

E-MAILED
3-8-11

FEB 24 2011

Ms. Hope Wright
Illinois Environmental Protection Agency
Bureau of Land #24
Annual Reports and Data Collection Unit
1021 North Grand Avenue East
P.O. Box 19276
Springfield, IL 62794-9276

Dear Ms. Wright:

SUBJECT: 2010 HAZARDOUS WASTE ANNUAL REPORT FOR THE FERMI NATIONAL
ACCELERATOR LABORATORY (FERMILAB) IEPA # 0890105010

- References:
- 1) Letter, from D. Walters to Hazardous Waste Generators, Subject: 2010 Hazardous Waste Annual Report
 - 2) Letter, from M. Bollinger to K. Mably, dated January 18, 2011, Subject: 2011 Annual Payment of Permit and Inspection Fees for Fermi National Accelerator Laboratory (Fermilab), Batavia, IL IEPA # 0890105010

Enclosed, please find a hard copy of the subject report, which Fermilab completed according to the Illinois Environmental Protection Agency's (IEPA's) request (Reference 1). Due to technical difficulties with the IEPA downloadable software, we are not able to submit this year's report in electronic format.

Mr. David Walters, of your office, requested payment of an annual \$500 fee for Large Quantity Generators. Fermilab, as a permitted hazardous waste storage facility, has already paid the \$500 annual Permit and Inspection fee for 2011 (Reference 2). If you have any questions, please contact Rick Hersemann, of my staff, at (630) 840-4122.

Sincerely,

Original Signed by
Mark E. Bollinger
Deputy Manager
Michael J. Weis
Site Manager

Enclosure:
As Stated

bc: R. Hersemann, w/o encl.
J. Scott, w/o encl.
N. Grossman, w/o encl.
B. Arnold, w/o encl.

S: HWReport2010.rh.docx

File:

BUREAU OF LAND INVENTORY DATA INPUT FORM

Complete this form to change or correct company name and address, owner, operator, annual report address, telephone numbers, contacts. To be used to update information for existing inventory number, not for a new location.

Generator or Inventory #:

TRAN CODE

TRAN DATE

0 8 9 0 1 0 5 0 1 0
Numbers are location specific, not company specific 10

Change 14

____/____/____ HAR
15 (LEAVE BLANK) 20 21 23

010 Company NAME

F E R M I L A B

USEPA#: I L 6 8 9 0 0 3 0 0 4 6 NAICS CODE: 5 4 1 7 1
66 Numbers are location specific, not company specific 77 94 99 100 105

020 Company LOCATION (Street address required)

SEND MAIL HERE N

STREET: K I R K & P I N E
24 To be changed only when postal designations change, not to be used when the company moves to a new location 48

P.O. BOX: 5 0 0
49 54

CITY: B A T A V I A STATE: I L
55 74 75 76

ZIP: 6 0 5 1 0 - TELEPHONE: 6 3 0 8 4 0 3 7 4 1
77 85 86 89 92 95

CONTACT: B I L L Y A R N O L D MAIL IND: _____
96 120 121

030 OWNER ADDRESS:

SEND MAIL HERE Y

NAME: U S D E P T O F E N E R G Y
24 53

STREET: K I R K & P I N E
54 78

P.O. BOX: 2 0 0 0 CITY: B A T A V I A
79 84 85 104

STATE: I L ZIP: 6 0 5 1 0 - TELEPHONE: 6 3 0 8 4 0 4 1 2 2
105 106 107 115 116 119 122 125

CONTACT: R I C K H E R S E M A N N MAIL IND: _____
126 150 151

040 OPERATOR ADDRESS:

SEND MAIL HERE N

NAME: F E R M I R E S E A R C H A L L I A N C E L L C
24 53

STREET: K I R K & P I N E
54 78

P.O. BOX: 5 0 0 CITY: B A T A V I A
79 84 85 104

STATE: I L ZIP: 6 0 5 1 0 - TELEPHONE: 6 3 0 8 4 0 3 7 4 1
105 106 107 115 116 119 122 125

CONTACT: B I L L Y A R N O L D MAIL IND: _____
126 150 151

060 ANNUAL REPORT MAILING ADDRESS:

NAME: U S D E P T O F E N E R G Y (F E R M I L A B)
24 53

STREET: K I R K & P I N E
54 78

P.O. BOX: 2 0 0 0 CITY: B A T A V I A
79 84 85 104

STATE: I L ZIP: 6 0 5 1 0 - TELEPHONE: 6 3 0 8 4 0 3 2 8 1
105 106 107 115 116 119 122 125

CONTACT: M I C H A E L W E I S TITLE: C
126 (First name) 135 136 (Last Name) 150 151

Previous Company Name:

IL 532 2470
LPC 549 Rev 4/01

Do Not Number This Page

US EPA Number: LL 6 8 9 0 0 3 0 0 4 6

IEPA Number: 0 8 9 0 1 0 5 0 1 0

Company name: Fermilab

Address: Wilson Rd, P.O. Box 500 Batavia, IL 60510

Instructions for this form found on pages 12-15 All information on this page is required.

ILLINOIS Environmental Protection Agency
2010 Hazardous Waste Report
Form IC - Identification and Certification

Section 1. HAZARDOUS WASTE ACTIVITIES

31 1 RCRA Generator Status as of 3-1-2011

1= LQG: Greater than 1,000 kg/mo (2200 lbs/mo) of non-acute hazardous waste

2= SQG: 100 to 1,000 kg/mo (220-2220 lbs/mo) of non-acute hazardous waste

3= CESSG: Less than 100 kg/mo of non-acute hazardous waste

4= Nongenerator

32 ___ Although site is no longer a LQG, it was a LQG during the calendar year of 2010-Form GM&TI attached.

Other Generator Activities: Enter Y (yes) or N (no)

33 N United States Importer of Hazardous Waste

34 Y Mixed Waste (hazardous & radioactive) Generator

For IEPA (Agency) Use Only:

Fee enclosed No Fee Enclosed

All other hazardous waste activities: Enter Y or N

35 N Transporter of Hazardous Waste

36 Y Treater, Storer, or Disposer of Hazardous Waste (at your site).

Note: A hazardous waste permit is required for this activity.

37 N Recycler of Hazardous Waste (at your site)

Note: A hazardous waste permit may be required for this activity.

Exempt Boiler and/or Industrial Furnace:

38 N Small Quantity On-Site Burner Exemption

39 N Smelting, Melting, Refining Furnace Exemption

40 N Underground Injection Control

Section 2. UNIVERSAL WASTE ACTIVITIES: Y or N

Y Large Quantity Handler (5000 kg) of Universal Waste.

Batteries Managed 42 X

Pesticides 44 ___

Mercury Containing Equipment 46 X

Lamps 48 X

49 N Destination Facility for Universal Waste. Note: A hazardous waste permit may be required for this activity.

Section 3. USED OIL ACTIVITIES: Enter Y or N

50 N Used Oil Transporter

51 N Used Oil Transfer Facility

52 N Used Oil Processor

53 N Used Oil Re-refiner

54 N Off-Specification Used Oil Burner

55 N Marketer who Directs Shipment of Off-Spec

Used oil to Off-spec Used Oil Burner

56 N Marketer Who First Claims the Used Oil Meets the Specifications

Section 4. ENTER THE 5 or 6 digit NAICS CODE(S) FOR THIS LOCATION

57 5 4 1 7 1 63 _____ 69 _____ 75 _____

Section 5. TYPES:

Site Land Type (Enter code from list in instructions): 81 4

Owner Type: (Enter code from list in instructions): 82 4

Date current owner Became Owner (mm/dd/yyyy): 83 1 1 / 2 1 / 1 9 6 7

Operator Type: (Enter code from list in instructions): 91 8

Date current operator Became Operator (mm/dd/yyyy): 92 0 1 / 0 1 / 2 0 0 7

Section 6. Comments: 100 ___ Enter Y (Yes) if you have comments regarding this page and attach extra sheet.

COST ESTIMATES FOR TSD FACILITIES, Interim status and permitted

A. Closure cost estimate: \$ 203,587.00

B. Estimate for post closure monitoring and maintenance costs (disposal facilities only): \$ _____

Section 7. Any person who knowingly makes a false, fictitious, or fraudulent material statement, orally or in writing, to the Illinois EPA commits a Class 4 felony. A second or subsequent offense after conviction is a Class 3 felony. (415 ILCS 5/44(h))

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.

A. Please print: Last Name ARNOLD First Name BILLY B. Title HCT LEADER

C. Signature Billy Arnold D. Date of Signature 2-15-11

Name, Telephone number, and FAX number of person to contact if there are questions about this report. _____

DAVE HOCKIN 630-840-4498 / 630-840-8890

The Environmental Protection Agency is authorized to require this information under the Illinois Compiled Statutes (ILCS), 1994 as amended, Chapter 415 ILCS 5/4 and 21. Disclosure of this information is required. Failure to disclose this information may result in civil and criminal penalties pursuant to 415 ILCS 5/42 and 44. This form has been approved by the Forms Management Center.

US EPA Number: 11 6 8 9 0 0 3 0 0 4 6
IEPA Number: 0 8 9 0 1 0 5 0 1 0
Company name: Fermilab
Address: Wilson Rd. P.O. Box 500 Batavia, IL 60510

ILLINOIS Environmental Protection Agency
2010 Hazardous Waste Report
Form GM - Generation and Management

Instructions for this form found on pages 16-21. (Same UOM and density must be used for all quantities on this page).

SECTION 1. WASTE DESCRIPTION

A. Waste Description: Aerosols Lab Packed
B. EPA Hazardous Waste Code D 0 0 1 D 0 0 5 D 0 3 5 D 0 4 0 U 0 8 0
C. Source Code: G 1 1 When Source Code is G25, enter Management Method producing residuals: H
D. Form code: W 8 0 1 E. Waste Minimization Code N

SECTION 2. QUANTITY GENERATED [DENSITY MUST BE ENTERED FOR ALL WASTE STREAMS!]

All generation that counts towards your generation totals must be included on a Form GM, regardless of where or how managed.
A. UOM: 1 Density 3.05 lb/gal {Density of water is 08.34, most wastes are between 6 and 15}
B. Quantity generated in current reporting year: 4.7

SECTION 3. QUANTITY MANAGED ON-SITE: Did this location manage some or all of this waste in RCRA or UIC regulated treatment, recycling, or disposal units at this location? DO NOT include RCRA exempt processes.

N Y = Yes (continue to system 1) N = No (skip to section 4.)
On-Site System 1: Management Method H Quantity managed on-site this year: _____
On-Site System 2: Management Method H Quantity managed on-site this year: _____

SECTION 4. OFF-SITE SHIPMENT - Refer to page 29 for common errors on facilities & management methods.

A. Was any of this waste shipped off site this reporting year? Y Y = Yes (Continue to Site 1) N = No

SITE 1. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: A R D 0 6 9 7 4 8 1 9 2
C. Management method shipped to: H 0 4 0
D. Total quantity shipped in this reporting year: 3 5 . 0

SITE 2. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____
C. Management method shipped to: H
D. Total quantity shipped in this reporting year: _____

SITE 3. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____
C. Management method shipped to: H
D. Total quantity shipped in this reporting year: _____

SITE 4. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____
C. Management method shipped to: H
D. Total quantity shipped in this reporting year: _____

SITE 5. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____
C. Management method shipped to: H
D. Total quantity shipped in this reporting year: _____

COMMENTS: Y Enter Y (Yes) if you have comments regarding this page and attach extra sheet.

IL6 890 030 046 089 01050 10
FERMILAB
WILSON RD
P. O. BOX 500
BATAVIA

IL
60510

**ILLINOIS Environmental Protection Agency
2010 Hazardous Waste Report**

COMMENTS:

Section 2, B and Section 4, Site 1, D

The waste quantity entered in Section 2, B reflects the actual quantity of waste generated (not the container capacity). The waste quantity entered in Section 4 Site 1, D reflects the manifested quantity (the container capacity). Therefore, the value entered for the quantity shipped (in Section 4) is greater than the value entered for the quantity generated (in Section 2) when referring to the same waste.

US EPA Number: 1 1 6 8 9 0 0 3 0 0 4 6
IEPA Number: 0 8 9 0 1 0 5 0 1 0
Company name: Fermilab
Address: Wilson Rd. P.O. Box 500 Batavia, IL 60510

ILLINOIS Environmental Protection Agency
2010 Hazardous Waste Report
Form GM - Generation and Management

Instructions for this form found on pages 16-21. (Same UOM and density must be used for all quantities on this page).

SECTION 1. WASTE DESCRIPTION

A. Waste Description: Misc. Small Quantities Lab Packed

B. EPA Hazardous Waste Code L A B P

C. Source Code: G 1 1 When Source Code is G25, enter Management Method producing residuals: H

D. Form code: W 0 0 1 E. Waste Minimization Code N

SECTION 2. QUANTITY GENERATED [DENSITY MUST BE ENTERED FOR ALL WASTE STREAMS!]

All generation that counts towards your generation totals must be included on a Form GM, regardless of where or how managed.

A. UOM: 1 Density 3.77 lb/gal (Density of water is 08.34, most wastes are between 6 and 15)

B. Quantity generated in current reporting year: 4 3 5 . 4

SECTION 3. QUANTITY MANAGED ON-SITE: Did this location manage some or all of this waste in RCRA or UIC regulated treatment, recycling, or disposal units at this location? DO NOT include RCRA exempt processes.

N Y = Yes (continue to system 1) N = No (skip to section 4.)

On-Site System 1: Management Method H Quantity managed on-site this year: _____

On-Site System 2: Management Method H Quantity managed on-site this year: _____

SECTION 4. OFF-SITE SHIPMENT - Refer to page 29 for common errors on facilities & management methods.

A. Was any of this waste shipped off site this reporting year? Y Y = Yes (Continue to Site 1) N = No

SITE 1. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: A R D 0 6 9 7 4 8 1 9 2

C. Management method shipped to: H 0 4 0

D. Total quantity shipped in this reporting year: 1 3 2 1 . 0

SITE 2. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____

C. Management method shipped to: H

D. Total quantity shipped in this reporting year: _____

SITE 3. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____

C. Management method shipped to: H

D. Total quantity shipped in this reporting year: _____

SITE 4. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____

C. Management method shipped to: H

D. Total quantity shipped in this reporting year: _____

SITE 5. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____

C. Management method shipped to: H

D. Total quantity shipped in this reporting year: _____

COMMENTS: Y Enter Y (Yes) if you have comments regarding this page and attach extra sheet.

IL6 890 030 046 089 01050 10
FERMILAB
WILSON RD
P. O. BOX 500
BATAVIA

IL
60510

**ILLINOIS Environmental Protection Agency
2010 Hazardous Waste Report**

COMMENTS:

Section 2, B and Section 4, Site 1, D

The waste quantity entered in Section 2, B reflects the actual quantity of waste generated (not the container capacity). The waste quantity entered in Section 4 Site 1, D reflects the manifested quantity (the container capacity). Therefore, the value entered for the quantity shipped (in Section 4) is greater than the value entered for the quantity generated (in Section 2) when referring to the same waste.

US EPA Number: 1 1 6 8 9 0 0 3 0 0 4 6
IEPA Number: 0 8 9 0 1 0 5 0 1 0
Company name: Fermilab
Address: Wilson Rd. P.O. Box 500 Batavia, IL 60510

ILLINOIS Environmental Protection Agency
2010 Hazardous Waste Report
Form GM - Generation and Management

Instructions for this form found on pages 16-21. (Same UOM and density must be used for all quantities on this page).

SECTION 1. WASTE DESCRIPTION

A. Waste Description: Acute Waste Lab Packed
B. EPA Hazardous Waste Code P 0 4 2 D 0 0 8 F 0 0 1
C. Source Code: G 1 1 When Source Code is G25, enter Management Method producing residuals: H
D. Form code: W 0 0 4 E. Waste Minimization Code N

SECTION 2. QUANTITY GENERATED [DENSITY MUST BE ENTERED FOR ALL WASTE STREAMS!]

All generation that counts towards your generation totals must be included on a Form GM, regardless of where or how managed.

A. UOM: 1 Density 4.48 lb/gal {Density of water is 08.34, most wastes are between 6 and 15}

B. Quantity generated in current reporting year: 2 7 . 4

SECTION 3. QUANTITY MANAGED ON-SITE: Did this location manage some or all of this waste in RCRA or UIC regulated treatment, recycling, or disposal units at this location? DO NOT include RCRA exempt processes.

N Y = Yes (continue to system 1) N = No (skip to section 4.)

On-Site System 1: Management Method H Quantity managed on-site this year: 83

On-Site System 2: Management Method H Quantity managed on-site this year: 97

SECTION 4. OFF-SITE SHIPMENT - Refer to page 29 for common errors on facilities & management methods.

A. Was any of this waste shipped off site this reporting year? Y Y = Yes (Continue to Site 1) N = No

SITE 1. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: A R D 0 6 9 7 4 8 1 9 2

C. Management method shipped to: H 0 4 0

D. Total quantity shipped in this reporting year: 6 0 . 0

SITE 2. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: 134

C. Management method shipped to: H

D. Total quantity shipped in this reporting year: 150

SITE 3. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: 160

C. Management method shipped to: H

D. Total quantity shipped in this reporting year: 176

SITE 4. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: 186

C. Management method shipped to: H

D. Total quantity shipped in this reporting year: 202

SITE 5. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: 212

C. Management method shipped to: H

D. Total quantity shipped in this reporting year: 228

COMMENTS: Y Enter Y (Yes) if you have comments regarding this page and attach extra sheet.

IL6 890 030 046 089 01050 10
FERMILAB
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**ILLINOIS Environmental Protection Agency
2010 Hazardous Waste Report**

COMMENTS:

Section 2, B and Section 4, Site 1, D

The waste quantity entered in Section 2, B reflects the actual quantity of waste generated (not the container capacity). The waste quantity entered in Section 4 Site 1, D reflects the manifested quantity (the container capacity). Therefore, the value entered for the quantity shipped (in Section 4) is greater than the value entered for the quantity generated (in Section 2) when referring to the same waste.

US EPA Number: 1 L 6 8 9 0 0 3 0 0 4 6
IEPA Number: 0 8 9 0 1 0 5 0 1 0
Company name: Fermilab
Address: Wilson Rd. P.O. Box 500 Batavia, IL 60510

ILLINOIS Environmental Protection Agency
2010 Hazardous Waste Report
Form GM - Generation and Management

Instructions for this form found on pages 16-21. (Same UOM and density must be used for all quantities on this page).

SECTION 1. WASTE DESCRIPTION

A. Waste Description: Toxic Lead Contaminated Machine Coolant from Lathes, Grinders and Mills
B. EPA Hazardous Waste Code D 0 0 8
C. Source Code: G 1 9 When Source Code is G25, enter Management Method producing residuals: H
D. Form code: W 2 0 5 E. Waste Minimization Code N

SECTION 2. QUANTITY GENERATED [DENSITY MUST BE ENTERED FOR ALL WASTE STREAMS!]

All generation that counts towards your generation totals must be included on a Form GM, regardless of where or how managed.

A. UOM: 1 Density 8.30 lb/gal (Density of water is 08.34, most wastes are between 6 and 15)
B. Quantity generated in current reporting year: 6 6 0 . 0

SECTION 3. QUANTITY MANAGED ON-SITE: Did this location manage some or all of this waste in RCRA or UIC regulated treatment, recycling, or disposal units at this location? DO NOT include RCRA exempt processes.

N Y = Yes (continue to system 1) N = No (skip to section 4.)

On-Site System 1: Management Method H Quantity managed on-site this year: _____
On-Site System 2: Management Method H Quantity managed on-site this year: _____

SECTION 4. OFF-SITE SHIPMENT - Refer to page 29 for common errors on facilities & management methods.

A. Was any of this waste shipped off site this reporting year? Y Y = Yes (Continue to Site 1) N = No

SITE 1. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: A R D 0 6 9 7 4 8 1 9 2
C. Management method shipped to: H 0 4 0
D. Total quantity shipped in this reporting year: 6 6 0 . 0

SITE 2. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____
C. Management method shipped to: H
D. Total quantity shipped in this reporting year: _____

SITE 3. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____
C. Management method shipped to: H
D. Total quantity shipped in this reporting year: _____

SITE 4. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____
C. Management method shipped to: H
D. Total quantity shipped in this reporting year: _____

SITE 5. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____
C. Management method shipped to: H
D. Total quantity shipped in this reporting year: _____

COMMENTS: Y Enter Y (Yes) if you have comments regarding this page and attach extra sheet.

IL6 890 030 046 089 01050 10
FERMILAB
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BATAVIA

IL
60510

**ILLINOIS Environmental Protection Agency
2010 Hazardous Waste Report**

COMMENTS:

Section 1, C.

Source Code: G19 - Coolant change out from machine tools i.e., grinders, mills, lathes used to machine metals containing lead.

US EPA Number: 11 6 8 9 0 0 3 0 0 4 6
IEPA Number: 0 8 9 0 1 0 5 0 1 0
Company name: Fermilab
Address: Wilson Rd. P.O. Box 500 Batavia, IL 60510

ILLINOIS Environmental Protection Agency
2010 Hazardous Waste Report
Form GM - Generation and Management

Instructions for this form found on pages 16-21. (Same UOM and density must be used for all quantities on this page).

SECTION 1. WASTE DESCRIPTION

A. Waste Description: Flammable Paint Removed from Aerosol Cans
B. EPA Hazardous Waste Code D 0 0 1 D 0 3 5
C. Source Code: G 1 1 When Source Code is G25, enter Management Method producing residuals: H
D. Form code: W 2 0 9 E. Waste Minimization Code N

SECTION 2. QUANTITY GENERATED [DENSITY MUST BE ENTERED FOR ALL WASTE STREAMS!]

All generation that counts towards your generation totals must be included on a Form GM, regardless of where or how managed.

A. UOM: 1 Density 7.50 lb/gal (Density of water is 08.34, most wastes are between 6 and 15)
B. Quantity generated in current reporting year: 1 0 . 0

SECTION 3. QUANTITY MANAGED ON-SITE: Did this location manage some or all of this waste in RCRA or UIC regulated treatment, recycling, or disposal units at this location? DO NOT include RCRA exempt processes.

N Y = Yes (continue to system 1) N = No (skip to section 4.)

On-Site System 1: Management Method H Quantity managed on-site this year: _____
On-Site System 2: Management Method H Quantity managed on-site this year: _____

SECTION 4. OFF-SITE SHIPMENT - Refer to page 29 for common errors on facilities & management methods.

A. Was any of this waste shipped off site this reporting year? Y Y = Yes (Continue to Site 1) N = No

SITE 1. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: A R D 0 6 9 7 4 8 1 9 2
C. Management method shipped to: H 0 4 0
D. Total quantity shipped in this reporting year: 1 0 . 0

SITE 2. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____
C. Management method shipped to: H
D. Total quantity shipped in this reporting year: _____

SITE 3. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____
C. Management method shipped to: H
D. Total quantity shipped in this reporting year: _____

SITE 4. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____
C. Management method shipped to: H
D. Total quantity shipped in this reporting year: _____

SITE 5. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____
C. Management method shipped to: H
D. Total quantity shipped in this reporting year: _____

COMMENTS: N Enter Y (Yes) if you have comments regarding this page and attach extra sheet.

US EPA Number: I L 6 8 9 0 0 3 0 0 4 6
IEPA Number: 0 8 9 0 1 0 5 0 1 0
Company name: Fermilab
Address: Wilson Rd. P.O. Box 500 Batavia, IL 60510

ILLINOIS Environmental Protection Agency
2010 Hazardous Waste Report
Form GM - Generation and Management

Instructions for this form found on pages 16-21. (Same UOM and density must be used for all quantities on this page).

SECTION 1. WASTE DESCRIPTION

A. Waste Description: Toxic, Combustible Solvent from Parts Washing Tank
B. EPA Hazardous Waste Code D 0 3 9
C. Source Code: G 0 1 When Source Code is G25, enter Management Method producing residuals: H
D. Form code: W 2 1 1 E. Waste Minimization Code N

SECTION 2. QUANTITY GENERATED [DENSITY MUST BE ENTERED FOR ALL WASTE STREAMS!]

All generation that counts towards your generation totals must be included on a Form GM, regardless of where or how managed.

A. UOM: 1 Density 6.70 lb/gal (Density of water is 08.34, most wastes are between 6 and 15)

B. Quantity generated in current reporting year: 60.0

SECTION 3. QUANTITY MANAGED ON-SITE: Did this location manage some or all of this waste in RCRA or UIC regulated treatment, recycling, or disposal units at this location? DO NOT include RCRA exempt processes.

N Y = Yes (continue to system 1) N = No (skip to section 4.)

On-Site System 1: Management Method H Quantity managed on-site this year: _____

On-Site System 2: Management Method H Quantity managed on-site this year: _____

SECTION 4. OFF-SITE SHIPMENT - Refer to page 29 for common errors on facilities & management methods.

A. Was any of this waste shipped off site this reporting year? Y Y = Yes (Continue to Site 1) N = No

SITE 1. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: I L D 0 0 0 8 0 5 9 1 1

C. Management method shipped to: H 1 4 1

D. Total quantity shipped in this reporting year: 60.0

SITE 2. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____

C. Management method shipped to: H

D. Total quantity shipped in this reporting year: _____

SITE 3. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____

C. Management method shipped to: H

D. Total quantity shipped in this reporting year: _____

SITE 4. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____

C. Management method shipped to: H

D. Total quantity shipped in this reporting year: _____

SITE 5. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____

C. Management method shipped to: H

D. Total quantity shipped in this reporting year: _____

COMMENTS: Y Enter Y (Yes) if you have comments regarding this page and attach extra sheet.

IL6 890 030 046 089 01050 10
FERMILAB
WILSON RD
P. O. BOX 500
BATAVIA

IL
60510

**ILLINOIS Environmental Protection Agency
2010 Hazardous Waste Report**

COMMENTS:

Section 4, Site 1, C
Management Method H141 - Shipped to Management Method H020

US EPA Number: 1 1 6 8 9 0 0 3 0 0 4 6
IEPA Number: 0 8 9 0 1 0 5 0 1 0
Company name: Fermilab
Address: Wilson Rd. P.O. Box 500 Batavia, IL 60510

ILLINOIS Environmental Protection Agency
2010 Hazardous Waste Report
Form GM - Generation and Management

Instructions for this form found on pages 16-21. (Same UOM and density must be used for all quantities on this page).

SECTION 1. WASTE DESCRIPTION

A. Waste Description: Ignitable, Toxic Solvent Contaminated Rags/Wipers from Cleaning Operations
B. EPA Hazardous Waste Code D 0 0 1 F 0 0 3 F 0 0 5
C. Source Code: G 1 9 When Source Code is G25, enter Management Method producing residuals: H
D. Form code: W 4 0 9 E. Waste Minimization Code N

SECTION 2. QUANTITY GENERATED [DENSITY MUST BE ENTERED FOR ALL WASTE STREAMS!]

All generation that counts towards your generation totals must be included on a Form GM, regardless of where or how managed.

A. UOM: 3 Density 1.000 lb/gal (Density of water is 08.34, most wastes are between 6 and 15)
B. Quantity generated in current reporting year: 5 2 0 . 0

SECTION 3. QUANTITY MANAGED ON-SITE: Did this location manage some or all of this waste in RCRA or UIC regulated treatment, recycling, or disposal units at this location? DO NOT include RCRA exempt processes.

N Y = Yes (continue to system 1) N = No (skip to section 4.)

On-Site System 1: Management Method H Quantity managed on-site this year: _____
On-Site System 2: Management Method H Quantity managed on-site this year: _____

SECTION 4. OFF-SITE SHIPMENT - Refer to page 29 for common errors on facilities & management methods.

A. Was any of this waste shipped off site this reporting year? Y Y = Yes (Continue to Site 1) N = No

SITE 1. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: A R D 0 6 9 7 4 8 1 9 2
C. Management method shipped to: H 0 4 0
D. Total quantity shipped in this reporting year: 3 1 6 . 0

SITE 2. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: N E D 9 8 1 7 2 3 5 1 3
C. Management method shipped to: H 0 4 0
D. Total quantity shipped in this reporting year: 2 0 4 . 0

SITE 3. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____
C. Management method shipped to: H
D. Total quantity shipped in this reporting year: _____

SITE 4. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____
C. Management method shipped to: H
D. Total quantity shipped in this reporting year: _____

SITE 5. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____
C. Management method shipped to: H
D. Total quantity shipped in this reporting year: _____

COMMENTS: Y Enter Y (Yes) if you have comments regarding this page and attach extra sheet.

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2010 Hazardous Waste Report

COMMENTS:

Section 1, C.

Source Code: G19 - Rags generated from cleaning machined parts, glassware, and bench tops.

Section 1, D.

Waste Form Code: W409 - Is a mixture of cloth rags and paper wipes contaminated with non-halogenated solvents.

US EPA Number: 116890030046
IEPA Number: 0890105010
Company name: Fermilab
Address: Wilson Rd. P.O. Box 500 Batavia, IL 60510

ILLINOIS Environmental Protection Agency
2010 Hazardous Waste Report
Form GM - Generation and Management

Instructions for this form found on pages 16-21. (Same UOM and density must be used for all quantities on this page).

SECTION 1. WASTE DESCRIPTION

A. Waste Description: Toxic Lead Contaminated Paint Chips from Building Renovation
B. EPA Hazardous Waste Code D 0 0 8
C. Source Code: G 1 9 When Source Code is G25, enter Management Method producing residuals: H
D. Form code: W 3 1 9 E. Waste Minimization Code N

SECTION 2. QUANTITY GENERATED [DENSITY MUST BE ENTERED FOR ALL WASTE STREAMS!]

All generation that counts towards your generation totals must be included on a Form GM, regardless of where or how managed.

A. UOM: 3 Density 4.08 lb/gal (Density of water is 08.34, most wastes are between 6 and 15)

B. Quantity generated in current reporting year: 2 5 1 . 0

SECTION 3. QUANTITY MANAGED ON-SITE: Did this location manage some or all of this waste in RCRA or UIC regulated treatment, recycling, or disposal units at this location? DO NOT include RCRA exempt processes.

N Y = Yes (continue to system 1) N = No (skip to section 4.)

On-Site System 1: Management Method H Quantity managed on-site this year: _____

On-Site System 2: Management Method H Quantity managed on-site this year: _____

SECTION 4. OFF- SITE SHIPMENT - Refer to page 29 for common errors on facilities & management methods.

A. Was any of this waste shipped off site this reporting year? Y Y = Yes (Continue to Site 1) N = No

SITE 1. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: A R D 0 6 9 7 4 8 1 9 2

C. Management method shipped to: H 0 4 0

D. Total quantity shipped in this reporting year: 2 1 4 . 0

SITE 2. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: O H D 0 0 0 8 1 6 6 2 9

C. Management method shipped to: H 1 4 1

D. Total quantity shipped in this reporting year: 3 7 . 0

SITE 3. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____

C. Management method shipped to: H

D. Total quantity shipped in this reporting year: _____

SITE 4. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____

C. Management method shipped to: H

D. Total quantity shipped in this reporting year: _____

SITE 5. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____

C. Management method shipped to: H

D. Total quantity shipped in this reporting year: _____

COMMENTS: Y Enter Y (Yes) if you have comments regarding this page and attach extra sheet.

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COMMENTS:

Section 1, C.

Source Code: G19 – Removing paint from wood siding using scrapping methods.

Section 1, D.

Waste Form Code: W319 - Lead contaminated paint chips.

Section 4, Site 2, C

Management Method H141 - Shipped to Management Method H132

US EPA Number: 1 1 6 8 9 0 0 3 0 0 4 6
IEPA Number: 0 8 9 0 1 0 5 0 1 0
Company name: Fermilab
Address: Wilson Rd. P.O. Box 500 Batavia, IL 60510

ILLINOIS Environmental Protection Agency
2010 Hazardous Waste Report
Form GM - Generation and Management

Instructions for this form found on pages 16-21. (Same UOM and density must be used for all quantities on this page).

SECTION 1. WASTE DESCRIPTION

A. Waste Description: Flammable Pseudocumene
B. EPA Hazardous Waste Code D 0 0 1
C. Source Code: G 1 1 When Source Code is G25, enter Management Method producing residuals: H
D. Form code: W 2 1 9 E. Waste Minimization Code N

SECTION 2. QUANTITY GENERATED [DENSITY MUST BE ENTERED FOR ALL WASTE STREAMS!]

All generation that counts towards your generation totals must be included on a Form GM, regardless of where or how managed.

A. UOM: 1 Density 7.24 lb/gal (Density of water is 08.34, most wastes are between 6 and 15)
B. Quantity generated in current reporting year: 5 5 . 0

SECTION 3. QUANTITY MANAGED ON-SITE: Did this location manage some or all of this waste in RCRA or UIC regulated treatment, recycling, or disposal units at this location? DO NOT include RCRA exempt processes.

N Y = Yes (continue to system 1) N = No (skip to section 4.)

On-Site System 1: Management Method H Quantity managed on-site this year: _____
On-Site System 2: Management Method H Quantity managed on-site this year: _____

SECTION 4. OFF-SITE SHIPMENT - Refer to page 29 for common errors on facilities & management methods.

A. Was any of this waste shipped off site this reporting year? Y Y = Yes (Continue to Site 1) N = No

SITE 1. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: A R D 0 6 9 7 4 8 1 9 2
C. Management method shipped to: H 0 5 0
D. Total quantity shipped in this reporting year: 5 5 . 0

SITE 2. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____
C. Management method shipped to: H
D. Total quantity shipped in this reporting year: _____

SITE 3. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____
C. Management method shipped to: H
D. Total quantity shipped in this reporting year: _____

SITE 4. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____
C. Management method shipped to: H
D. Total quantity shipped in this reporting year: _____

SITE 5. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____
C. Management method shipped to: H
D. Total quantity shipped in this reporting year: _____

COMMENTS: Y Enter Y (Yes) if you have comments regarding this page and attach extra sheet.

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COMMENTS:

Section 1, D.

Waste Form Code: W219 - Is a mixture of 1,2,4-trimethylbenzene, 1,3,5-trimethylbenzene and 1,2,3-trimethylbenzene

US EPA Number: 1 L 6 8 9 0 0 3 0 0 4 6
IEPA Number: 0 8 9 0 1 0 5 0 1 0
Company name: Fermilab
Address: Wilson Rd. P.O. Box 500 Batavia, IL 60510

ILLINOIS Environmental Protection Agency
2010 Hazardous Waste Report
Form GM - Generation and Management

Instructions for this form found on pages 16-21. (Same UOM and density must be used for all quantities on this page).

SECTION 1. WASTE DESCRIPTION

A. Waste Description: Corrosive De-Scaler from Cleaning Heat Exchangers
B. EPA Hazardous Waste Code D 0 0 2
C. Source Code: G 0 2 When Source Code is G25, enter Management Method producing residuals: H
D. Form code: W 1 0 5 E. Waste Minimization Code N

SECTION 2. QUANTITY GENERATED (DENSITY MUST BE ENTERED FOR ALL WASTE STREAMS!)

All generation that counts towards your generation totals must be included on a Form GM, regardless of where or how managed.

A. UOM: 1 Density 8.30 lb/gal (Density of water is 08.34, most wastes are between 6 and 15)

B. Quantity generated in current reporting year: 1 6 5 . 0

SECTION 3. QUANTITY MANAGED ON-SITE: Did this location manage some or all of this waste in RCRA or UIC regulated treatment, recycling, or disposal units at this location? DO NOT include RCRA exempt processes.

N Y = Yes (continue to system 1) N = No (skip to section 4.)

On-Site System 1: Management Method H Quantity managed on-site this year: _____

On-Site System 2: Management Method H Quantity managed on-site this year: _____

SECTION 4. OFF-SITE SHIPMENT - Refer to page 29 for common errors on facilities & management methods.

A. Was any of this waste shipped off site this reporting year? Y Y = Yes (Continue to Site 1) N = No

SITE 1. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: A R D 0 6 9 7 4 8 1 9 2

C. Management method shipped to: H 1 4 1

D. Total quantity shipped in this reporting year: 1 6 5 . 0

SITE 2. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____

C. Management method shipped to: H

D. Total quantity shipped in this reporting year: _____

SITE 3. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____

C. Management method shipped to: H

D. Total quantity shipped in this reporting year: _____

SITE 4. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____

C. Management method shipped to: H

D. Total quantity shipped in this reporting year: _____

SITE 5. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____

C. Management method shipped to: H

D. Total quantity shipped in this reporting year: _____

COMMENTS: Y Enter Y (Yes) if you have comments regarding this page and attach extra sheet.

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COMMENTS:

Section 4, Site 1, C
Management Method H141 - Shipped to Management Method H077

US EPA Number: 116890030046
IEPA Number: 0890105010
Company name: Fermilab
Address: Wilson Rd. P.O. Box 500 Batavia, IL 60510

ILLINOIS Environmental Protection Agency
2010 Hazardous Waste Report
Form GM – Generation and Management

Instructions for this form found on pages 16-21. (Same UOM and density must be used for all quantities on this page).

SECTION 1. WASTE DESCRIPTION

A. Waste Description: Corrosive Sulfuric Acid from Spill Clean Up
B. EPA Hazardous Waste Code D 0 0 2
C. Source Code: G 3 2 When Source Code is G25, enter Management Method producing residuals: H
D. Form code: W 1 0 3 E. Waste Minimization Code N

SECTION 2. QUANTITY GENERATED [DENSITY MUST BE ENTERED FOR ALL WASTE STREAMS!]

All generation that counts towards your generation totals must be included on a Form GM, regardless of where or how managed.

A. UOM: 1 Density 1 5 . 0 0 lb/gal {Density of water is 08.34, most wastes are between 6 and 15}
B. Quantity generated in current reporting year: 1 5 . 0

SECTION 3. QUANTITY MANAGED ON-SITE: Did this location manage some or all of this waste in RCRA or UIC regulated treatment, recycling, or disposal units at this location? DO NOT include RCRA exempt processes.

N Y = Yes (continue to system 1) N = No (skip to section 4.)

On-Site System 1: Management Method H Quantity managed on-site this year: _____
On-Site System 2: Management Method H Quantity managed on-site this year: _____

SECTION 4. OFF- SITE SHIPMENT – Refer to page 29 for common errors on facilities & management methods.

A. Was any of this waste shipped off site this reporting year? Y Y = Yes (Continue to Site 1) N = No

SITE 1. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: O H D 0 0 0 7 2 4 1 5 3
C. Management method shipped to: H 0 7 7
D. Total quantity shipped in this reporting year: 5 5 . 0

SITE 2. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____
C. Management method shipped to: H
D. Total quantity shipped in this reporting year: _____

SITE 3. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____
C. Management method shipped to: H
D. Total quantity shipped in this reporting year: _____

SITE 4. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____
C. Management method shipped to: H
D. Total quantity shipped in this reporting year: _____

SITE 5. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____
C. Management method shipped to: H
D. Total quantity shipped in this reporting year: _____

COMMENTS: Y Enter Y (Yes) if you have comments regarding this page and attach extra sheet.

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2010 Hazardous Waste Report**

COMMENTS:

Section 2, B and Section 4, Site 1, D

The waste quantity entered in Section 2, B reflects the actual quantity of waste generated (not the container capacity). The waste quantity entered in Section 4 Site 1, D reflects the manifested quantity (the container capacity). Therefore, the value entered for the quantity shipped (in Section 4) is greater than the value entered for the quantity generated (in Section 2) when referring to the same waste.

US EPA Number: 1 1 6 8 9 0 0 3 0 0 4 6
IEPA Number: 0 8 9 0 1 0 5 0 1 0
Company name: Fermilab
Address: Wilson Rd. P.O. Box 500 Batavia, IL 60510

ILLINOIS Environmental Protection Agency
2010 Hazardous Waste Report
Form GM - Generation and Management

Instructions for this form found on pages 16-21. (Same UOM and density must be used for all quantities on this page).

SECTION 1. WASTE DESCRIPTION

A. Waste Description: Corrosive Sulfuric Acid and Water from Spill Clean Up
B. EPA Hazardous Waste Code D 0 0 2
C. Source Code: G 3 2 When Source Code is G25, enter Management Method producing residuals: H
D. Form code: W 1 0 5 E. Waste Minimization Code N

SECTION 2. QUANTITY GENERATED [DENSITY MUST BE ENTERED FOR ALL WASTE STREAMS!]

All generation that counts towards your generation totals must be included on a Form GM, regardless of where or how managed.

A. UOM: 1 Density 8.30 lb/gal {Density of water is 08.34, most wastes are between 6 and 15}

B. Quantity generated in current reporting year: 55.0

SECTION 3. QUANTITY MANAGED ON-SITE: Did this location manage some or all of this waste in RCRA or UIC regulated treatment, recycling, or disposal units at this location? DO NOT include RCRA exempt processes.

N Y = Yes (continue to system 1) N = No (skip to section 4.)

On-Site System 1: Management Method H Quantity managed on-site this year: _____

On-Site System 2: Management Method H Quantity managed on-site this year: _____

SECTION 4. OFF-SITE SHIPMENT - Refer to page 29 for common errors on facilities & management methods.

A. Was any of this waste shipped off site this reporting year? Y Y = Yes (Continue to Site 1) N = No

SITE 1. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: O H D 0 0 0 7 2 4 1 5 3

C. Management method shipped to: H 0 7 7

D. Total quantity shipped in this reporting year: 55.0

SITE 2. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____

C. Management method shipped to: H

D. Total quantity shipped in this reporting year: _____

SITE 3. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____

C. Management method shipped to: H

D. Total quantity shipped in this reporting year: _____

SITE 4. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____

C. Management method shipped to: H

D. Total quantity shipped in this reporting year: _____

SITE 5. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____

C. Management method shipped to: H

D. Total quantity shipped in this reporting year: _____

COMMENTS: N Enter Y (Yes) if you have comments regarding this page and attach extra sheet.

US EPA Number: 1 1 6 8 9 0 0 3 0 0 4 6
IEPA Number: 0 8 9 0 1 0 5 0 1 0
Company name: Fernilab
Address: Wilson Rd. P.O. Box 500 Batavia, IL 60510

ILLINOIS Environmental Protection Agency
2010 Hazardous Waste Report
Form GM - Generation and Management

Instructions for this form found on pages 16-21. (Same UOM and density must be used for all quantities on this page).

SECTION 1. WASTE DESCRIPTION

A. Waste Description: Toxic Mercury
B. EPA Hazardous Waste Code D 0 0 9 U 1 5 1
C. Source Code: G 1 1 When Source Code is G25, enter Management Method producing residuals: H
D. Form code: W 1 1 7 E. Waste Minimization Code N

SECTION 2. QUANTITY GENERATED [DENSITY MUST BE ENTERED FOR ALL WASTE STREAMS!]

All generation that counts towards your generation totals must be included on a Form GM, regardless of where or how managed.

A. UOM: 3 Density 5.00 lb/gal {Density of water is 08.34, most wastes are between 6 and 15}
B. Quantity generated in current reporting year: 2.0

SECTION 3. QUANTITY MANAGED ON-SITE: Did this location manage some or all of this waste in RCRA or UIC regulated treatment, recycling, or disposal units at this location? DO NOT include RCRA exempt processes.

N Y = Yes (continue to system 1) N = No (skip to section 4.)

On-Site System 1: Management Method H Quantity managed on-site this year: _____
On-Site System 2: Management Method H Quantity managed on-site this year: _____

SECTION 4. OFF-SITE SHIPMENT - Refer to page 29 for common errors on facilities & management methods.

A. Was any of this waste shipped off site this reporting year? Y Y = Yes (Continue to Site 1) N = No

SITE 1. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: 0 H D 0 0 0 8 1 6 6 2 9
C. Management method shipped to: H 1 4 1
D. Total quantity shipped in this reporting year: 2.0

SITE 2. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____
C. Management method shipped to: H
D. Total quantity shipped in this reporting year: _____

SITE 3. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____
C. Management method shipped to: H
D. Total quantity shipped in this reporting year: _____

SITE 4. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____
C. Management method shipped to: H
D. Total quantity shipped in this reporting year: _____

SITE 5. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____
C. Management method shipped to: H
D. Total quantity shipped in this reporting year: _____

COMMENTS: Y Enter Y (Yes) if you have comments regarding this page and attach extra sheet.

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COMMENTS:

Section 4, Site 1, C
Management Method H141 - Shipped to Management Method H010

US EPA Number: LL 6 8 9 0 0 3 0 0 4 6
IEPA Number: 0 8 9 0 1 0 5 0 1 0
Company name: Fermilab
Address: Wilson Rd. P.O. Box 500 Batavia, IL 60510

ILLINOIS Environmental Protection Agency
2010 Hazardous Waste Report
Form GM – Generation and Management

Instructions for this form found on pages 16-21. (Same UOM and density must be used for all quantities on this page).

SECTION 1. WASTE DESCRIPTION

A. Waste Description: Flammable Adhesive
B. EPA Hazardous Waste Code D 0 0 1
C. Source Code: G 1 1 When Source Code is G25, enter Management Method producing residuals: H
D. Form code: W 8 0 1 E. Waste Minimization Code N

SECTION 2. QUANTITY GENERATED [DENSITY MUST BE ENTERED FOR ALL WASTE STREAMS!]

All generation that counts towards your generation totals must be included on a Form GM, regardless of where or how managed.

A. UOM: 3 Density 3.0 0 lb/gal {Density of water is 08.34, most wastes are between 6 and 15}
B. Quantity generated in current reporting year: 1 5 . 0

SECTION 3. QUANTITY MANAGED ON-SITE: Did this location manage some or all of this waste in RCRA or UIC regulated treatment, recycling, or disposal units at this location? DO NOT include RCRA exempt processes.

N Y = Yes (continue to system 1) N = No (skip to section 4.)

On-Site System 1: Management Method H Quantity managed on-site this year: _____
On-Site System 2: Management Method H Quantity managed on-site this year: _____

SECTION 4. OFF- SITE SHIPMENT – Refer to page 29 for common errors on facilities & management methods.

A. Was any of this waste shipped off site this reporting year? Y Y = Yes (Continue to Site 1) N = No

SITE 1. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: T X D 9 8 2 2 9 0 1 4 0
C. Management method shipped to: H 1 4 1
D. Total quantity shipped in this reporting year: 1 5 . 0

SITE 2. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____
C. Management method shipped to: H
D. Total quantity shipped in this reporting year: _____

SITE 3. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____
C. Management method shipped to: H
D. Total quantity shipped in this reporting year: _____

SITE 4. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____
C. Management method shipped to: H
D. Total quantity shipped in this reporting year: _____

SITE 5. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____
C. Management method shipped to: H
D. Total quantity shipped in this reporting year: _____

COMMENTS: Y Enter Y (Yes) if you have comments regarding this page and attach extra sheet.

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2010 Hazardous Waste Report**

COMMENTS:

Section 4, Site 1, C
Management Method H141 - Shipped to Management Method H040

US EPA Number: 116890030046
IEPA Number: 0890105010
Company name: Fermilab
Address: Wilson Rd. P.O. Box 500 Batavia, IL 60510

ILLINOIS Environmental Protection Agency
2010 Hazardous Waste Report
Form GM - Generation and Management

Instructions for this form found on pages 16-21. (Same UOM and density must be used for all quantities on this page).

SECTION 1. WASTE DESCRIPTION

A. Waste Description: Mixed Waste Lead Shielding
B. EPA Hazardous Waste Code D 0 0 8
C. Source Code: G 1 9 When Source Code is G25, enter Management Method producing residuals: H
D. Form code: W 3 1 9 E. Waste Minimization Code N

SECTION 2. QUANTITY GENERATED [DENSITY MUST BE ENTERED FOR ALL WASTE STREAMS!]

All generation that counts towards your generation totals must be included on a Form GM, regardless of where or how managed.

A. UOM: 3 Density 9 4 . 5 0 lb/gal (Density of water is 08.34, most wastes are between 6 and 15)

B. Quantity generated in current reporting year: 0 . 0

SECTION 3. QUANTITY MANAGED ON-SITE: Did this location manage some or all of this waste in RCRA or UIC regulated treatment, recycling, or disposal units at this location? DO NOT include RCRA exempt processes.

Y Y = Yes (continue to system 1) N = No (skip to section 4.)

On-Site System 1: Management Method H 1 4 3 Quantity managed on-site this year: 1 6 2 . 5

On-Site System 2: Management Method H Quantity managed on-site this year: .

SECTION 4. OFF-SITE SHIPMENT - Refer to page 29 for common errors on facilities & management methods.

A. Was any of this waste shipped off site this reporting year? Y Y = Yes (Continue to Site 1) N = No

SITE 1. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: U T D 9 8 2 5 9 8 8 9 8

C. Management method shipped to: H 1 3 2

D. Total quantity shipped in this reporting year: 1 6 2 . 5

SITE 2. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____

C. Management method shipped to: H

D. Total quantity shipped in this reporting year: _____

SITE 3. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____

C. Management method shipped to: H

D. Total quantity shipped in this reporting year: _____

SITE 4. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____

C. Management method shipped to: H

D. Total quantity shipped in this reporting year: _____

SITE 5. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____

C. Management method shipped to: H

D. Total quantity shipped in this reporting year: _____

COMMENTS: Y Enter Y (Yes) if you have comments regarding this page and attach extra sheet.

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COMMENTS:

Section 1, C.

Source Code: G19 - Removal of radioactive lead shielding material from service.

Section 1, D.

Waste Form Code: W319 - Includes a mixture of radioactive lead sheeting and a radioactive lead brick.

US EPA Number: 11 6 8 9 0 0 3 0 0 4 6
IEPA Number: 0 8 9 0 1 0 5 0 1 0
Company name: Fermilab
Address: Wilson Rd. P.O. Box 500 Batavia, IL 60510

ILLINOIS Environmental Protection Agency
2010 Hazardous Waste Report
Form GM - Generation and Management

Instructions for this form found on pages 16-21. (Same UOM and density must be used for all quantities on this page).

SECTION 1. WASTE DESCRIPTION

A. Waste Description: Mixed Waste Lead Containing Accelerator Components
B. EPA Hazardous Waste Code D 0 0 8
C. Source Code: G 1 5 When Source Code is G25, enter Management Method producing residuals: H
D. Form code: W 3 1 9 E. Waste Minimization Code N

SECTION 2. QUANTITY GENERATED [DENSITY MUST BE ENTERED FOR ALL WASTE STREAMS!]

All generation that counts towards your generation totals must be included on a Form GM, regardless of where or how managed.

A. UOM: 3 Density 5 . 0 0 lb/gal (Density of water is 08.34, most wastes are between 6 and 15)
B. Quantity generated in current reporting year: 0 . 0

SECTION 3. QUANTITY MANAGED ON-SITE: Did this location manage some or all of this waste in RCRA or UIC regulated treatment, recycling, or disposal units at this location? DO NOT include RCRA exempt processes.

Y Y = Yes (continue to system 1) N = No (skip to section 4.)

On-Site System 1: Management Method H 1 4 3 Quantity managed on-site this year: 4 0 4 . 0
On-Site System 2: Management Method H Quantity managed on-site this year: .

SECTION 4. OFF-SITE SHIPMENT - Refer to page 29 for common errors on facilities & management methods.

A. Was any of this waste shipped off site this reporting year? Y Y = Yes (Continue to Site 1) N = No

SITE 1. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: U T D 9 8 2 5 9 8 8 9 8
C. Management method shipped to: H 1 3 2
D. Total quantity shipped in this reporting year: 4 0 4 . 0

SITE 2. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____
C. Management method shipped to: H
D. Total quantity shipped in this reporting year: _____

SITE 3. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____
C. Management method shipped to: H
D. Total quantity shipped in this reporting year: _____

SITE 4. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____
C. Management method shipped to: H
D. Total quantity shipped in this reporting year: _____

SITE 5. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____
C. Management method shipped to: H
D. Total quantity shipped in this reporting year: _____

COMMENTS: Y Enter Y (Yes) if you have comments regarding this page and attach extra sheet.

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COMMENTS:

Section 1, D.

Waste Form Code: W319 - Includes a mixture of radioactive lead, plastic, fiberglass, tin, brass, stainless steel and copper contained in accelerator components.

US EPA Number: 1 1 6 8 9 0 0 3 0 0 4 6
IEPA Number: 0 8 9 0 1 0 5 0 1 0
Company name: Fermilab
Address: Wilson Rd. P.O. Box 500 Batavia, IL 60510

ILLINOIS Environmental Protection Agency
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Form GM - Generation and Management

Instructions for this form found on pages 16-21. (Same UOM and density must be used for all quantities on this page).

SECTION 1. WASTE DESCRIPTION

A. Waste Description: Mixed Waste Lead Cladded Proton Beam Tube
B. EPA Hazardous Waste Code D 0 0 8
C. Source Code: G 1 5 When Source Code is G25, enter Management Method producing residuals: H
D. Form code: W 3 1 9 E. Waste Minimization Code N

SECTION 2. QUANTITY GENERATED [DENSITY MUST BE ENTERED FOR ALL WASTE STREAMS!]

All generation that counts towards your generation totals must be included on a Form GM, regardless of where or how managed.

A. UOM: 3 Density 1 2 . 7 0 lb/gal (Density of water is 08.34, most wastes are between 6 and 15)

B. Quantity generated in current reporting year: 0 . 0

SECTION 3. QUANTITY MANAGED ON-SITE: Did this location manage some or all of this waste in RCRA or UIC regulated treatment, recycling, or disposal units at this location? DO NOT include RCRA exempt processes.

Y Y = Yes (continue to system 1) N = No (skip to section 4.)

On-Site System 1: Management Method H 1 4 3 Quantity managed on-site this year: 1 2 7 . 0

On-Site System 2: Management Method H Quantity managed on-site this year: .

SECTION 4. OFF- SITE SHIPMENT - Refer to page 29 for common errors on facilities & management methods.

A. Was any of this waste shipped off site this reporting year? Y Y = Yes (Continue to Site 1) N = No

SITE 1. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: U T D 9 8 2 5 9 8 8 9 8

C. Management method shipped to: H 1 3 2

D. Total quantity shipped in this reporting year: 1 2 7 . 0

SITE 2. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____

C. Management method shipped to: H

D. Total quantity shipped in this reporting year: _____

SITE 3. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____

C. Management method shipped to: H

D. Total quantity shipped in this reporting year: _____

SITE 4. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____

C. Management method shipped to: H

D. Total quantity shipped in this reporting year: _____

SITE 5. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____

C. Management method shipped to: H

D. Total quantity shipped in this reporting year: _____

COMMENTS: Y Enter Y (Yes) if you have comments regarding this page and attach extra sheet.

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COMMENTS:

Section 1, D.

Waste Form Code: W319 – Radioactive lead clad stainless steel proton beam tube.

US EPA Number: 116890030046
IEPA Number: 0890105010
Company name: Fernilab
Address: Wilson Rd. P.O. Box 500 Batavia, IL 60510

ILLINOIS Environmental Protection Agency
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Form GM - Generation and Management

Instructions for this form found on pages 16-21. (Same UOM and density must be used for all quantities on this page).

SECTION 1. WASTE DESCRIPTION

A. Waste Description: Mixed Waste Lead Contaminated Debris
B. EPA Hazardous Waste Code D 0 0 8
C. Source Code: G 1 9 When Source Code is G25, enter Management Method producing residuals: H
D. Form code: W 0 0 2 E. Waste Minimization Code N

SECTION 2. QUANTITY GENERATED [DENSITY MUST BE ENTERED FOR ALL WASTE STREAMS!]

All generation that counts towards your generation totals must be included on a Form GM, regardless of where or how managed.

A. UOM: 3 Density 3.00 lb/gal {Density of water is 08.34, most wastes are between 6 and 15}
B. Quantity generated in current reporting year: 0.0

SECTION 3. QUANTITY MANAGED ON-SITE: Did this location manage some or all of this waste in RCRA or UIC regulated treatment, recycling, or disposal units at this location? DO NOT include RCRA exempt processes.

Y Y = Yes (continue to system 1) N = No (skip to section 4.)

On-Site System 1: Management Method H 1 4 3 Quantity managed on-site this year: 9 0 . 0
On-Site System 2: Management Method H Quantity managed on-site this year: .

SECTION 4. OFF- SITE SHIPMENT - Refer to page 29 for common errors on facilities & management methods.

A. Was any of this waste shipped off site this reporting year? Y Y = Yes (Continue to Site 1) N = No

SITE 1. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: U T D 9 8 2 5 9 8 8 9 8
C. Management method shipped to: H 1 3 2
D. Total quantity shipped in this reporting year: 9 0 . 0

SITE 2. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____
C. Management method shipped to: H
D. Total quantity shipped in this reporting year: .

SITE 3. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____
C. Management method shipped to: H
D. Total quantity shipped in this reporting year: .

SITE 4. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____
C. Management method shipped to: H
D. Total quantity shipped in this reporting year: .

SITE 5. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____
C. Management method shipped to: H
D. Total quantity shipped in this reporting year: .

COMMENTS: Y Enter Y (Yes) if you have comments regarding this page and attach extra sheet.

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COMMENTS:

Section 1, C.

Source Code: G19 - Removal of lead contamination from walls and ceiling.

US EPA Number: 1 1 6 8 9 0 0 3 0 0 4 6
IEPA Number: 0 8 9 0 1 0 5 0 1 0
Company name: Fermilab
Address: Wilson Rd. P.O. Box 500 Batavia, IL 60510

ILLINOIS Environmental Protection Agency
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Form GM - Generation and Management

Instructions for this form found on pages 16-21. (Same UOM and density must be used for all quantities on this page).

SECTION 1. WASTE DESCRIPTION

A. Waste Description: Mixed Waste Lead Seals
B. EPA Hazardous Waste Code D 0 0 8
C. Source Code: G 1 5 When Source Code is G25, enter Management Method producing residuals: H
D. Form code: W 3 1 9 E. Waste Minimization Code N

SECTION 2. QUANTITY GENERATED [DENSITY MUST BE ENTERED FOR ALL WASTE STREAMS!]

All generation that counts towards your generation totals must be included on a Form GM, regardless of where or how managed.

A. UOM: 3 Density 3.00 lb/gal (Density of water is 08.34, most wastes are between 6 and 15)
B. Quantity generated in current reporting year: 4 5 . 0

SECTION 3. QUANTITY MANAGED ON-SITE: Did this location manage some or all of this waste in RCRA or UIC regulated treatment, recycling, or disposal units at this location? DO NOT include RCRA exempt processes.

Y Y = Yes (continue to system 1) N = No (skip to section 4.)

On-Site System 1: Management Method H 1 4 2 Quantity managed on-site this year: 4 5 . 0
On-Site System 2: Management Method H Quantity managed on-site this year: .

SECTION 4. OFF-SITE SHIPMENT - Refer to page 29 for common errors on facilities & management methods.

A. Was any of this waste shipped off site this reporting year? Y Y = Yes (Continue to Site 1) N = No

SITE 1. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: U T D 9 8 2 5 9 8 8 9 8
C. Management method shipped to: H 1 3 2
D. Total quantity shipped in this reporting year: 4 5 . 0

SITE 2. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____
C. Management method shipped to: H
D. Total quantity shipped in this reporting year: _____

SITE 3. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____
C. Management method shipped to: H
D. Total quantity shipped in this reporting year: _____

SITE 4. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____
C. Management method shipped to: H
D. Total quantity shipped in this reporting year: _____

SITE 5. Name and address of off-site facility:

B. U.S. EPA ID No. of facility waste was shipped to: _____
C. Management method shipped to: H
D. Total quantity shipped in this reporting year: _____

COMMENTS: Y Enter Y (Yes) if you have comments regarding this page and attach extra sheet.

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COMMENTS:

Section 1, D.

Waste Form Code: W319 - Vacuum rings containing lead and stainless steel

US EPA Number: IL 6 8 9 0 0 3 0 0 4 6
IEPA Number: 0 8 9 0 1 0 5 0 1 0
Company name: Fermilab
Address: Wilson Rd. P.O. Box 500 Batavia, IL 60510

**ILLINOIS Environmental Protection Agency
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Form TI – Transporter Identification**

Instructions for this form found on page 21. **PLEASE NOTE** that the four-digit hauling permit number is no longer valid for hazardous waste transporters, the transporter must have a Uniform Program Permit Number, with the last two fields the postal code of the state that issued the permit.

1. U.S. EPA ID No. M A D 0 3 9 3 2 2 2 5 0 Hauling Permit No. U P W - 0 1 8 0 7 4 3 - O H
_{31 127}
Transporter Name, Address, and Telephone Number: Clean Harbors Environmental Services
1501 Washington St. Braintree, MA 02185 781-849-1800

2. U.S. EPA ID No. M O D 0 9 5 0 3 8 9 9 8 Hauling Permit No. U P W - 0 0 6 4 1 5 8 - O H
_{43 139}
Transporter Name, Address, and Telephone Number: Tri-State Motor Transite Inc.
8141 E 7th. St. Joplin, MO 417-624-3131

3. U.S. EPA ID No. T X R 0 0 0 0 5 0 9 3 0 Hauling Permit No. U P W - 0 1 5 1 2 8 8 - I L
_{55 151}
Transporter Name, Address, and Telephone Number: Safety Kleen Systems Inc.
5400 Legacy Dr. Plano, TX 75024 972-265-2000

4. U.S. EPA ID No. _____ Hauling Permit No. U P - _____ - _____
_{67 163}
Transporter Name, Address, and Telephone Number:

5. U.S. EPA ID No. _____ Hauling Permit No. U P - _____ - _____
_{79 175}
Transporter Name, Address, and Telephone Number:

6. U.S. EPA ID No. _____ Hauling Permit No. U P - _____ - _____
_{91 187}
Transporter Name, Address, and Telephone Number:

7. U.S. EPA ID No. _____ Hauling Permit No. U P - _____ - _____
_{103 199}
Transporter Name, Address, and Telephone Number:

8. U.S. EPA ID No. _____ Hauling Permit No. U P - _____ - _____
_{115 211}
Transporter Name, Address, and Telephone Number:

COMMENTS: N Enter Y(Yes) if you have comments regarding this page; attach extra sheet. Page _____ 01
_{223 13}