CHORD DISTANCE OF 407.10 FEET TO A POINT OF TANGENT; THENCE NORTH 00°30'26" WEST A DISTANCE OF 143.81 FEET TO THE TRUE POINT OF BEGINNING.

20.01 ACRES, MORE OR LESS

LEGEND

- BOLLARD
- PROPANE TANK
- HANDICAP PARKING
- ELEC PANEL
- POWER POLE
- GUY WIRE
- YARD LIGHT
- LIGHT POLE
- ELECTRICAL JBOX
- ELECTRICAL METER
- ELECTRICAL TRANSFORMER
- ELECTRICAL VAULT
- WATER MANHOLE
- STORM DRAIN MANHOLE
- CATCH BASIN
- SANITARY SEWER MANHOLE
- GAS SHUTOFF
- CLEAN OUT
- GAS REGULATOR
- SPRINKLER HEAD
- AC UNIT
- WATER SPIGOT
- GENERATOR
- WATER VALVE
- WATER METER
- WATER SERVICE
- NATURAL GAS TANK
- IRRIGATION CONTROL VALVE
- IRRIGATION VALVE BOX
- FIRE HYDRANT
- FIRE DEPT SPRINKLER CONNECTION
- GAS METER
- GAS CONNECT
- GAS VALVE
- TELEPHONE JBOX
- TELEPHONE MANHOLE
- CABLE TV JBOX
- TELEPHONE VAULT
- MAIL BOX
- SWITCH STAND
- SIGN
- OVERHEAD POWER LINE
- UNDER GROUND POWER LINE
- STORM DRAIN LINE
- SANITARY SEWER LINE
- WATER LINE
- UNDERGROUND TELEPHONE LINE
- UNDERGROUND CABLE TV LINE
- UNDERGROUND NATURAL GAS LINE
- UNDERGROUND IRRIGATION LINE
- FENCE



NOTES

- BENTON-FRANKLIN TITLE COMPANY, TITLE REPORT DATED MAY 2, 2007, ORDER NO. 88614 SPECIAL EXCEPTIONS:
 - 1-7, 13, 17, 18, & 21-23 ARE NOT PLOTTABLE EXCEPTIONS.
 - 8 HAS NO EFFECT ON THIS PROPERTY AS DESCRIBED HEREON.
 - 9-12, & 14-16, EXIST AS SHOWN ON FACE OF THIS MAP.
 - 24; ENCROACHMENTS OR QUESTIONS OF LOCATION, BOUNDARY AND AREA AND PUBLIC OR PRIVATE EASEMENTS--EXIST AS SHOWN ON THE FACE OF THIS MAP. THE REMAINING LANGUAGE IN THIS EXCEPTION IS NOT A PLOTTABLE EXCEPTION.
- ACCORDING TO THE FEDERAL EMERGENCY MANAGEMENT AGENCY'S FLOOD INSURANCE RATE MAP COMMUNITY PANEL NO. 535533005E THIS PROPERTY IS LOCATED WITHIN FLOOD ZONE "C" (AREAS OF MINIMAL FLOOD HAZARDS)
- THE AREA LOCATED IN THE CENTER OF PROPERTY, WHERE NO TOPOGRAPHIC DATA WAS OBTAINED, WAS DEEMED TO EXCEED RADIOACTIVE LEVELS CONSIDERED SAFE TO SURVEY PERSONNEL.
- VERTICAL ELEVATION BENCHMARK: N1/4 CORNER SECTION 22(10-28) 376.08'

SURVEYOR'S CERTIFICATE

TO PERMAFIX NORTHWEST, INC., THE CITY OF RICHLAND., AND BENTON-FRANKLIN TITLE COMPANY:

THIS IS TO CERTIFY THAT THIS MAP IS MADE IN ACCORDANCE WITH THE "2005 MINIMUM STANDARD DETAIL REQUIREMENTS FOR ALTA/ACSM LAND TITLE SURVEYS," JOINTLY ESTABLISHED AND ADOPTED BY AMERICAN LAND TITLE ASSOCIATION ("ALTA") AND NATIONAL SOCIETY OF PROFESSIONAL SURVEYORS ("NSPS", A MEMBER ORGANIZATION OF THE AMERICAN CONGRESS ON SURVEYING AND MAPPING (ACSM)), AND DOES NOT INCLUDE ITEMS OF TABLE A THEREOF. PURSUANT TO THE ACCURACY STANDARDS AS ADOPTED BY ALTA AND NSPS AND IN EFFECT ON THE DATE OF THIS CERTIFICATION, UNDERSIGNED FURTHER CERTIFIES THAT IN MY PROFESSIONAL OPINION, AS A LAND SURVEYOR REGISTERED IN THE STATE OF WASHINGTON, THE RELATIVE POSITIONAL ACCURACY OF THIS SURVEY DOES NOT EXCEED THAT WHICH IS SPECIFIED THEREIN.



PERMAFIX NORTHWEST RICHLAND, INC.
2025 BATTELLE BLVD.
RICHLAND, WA

(AS-BUILT)	PERMAFIX NORTHWEST SITE TOPOGRAPHY
SCALE: NONE	SHT: 2 OF 2
PERMAFIX-DWG-SITE-CIVIL-003	REV 1

PROFESSIONAL ENGINEERING CERTIFICATION

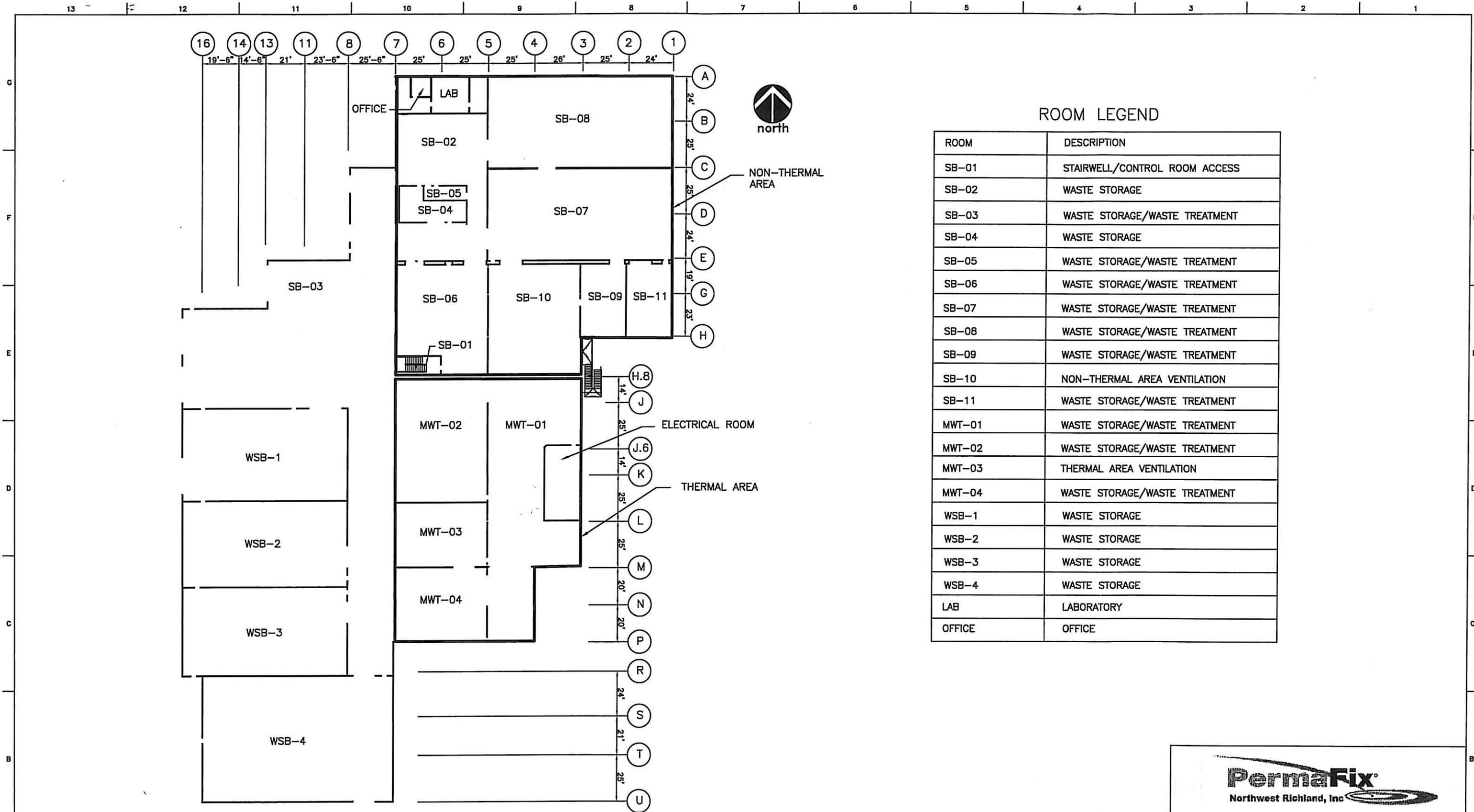
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based upon my inquiry of the person or persons who manage 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.

REV	DATE	DESCRIPTION	REFERENCES
1	01/07/09	PERMIT RENEWAL	
0	10/24/08	INITIAL AS-BUILT	6/04/07

DRAWN	S.NORTON
ENGR	
DA	

Mixed Waste Facility

Drawing DWG-MW-GA-001



ROOM LEGEND

ROOM	DESCRIPTION
SB-01	STAIRWELL/CONTROL ROOM ACCESS
SB-02	WASTE STORAGE
SB-03	WASTE STORAGE/WASTE TREATMENT
SB-04	WASTE STORAGE
SB-05	WASTE STORAGE/WASTE TREATMENT
SB-06	WASTE STORAGE/WASTE TREATMENT
SB-07	WASTE STORAGE/WASTE TREATMENT
SB-08	WASTE STORAGE/WASTE TREATMENT
SB-09	WASTE STORAGE/WASTE TREATMENT
SB-10	NON-THERMAL AREA VENTILATION
SB-11	WASTE STORAGE/WASTE TREATMENT
MWT-01	WASTE STORAGE/WASTE TREATMENT
MWT-02	WASTE STORAGE/WASTE TREATMENT
MWT-03	THERMAL AREA VENTILATION
MWT-04	WASTE STORAGE/WASTE TREATMENT
WSB-1	WASTE STORAGE
WSB-2	WASTE STORAGE
WSB-3	WASTE STORAGE
WSB-4	WASTE STORAGE
LAB	LABORATORY
OFFICE	OFFICE

PROFESSIONAL ENGINEERING CERTIFICATION
 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 upon 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.

REV	DATE	DESCRIPTION	REFERENCES	ENGR	QA
1	01/07/09	PERMIT RENEWAL			
0	10/24/08	INITIAL AS-BUILT	31001MW-MECH-100-0		

PermaFix
 Northwest Richland, Inc.

PERMAFIX NORTHWEST RICHLAND, INC.
 2025 BATTLE BLVD.
 RICHLAND, WA

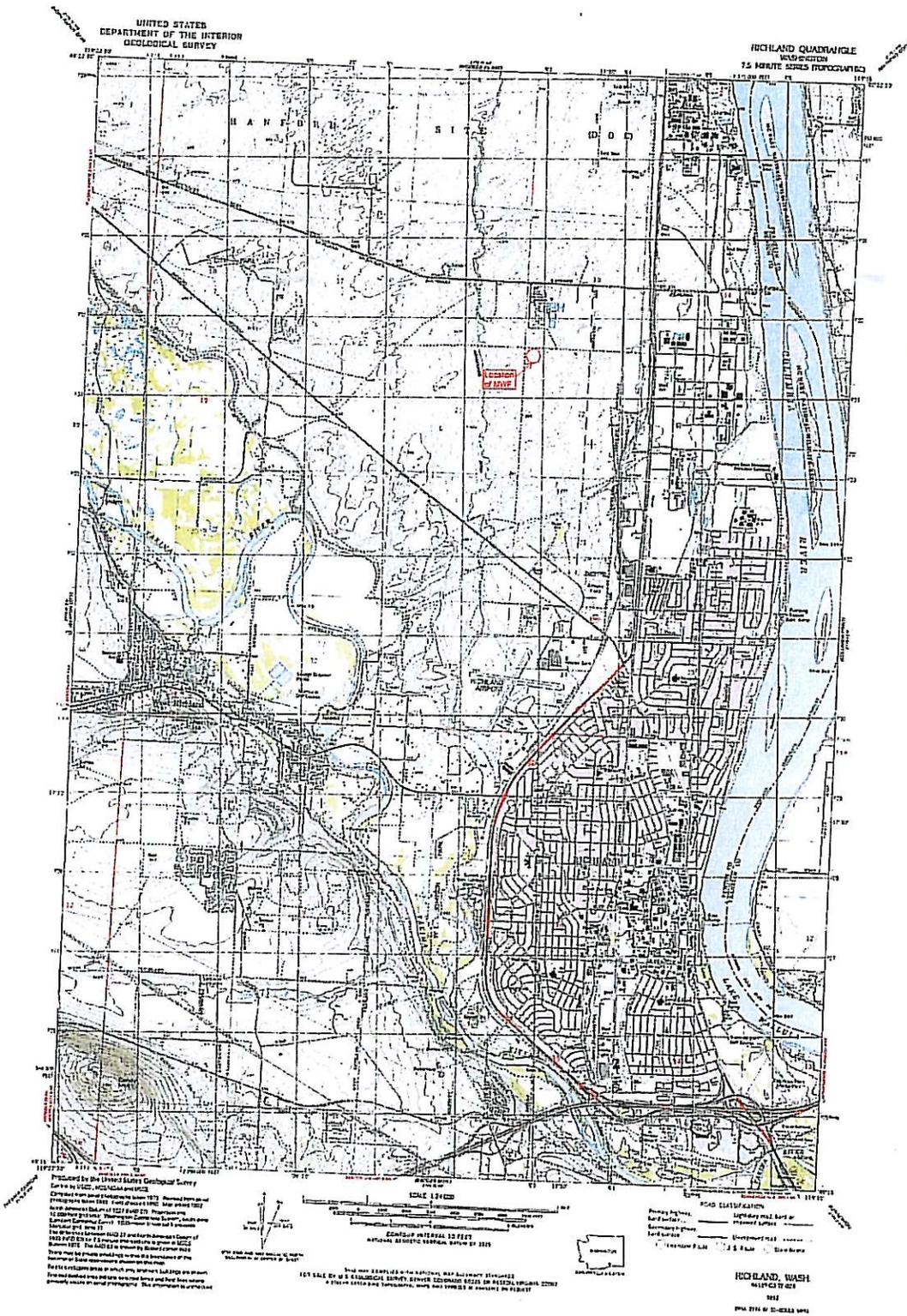
(AS-BUILT) MIXED WASTE FACILITY
 ROOM GENERAL ARRANGEMENT
 BLDG 13

SCALE: NONE SHT: 1 OF 1
 PERMAFIX-DWG-MW-GA-001

A

A

USGS Topographic Map



Mixed Waste Facility
 Revision 1, Date: May 2011

SECTION 2

**FACILITY DESCRIPTION AND
GENERAL PROVISIONS**

**MIXED WASTE FACILITY
RCRA/TSCA PERMIT APPLICATION**

PERMA-FIX NORTHWEST RICHLAND, INC.

RICHLAND, WASHINGTON