

# **1995 Toxic Chemical Release Inventory**

**Emergency Planning and Community  
Right-to-Know Act of 1986 Section 313**

Date Published  
August 1996



**United States  
Department of Energy**

P.O. Box 550  
Richland, Washington 99352

Approved for Public Release

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6

7/29/96

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1995 Toxic Chemical Release Inventory	Hanford Environmental Management Program

F. New or novel (patentable) subject matter? If "Yes", has disclosure been submitted by WHC? <input type="checkbox"/> No or Yes If "Yes", Disclosure No(s):	<input checked="" type="checkbox"/> No or Yes	G. Information received from others in confidence, such as proprietary data, and/or inventions? <input checked="" type="checkbox"/> No or Yes If "Yes", contact WHC General Counsel.
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## 5. REVIEWS

Reviewers	Yes	Signature indicates Approval as Requested unless otherwise indicated Name (print)	Signature/Date	Limited-Use Info.
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DOE-RL	<input checked="" type="checkbox"/>	<i>Walter Darnell</i>	7/24/96	<input type="checkbox"/>
Communications	<input type="checkbox"/>			<input type="checkbox"/>
Applied Technology-Export Controlled	<input type="checkbox"/>			<input type="checkbox"/>
Other	<input type="checkbox"/>			<input type="checkbox"/>
Other	<input type="checkbox"/>			<input type="checkbox"/>

6. Applied Technology Material Referenced	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	INFORMATION RELEASE ADMINISTRATION APPROVAL
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7. Release Level	<input checked="" type="checkbox"/> Public <input type="checkbox"/> Limited Distribution	IRA Approval is required before release. Release is contingent upon resolution of mandatory comments. NOTE: This block for IRA use only.
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8. Author/Requestor		
D. E. Zaloudek <i>Diane Zaloudek</i> 7-23-96 (Print and Sign) Date		
9. Responsible Manager		
S. M. Price <i>SM Price</i> 7-24-96 (Print and Sign) Date	Date Cancelled	Date Disapproved

10. LEGENDS/NOTICES/MARKINGS (Required by WHC-CM-3-4 or Reviewer). Reviewer indicates applicable markings to be affixed or removed.			
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Applied Technology	<input type="checkbox"/>	<input type="checkbox"/>	_____
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Availability - ESTSC	<input type="checkbox"/>	<input type="checkbox"/>	_____
Availability - NTIS	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>1D</u>
Business-Sensitive Information	<input type="checkbox"/>	<input type="checkbox"/>	_____
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Other: _____	<input type="checkbox"/>	<input type="checkbox"/>	_____

[illegible]

12. ADDITIONAL INFORMATION/COMMENTS:

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Introduction

Memorandum: Delegation of Signature Authority  
for the Toxic Chemical Release Inventory

Toxic Chemical Release Inventory Reporting Form R for Ethylene Glycol

## INTRODUCTION

Section 313 of the Emergency Planning and Community Right-To-Know Act of 1986 (EPCRA) requires the annual submittal of toxic chemical release information to the U.S. Environmental Protection Agency. Executive Order 12856, *Federal Compliance With Right-to-Know Laws and Pollution Prevention Requirements*, extends the requirements of EPCRA to all Federal agencies. The following document is the August 1996 submittal of the Hanford Site Toxic Chemical Release Inventory report. Included is a Form R for ethylene glycol, the sole chemical used in excess of the established regulatory thresholds at the Hanford Site by the U.S. Department of Energy, Richland Operations Office and its contractors during Calendar Year 1995.

# memorandum

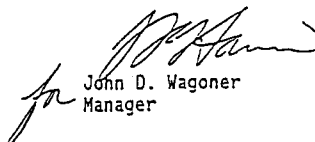
Richland Field Office

DATE: DEC 17 1992  
REPLY TO:  
ATTN OF: EAP:EBD 93-RPA-072  
SUBJECT: DELEGATION OF SIGNATURE AUTHORITY FOR THE TOXIC CHEMICAL RELEASE INVENTORY  
(SARA 313 TRI REPORT)

TO: James D. Bauer, Acting Program Manager  
Office of Environmental Assurance,  
Permits, and Policy

I hereby delegate signature authority for the Toxic Chemical Release Inventory (SARA 313 TRI Report) to the Program Manager, Office of Environmental Assurance, Permits, and Policy.

Pursuant to 40 CFR Section 372.85, Toxic Chemical Reporting Form and Instructions, part (b)(2), signature authority may be delegated by the manager to a senior management official. This memorandum constitutes formal delegation of such authority to the Program Manager, Office of Environmental Assurance, Permits, and Policy.

  
John D. Wagoner  
Manager

**EPA**United States  
Environmental Protection  
Agency**FORM R**TOXIC CHEMICAL RELEASE  
INVENTORY REPORTING FORMSection 313 of the Emergency Planning and Community Right-to-Know Act of 1986,  
also known as Title III of the Superfund Amendments and Reauthorization Act

TRI FACILITY ID NUMBER

99352SDPRTPOB0X

Toxic Chemical, Category, or Generic Name

ETHYLENE GLYCOL

**WHERE TO SEND  
COMPLETED FORMS:**1. EPCRA Reporting Center  
P.O. BOX 3348  
Merrifield, VA 22116-3348  
ATTN: TOXIC CHEMICAL RELEASE INVENTORY2. APPROPRIATE STATE OFFICE  
(See Instructions in Appendix F)Enter "X" here if  
this is a revision

For EPA use only

**IMPORTANT:** See instructions to determine when "Not  
Applicable (NA)" boxes should be checked.**PART I. FACILITY IDENTIFICATION INFORMATION****SECTION 1.  
REPORTING  
YEAR**

1995

**SECTION 2. TRADE SECRET INFORMATION**

2.1

Are you claiming the toxic chemical identified on page 3 trade secret?

☐ Yes (Answer question 2.2;  
Attach substantiation forms) ☒ No (Do not answer 2.2;  
Go to Section 3)

2.2

If yes in 2.1, is this copy: ☐ Sanitized ☐ Unsanitized**SECTION 3. CERTIFICATION (Important: Read and sign after completing all form sections.)**I hereby certify that I have reviewed the attached documents and that, to the best of my knowledge  
and belief, the submitted information is true and complete and that the amounts and values in this  
report are accurate based on reasonable estimates using data available to the preparers of this  
report.

Name and official title of owner/operator or senior management official

JAMES E. RASMUSSEN, DIRECTOR, ENVIRONMENTAL ASSURANCE, PERMITS, &amp; POLICY DIVISION

Signature

Date Signed

8/1/96

**SECTION 4. FACILITY IDENTIFICATION**

Facility or Establishment Name

U.S. DOE HANFORD SITE

TRI Facility ID Number

99352SDPRTPOB0X

Street Address

825 JADWIN AVENUE

City

RICHLAND

County

BENTON

State

WA

Zip Code

99352-3562

Mailing Address (if different from street address)

POST OFFICE BOX 550

City

RICHLAND

State

WA

Zip Code

99352-0550

**PUT LABEL HERE**





# EPA FORM R

## PART I. FACILITY IDENTIFICATION INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
99352SDPRTPOBOX
Toxic Chemical, Category, or Generic Name
ETHYLENE GLYCOL

### SECTION 4. FACILITY IDENTIFICATION (Continued)

<b>4.2</b>	<b>This report contains information for:</b> (Important: check a or b; check c if applicable)         a. <input checked="" type="checkbox"/> An entire facility    b. <input type="checkbox"/> Part of a facility    c. <input checked="" type="checkbox"/> A Federal Facility																							
<b>4.3</b>	<b>Technical Contact</b>	Name	ALEX E. TEIMOURI			Telephone Number (include area code)	(509) 376-6222																	
<b>4.4</b>	<b>Public Contact</b>	Name	KAREN K. RANDOLPH			Telephone Number (include area code)	(509) 376-8230																	
<b>4.5</b>	<b>SIC Code (4-digit)</b>	a. 9999	b. 9511	c. 4953	d. NA	e.	f.																	
<b>4.6</b>	<b>Latitude and Longitude</b>	<table style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="3" style="text-align: center; border-bottom: 1px solid black;">Latitude</th> <th colspan="3" style="text-align: center; border-bottom: 1px solid black;">Longitude</th> </tr> <tr> <th style="text-align: center; border-bottom: 1px solid black;">Degrees</th> <th style="text-align: center; border-bottom: 1px solid black;">Minutes</th> <th style="text-align: center; border-bottom: 1px solid black;">Seconds</th> <th style="text-align: center; border-bottom: 1px solid black;">Degrees</th> <th style="text-align: center; border-bottom: 1px solid black;">Minutes</th> <th style="text-align: center; border-bottom: 1px solid black;">Seconds</th> </tr> <tr> <td style="text-align: center;">046</td> <td style="text-align: center;">30</td> <td style="text-align: center;">00</td> <td style="text-align: center;">119</td> <td style="text-align: center;">30</td> <td style="text-align: center;">00</td> </tr> </table>			Latitude			Longitude			Degrees	Minutes	Seconds	Degrees	Minutes	Seconds	046	30	00	119	30	00		
Latitude			Longitude																					
Degrees	Minutes	Seconds	Degrees	Minutes	Seconds																			
046	30	00	119	30	00																			
<b>4.7</b>	<b>Dun &amp; Bradstreet Number(s) (9 digits)</b>					a. 034456186																		
						b. NA																		
<b>4.8</b>	<b>EPA Identification Number(s) (RCRA I.D.No.) (12 characters)</b>					a. WA7890008967																		
						b. NA																		
<b>4.9</b>	<b>Facility NPDES Permit Number(s) (9 characters)</b>					a. WA0003743																		
						b. WA0025917																		
<b>4.10</b>	<b>Underground Injection Well Code (UIC) I.D. Number(s) (12 digits)</b>					a. NA																		
						b.																		

### SECTION 5. PARENT COMPANY INFORMATION

<b>5.1</b>	Name of Parent Company	<input type="checkbox"/> NA      U.S. DEPARTMENT OF ENERGY
<b>5.2</b>	Parent Company's Dun & Bradstreet Number	<input checked="" type="checkbox"/> NA      (9 digits)      NA



# EPA FORM R

## PART II. CHEMICAL-SPECIFIC INFORMATION

TRI FACILITY ID NUMBER

99352SDPRTPOBOX

Toxic Chemical, Category, or Generic Name

ETHYLENE GLYCOL

### SECTION 1. TOXIC CHEMICAL IDENTITY (Important: DO NOT complete this section if you complete Section 2 below.)

<b>1.1</b>	CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.) <b>000107-21-1</b>
<b>1.2</b>	Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.) <b>ETHYLENE GLYCOL</b>
<b>1.3</b>	Generic Chemical Name (Important: Complete only if Part I, Section 2.1 is checked "yes." Generic Name must be structurally descriptive.) <b>NA</b>

### SECTION 2. MIXTURE COMPONENT IDENTITY (Important: DO NOT complete this section if you complete Section 1 above.)

<b>2.1</b>	Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, letters, spaces, and punctuation.) <b>NA</b>
------------	---

### SECTION 3. ACTIVITIES AND USES OF THE TOXIC CHEMICAL AT THE FACILITY (Important: Check all that apply.)

<b>3.1</b>	<b>Manufacture the toxic chemical:</b>	<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;">           a. <input type="checkbox"/> Produce            b. <input type="checkbox"/> Import         </div> <div style="width: 45%;"> <u>If produce or import:</u>            c. <input type="checkbox"/> For on-site use/processing            d. <input type="checkbox"/> For sale/distribution            e. <input type="checkbox"/> As a byproduct            f. <input type="checkbox"/> As an impurity         </div> </div>
<b>3.2</b>	<b>Process the toxic chemical:</b>	<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;">           a. <input type="checkbox"/> As a reactant            b. <input type="checkbox"/> As a formulation component         </div> <div style="width: 45%;">           c. <input type="checkbox"/> As an article component            d. <input type="checkbox"/> Repackaging         </div> </div>
<b>3.3</b>	<b>Otherwise use the toxic chemical:</b>	<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;">           a. <input type="checkbox"/> As a chemical processing aid            b. <input checked="" type="checkbox"/> As a manufacturing aid         </div> <div style="width: 45%;">           c. <input checked="" type="checkbox"/> Ancillary or other use         </div> </div>

### SECTION 4. MAXIMUM AMOUNT OF THE TOXIC CHEMICAL ON-SITE AT ANY TIME DURING THE CALENDAR YEAR

<b>4.1</b>	<div style="border: 1px solid black; display: inline-block; padding: 2px 10px;">05</div>	(Enter two-digit code from instruction package.)
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# EPA FORM R

## PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER

99352SDPRTPOBOX

Toxic Chemical, Category, or Generic Name

ETHYLENE GLYCOL

### SECTION 5. RELEASES OF THE TOXIC CHEMICAL TO THE ENVIRONMENT ON-SITE

			A. Total Release (lbs/year) (enter range code from instructions or estimate)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.1	Fugitive or non-point air emissions	<input type="checkbox"/> NA	1	0	
5.2	Stack or point air emissions	<input type="checkbox"/> NA	0	0	
5.3	Discharges to receiving streams or water bodies (enter one name per box)				
5.3.1 Stream or Water Body Name					
COLUMBIA RIVER			0	0	NA . %
5.3.2 Stream or Water Body Name					
NA					. %
5.3.3 Stream or Water Body Name					
					. %
5.4	Underground injections on-site	<input type="checkbox"/> NA	0	0	
5.5	Releases to land on-site				
5.5.1	Landfill	<input type="checkbox"/> NA	0	0	
5.5.2	Land treatment/ application farming	<input checked="" type="checkbox"/> NA	NA		
5.5.3	Surface impoundment	<input type="checkbox"/> NA	0	c	
5.5.4	Other disposal	<input type="checkbox"/> NA	0	0	



Check here only if additional Section 5.3 information is provided on page 5 of this form.



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# EPA FORM R

## PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER

99352SDPRTPOBOX

Toxic Chemical, Category, or Generic Name

ETHYLENE GLYCOL

### SECTION 5.3 ADDITIONAL INFORMATION ON RELEASES OF THE TOXIC CHEMICAL TO THE ENVIRONMENT ON-SITE

5.3	Discharges to receiving streams or water bodies (enter one name per box)	A. Total Release (pounds/year)(enter range code from instructions or estimate)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.3.4	Stream or Water Body Name			. %
5.3.5	Stream or Water Body Name			. %
5.3.6	Stream or Water Body Name			. %

### SECTION 6. TRANSFERS OF THE TOXIC CHEMICAL IN WASTES TO OFF-SITE LOCATIONS

#### 6.1 DISCHARGES TO PUBLICLY OWNED TREATMENT WORKS (POTW)

##### 6.1.A Total Quantity Transferred to POTWs and Basis of Estimate

6.1.A.1 Total Transfers (pounds/year)  
(enter range code or estimate)

NA

6.1.A.2 Basis of Estimate  
(enter code)

##### 6.1.B POTW Name and Location Information

6.1.B.01 POTW Name

6.1.B.02 POTW Name

Street Address

Street Address

City

County

City

County

State

Zip Code

State

Zip Code

If additional pages of Part II, Sections 5.3 and/or 6.1 are attached, indicate the total number of pages in this box  and indicate which Part II, Sections 5.3/6.1 page this is, here.  (example: 1, 2, 3, etc.)



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# EPA FORM R

## PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER

99352SDPRTP0BOX

Toxic Chemical, Category, or Generic Name

ETHYLENE GLYCOL

### SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

<b>6.2.01</b>	Off-site EPA Identification Number (RCRA ID No.)		NA
Off-Site Location Name			
RICHLAND SCHOOL DISTRICT			
Street Address			
615 SNOW AVENUE			
City		County	
RICHLAND		BENTON	
State	Zip Code	Is location under control of reporting facility or parent company?	
WA	99352	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>A. Total Transfers (pounds/year)</b> (enter range code or estimate)	<b>B. Basis of Estimate</b> (enter code)	<b>C. Type of Waste Treatment/Disposal/</b> <b>Recycling/Energy Recovery (enter code)</b>	
1. 500	1. 0	1. M26	
2. NA	2.	2.	
3.	3.	3.	
4.	4.	4.	

### SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

<b>6.2.02</b>	Off-site EPA Identification Number (RCRA ID No.)		NA
Off-Site Location Name			
K KASER, INCORPORATED			
Street Address			
229 NORTH FRUITLAND STREET			
City		County	
KENNEWICK		BENTON	
State	Zip Code	Is location under control of reporting facility or parent company?	
WA	99336	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>A. Total Transfers (pounds/year)</b> (enter range code or estimate)	<b>B. Basis of Estimate</b> (enter code)	<b>C. Type of Waste Treatment/Disposal/</b> <b>Recycling/Energy Recovery (enter code)</b>	
1. 9250	1. 0	1. M26	
2. NA	2.	2.	
3.	3.	3.	
4.	4.	4.	

If additional pages of Part II, Section 6.2 are attached, indicate the total number of pages in this box **03** and indicate which Part II, Section 6.2 page this is, here. **1** (example: 1, 2, 3, etc.)



# EPA FORM R

## PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER

99352SDPRTPOBOX

Toxic Chemical, Category, or Generic Name

ETHYLENE GLYCOL

### SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2.03

Off-site EPA Identification Number (RCRA ID No.)

WAD092300250

Off-Site Location Name

BURLINGTON ENVIRONMENTAL

Street Address

625 SOUTH 32ND STREET

City

WASHOUGAL

County

CLARK

State

WA

Zip Code

98671

Is location under control of reporting facility or parent company?

☐ Yes☒ NoA. Total Transfers (pounds/year)  
(enter range code or estimate)B. Basis of Estimate  
(enter code)C. Type of Waste Treatment/Disposal/  
Recycling/Energy Recovery (enter code)

1. 113

1. 0

1. M20

2. 330

2. 0

2. M99

3. NA

3.

3.

4.

4.

4.

### SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2.04

Off-site EPA Identification Number (RCRA ID No.)

WAR000001743

Off-Site Location Name

BURLINGTON ENVIRONMENTAL, INCORPORATED

Street Address

1729 ALEXANDER AVENUE

City

TACOMA

County

PIERCE

State

WA

Zip Code

98401

Is location under control of reporting facility or parent company?

☐ Yes☒ NoA. Total Transfers (pounds/year)  
(enter range code or estimate)B. Basis of Estimate  
(enter code)C. Type of Waste Treatment/Disposal/  
Recycling/Energy Recovery (enter code)

1. 1066

1. 0

1. M99

2. NA

2.

2.

3.

3.

3.

4.

4.

4.

If additional pages of Part II, Section 6.2 are attached, indicate the total number of pages in this box **03** and indicate which Part II, Section 6.2 page this is, here, **2** (example: 1, 2, 3, etc.)



# EPA FORM R

## PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER

99352SDPRTPOBOX

Toxic Chemical, Category, or Generic Name

ETHYLENE GLYCOL

### SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2.05

Off-site EPA Identification Number (RCRA ID No.)

WAD058367152

Off-Site Location Name

NORTHWEST ENVIROSERVICES, INCORPORATED

Street Address

1500 AIRPORT WAY SOUTH

City

SEATTLE

County

KING

State

WA

Zip Code

98134

Is location under control of reporting facility or parent company?

☐ Yes☒ NoA. Total Transfers (pounds/year)  
(enter range code or estimate)B. Basis of Estimate  
(enter code)C. Type of Waste Treatment/Disposal/  
Recycling/Energy Recovery (enter code)

1. 2

1. 0

1. M99

2. NA

2.

2.

3.

3.

3.

4.

4.

4.

### SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2.06

Off-site EPA Identification Number (RCRA ID No.)

WAD000812909

Off-Site Location Name

PHILIP ENVIRONMENTAL-GEORGETOWN

Street Address

734 SOUTH LUCILLE STREET

City

SEATTLE

County

KING

State

WA

Zip Code

98100

Is location under control of reporting facility or parent company?

☐ Yes☒ NoA. Total Transfers (pounds/year)  
(enter range code or estimate)B. Basis of Estimate  
(enter code)C. Type of Waste Treatment/Disposal/  
Recycling/Energy Recovery (enter code)

1. 60

1. 0

1. M26

2. 849

2. 0

2. M99

3. 168

3. 0

3. M95

4. NA

4.

4.

If additional pages of Part II, Section 6.2 are attached, indicate the total number of pages in this box **03** and indicate which Part II, Section 6.2 page this is, here, **5** (example: 1, 2, 3, etc.)



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Agency

# EPA FORM R

## PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER

99352SDPRTPOBOX

Toxic Chemical, Category, or Generic Name

ETHYLENE GLYCOL

### SECTION 7A. ON-SITE WASTE TREATMENT METHODS AND EFFICIENCY

☒ **Not Applicable (NA)** - Check here if **no** on-site waste treatment is applied to any waste stream containing the toxic chemical or chemical category.

a. General Waste Stream (enter code)	b. Treatment Method(s) Sequence (enter 3-character code(s))	c. Range of Influent Concentration	d. Waste Treatment Efficiency Estimate	e. Based on Operating Data?	
7A.01a	7A.01b	1 <input type="text"/> 2 <input type="text"/>	7A.01c	7A.01d	7A.01e
NA	3 <input type="text"/> 4 <input type="text"/> 5 <input type="text"/> 6 <input type="text"/> 7 <input type="text"/> 8 <input type="text"/>		0.00 %	Yes <input type="checkbox"/> No <input type="checkbox"/>	
7A.02a	7A.02b	1 <input type="text"/> 2 <input type="text"/>	7A.02c	7A.02d	7A.02e
	3 <input type="text"/> 4 <input type="text"/> 5 <input type="text"/> 6 <input type="text"/> 7 <input type="text"/> 8 <input type="text"/>		0.00 %	Yes <input type="checkbox"/> No <input type="checkbox"/>	
7A.03a	7A.03b	1 <input type="text"/> 2 <input type="text"/>	7A.03c	7A.03d	7A.03e
	3 <input type="text"/> 4 <input type="text"/> 5 <input type="text"/> 6 <input type="text"/> 7 <input type="text"/> 8 <input type="text"/>		0.00 %	Yes <input type="checkbox"/> No <input type="checkbox"/>	
7A.04a	7A.04b	1 <input type="text"/> 2 <input type="text"/>	7A.04c	7A.04d	7A.04e
	3 <input type="text"/> 4 <input type="text"/> 5 <input type="text"/> 6 <input type="text"/> 7 <input type="text"/> 8 <input type="text"/>		0.00 %	Yes <input type="checkbox"/> No <input type="checkbox"/>	
7A.05a	7A.05b	1 <input type="text"/> 2 <input type="text"/>	7A.05c	7A.05d	7A.05e
	3 <input type="text"/> 4 <input type="text"/> 5 <input type="text"/> 6 <input type="text"/> 7 <input type="text"/> 8 <input type="text"/>		0.00 %	Yes <input type="checkbox"/> No <input type="checkbox"/>	

If additional copies of page 7 are attached, indicate the total number of pages in this box  and indicate which page 7 this is, here.  (example: 1, 2, 3, etc.)





# EPA FORM R

## PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER

99352SDPRTPOBOX

Toxic Chemical, Category, or Generic Name

ETHYLENE GLYCOL

### SECTION 7B. ON-SITE ENERGY RECOVERY PROCESSES

☒ **Not Applicable (NA)** - Check here if no on-site energy recovery is applied to any waste stream containing the toxic chemical or chemical category.

Energy Recovery Methods [enter 3-character code(s)]

1 2 3 4 

### SECTION 7C. ON-SITE RECYCLING PROCESSES

☐ **Not Applicable (NA)** - Check here if no on-site recycling is applied to any waste stream containing the toxic chemical or chemical category.

Recycling Methods [enter 3-character code(s)]

1 2 3 4 5 6 7 8 9 10



# EPA FORM R

## PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER

99352SDPRTP0BOX

Toxic Chemical, Category, or Generic Name

ETHYLENE GLYCOL

### SECTION 8. SOURCE REDUCTION AND RECYCLING ACTIVITIES

<i>All quantity estimates can be reported using up to two significant figures.</i>		Column A 1994 (pounds/year)	Column B 1995 (pounds/year)	Column C 1996 (pounds/year)	Column D 1997 (pounds/year)
8.1	Quantity released *	48000	2200	2000	2000
8.2	Quantity used for energy recovery on-site	NA	NA	NA	NA
8.3	Quantity used for energy recovery off-site	NA	NA	NA	NA
8.4	Quantity recycled on-site	10000	6900	12000	9000
8.5	Quantity recycled off-site	0	9900	9600	9400
8.6	Quantity treated on-site	NA	NA	NA	NA
8.7	Quantity treated off-site	0	170	200	200
8.8	Quantity released to the environment as a result of remedial actions, catastrophic events, or one-time events not associated with production processes (pounds/year)				0
8.9	Production ratio or activity index				1.00
8.10	Did your facility engage in any source reduction activities for this chemical during the reporting year? If not, enter "NA" in Section 8.10.1 and answer Section 8.11.				
	Source Reduction Activities [enter code(s)]	Methods to Identify Activity (enter codes)			
8.10.1	NA				
8.10.2					
8.10.3					
8.10.4					
8.11	Is additional optional information on source reduction, recycling, or pollution control activities included with this report? (Check one box)				<div style="display: flex; justify-content: space-around;"> <div>YES <input type="checkbox"/></div> <div>NO <input checked="" type="checkbox"/></div> </div>

\* Report releases pursuant to EPCRA Section 329(b) including "any spilling, leaking, pumping, pouring, emitting, emptying, discharging, injecting, escaping, leaching, dumping, or disposing into the environment." Do not include any quantity treated on-site or off-site.

**1995 Hanford Site Toxic  
Chemical Release Inventory**

**DOE/RL 96-56**

**July 1996**

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