

 EPA United States Environmental Protection Agency	FORM R Section 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
		48150LVNNG12200
		Toxic Chemical, Category or Generic Name Copper

WHERE TO SEND COMPLETED FORMS: 1. TRI Data Processing Center 2. APPROPRIATE STATE OFFICE
 P.O.Box 1513 (See instructions in Appendix F)
 Lanham, MD 20703-1513

This section only applies if you are revising or withdrawing a previously submitted form, otherwise leave blank.

Revision (enter up to two code(s))

Withdrawal (enter up to two code(s))

Important: See instructions to determine when "Not Applicable (NA)" boxes should be checked.

PART I. FACILITY IDENTIFICATION INFORMATION

SECTION 1. REPORTING YEAR 2007

SECTION 2. TRADE SECRET INFORMATION

2.1	Are you claiming the toxic chemical identified on page 2 trade secret?	2.2	Is this copy	☐ Sanitized	☐ Unsanitized
	☐ Yes (Answer question 2.2; Attach substantiation forms) ☒ NO (Do not answer 2.2; Go to Section 3)		(Answer only if "YES" in 2.1)		

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:	Signature	Date Signed:
DANIEL R DEEDS PLANT MANAGER		06/30/2008

SECTION 4. FACILITY IDENTIFICATION

4.1	TRI Facility ID Number	48150LVNNG12200
Facility or Establishment Name	Facility or Establishment Name or Mailing Address (if different from street address)	
GMPT LIVONIA ENGINE		
Street	Mailing Address	
12200 MIDDLEBELT RD	NA	
City/County/State/Zip Code	City/State/Zip Code	Country (Non-US)
LIVONIA WAYNE MI 48150		

4.2	This report contains information for:	a. ☒ An entire facility	b. ☐ Part of a facility	c. ☐ A Federal facility	d. ☐ GOCO
(Important: check a or b; check c or d if applicable)					

4.3	Technical Contact Name	MATT DOCHODA	Telephone Number (include area code)
	Email Address	MATTHEW.DOCHODA@GM.COM	(734) 523-8718

4.4	Public Contact Name	DAN FLORES	Telephone Number (include area code)
	Email Address	DANIEL.FLORES@GM.COM	(313) 665-4629

4.5	NAICS Code (s) (6 digits)	Primary	a. 336312	b.	c.	d.	e.	f.
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4.7	Dun & Bradstreet Number(s) (9 digits)	a. 123024010	b.
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SECTION 5. PARENT COMPANY INFORMATION

5.1	Name of Parent Company	NA ☐	GENERAL MOTORS
5.2	Parent Company's Dun & Bradstreet Number	NA ☐	005356613

EPA FORM R
PART II. CHEMICAL - SPECIFIC INFORMATION

Brad Saunders
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 Arcadis
 Jun 18, 2009 07:56

TRI Facility ID Number
 48150LVNNG12200
 Toxic Chemical, Category or Generic Name
 Copper

SECTION 1. TOXIC CHEMICAL IDENTITY

(Important: DO NOT complete this section if you completed Section 2 below.)

1.1	CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.) 7440-50-8
1.2	Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.) Copper
1.3	Generic Chemical Name (Important: Complete only if Part 1, Section 2.1 is checked "Yes". Generic Name must be structurally descriptive.) NA

Distribution of Each Member of the Dioxin and Dioxin-like Compounds Category.

(If there are any numbers in boxes 1-17, then every field must be filled in with either 0 or some number between 0.01 and 100. Distribution should be reported in percentages and the total should equal 100%. If you do not have speciation data available, indicate NA.)

1.4	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
NA																	

SECTION 2. MIXTURE COMPONENT IDENTITY

(Important: DO NOT complete this section if you completed Section 1 above.)

2.1	Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, letters, spaces, and punctuation.) NA
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SECTION 3. ACTIVITIES AND USES OF THE TOXIC CHEMICAL AT THE FACILITY

(Important: Check all that apply.)

3.1	Manufacture the toxic chemical:	3.2	Process the toxic chemical:	3.3	Otherwise use the toxic chemical:
a. ☐ Produce b. ☐ Import If produce or import: c. ☐ For on-site use/processing d. ☐ For sale/distribution e. ☐ As a byproduct f. ☐ As an impurity	a. ☐ As a reactant b. ☐ As a formulation component c. ☒ As an article component d. ☐ Repackaging e. ☐ As an impurity	a. ☐ As a chemical processing aid b. ☐ As a manufacturing aid c. ☒ Ancillary or other use			

SECTION 4. MAXIMUM AMOUNT OF THE TOXIC CHEMICAL ONSITE AT ANY TIME DURING THE CALENDAR YEAR

4.1	04 (Enter two-digit code from instruction package.)
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SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ONSITE

		A. Total Release (pounds/year*) (Enter range code or estimate**)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.1	Fugitive or non-point air emissions	NA ☒		
5.2	Stack or point air emissions	NA ☒		
5.3	Discharges to receiving streams or water bodies (enter one name per box)			
Stream or Water Body Name				
5.3.1	NA			
5.3.2				
5.3.3				

If additional pages of Part II, Section 5.3 are attached, indicate the total number of pages in this box and indicate the Part II, Section 5.3 page number in this box. (example: 1,2,3, etc.)

* For Dioxin or Dioxin-like compounds, report in grams/year

EPA FORM R

PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number

48150LVNNG12200

Toxic Chemical, Category, or Generic Name

Copper

SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ONSITE (Continued)

		NA	A. Total Release (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)
5.4.1	Underground Injection onsite to Class I Wells	☒		
5.4.2	Underground Injection onsite to Class II-V Wells	☒		
5.5	Disposal to land onsite			
5.5.1.A	RCRA Subtitle C landfills	☒		
5.5.1.B	Other landfills	☒		
5.5.2	Land treatment/application farming	☒		
5.5.3A	RCRA Subtitle C Surface Impoundments	☒		
5.5.3B	Other surface impoundments	☒		
5.5.4	Other disposal	☒		

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

6.1 DISCHARGES TO PUBLICLY OWNED TREATMENT WORKS (POTWs)

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)

1

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

M2

6.1.B. 1

POTW Name

DETROIT WASTEWATER TREATMENT

POTW Address

8300 JEFFERSON

City

DETROIT

State

MI

County

WAYNE

Zip

48209

6.1.B.

POTW Name

POTW Address

City

State

County

Zip

If additional pages of Part II, Section 6.1 are attached, indicate the total number of pages

in this box and indicate the Part II, Section 6.1 page number in this box (example: 1,2,3, etc.)

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2. 1 Off-Site EPA Identification Number (RCRA ID No.)

MID047189568

Off-Site Location Name

GENERAL OIL

Off-site Address

12680 BEECH DALY

City

REDFORD

State

MI

County

WAYNE

Zip

48239

Country
(Non-US)

Is location under control of reporting facility or parent company?

Yes

☒

No

Confidential under FOIA

* For Dioxin or Dioxin-like compounds, report in grams/year

EPA Form 9350-1 (Rev. 01/2008) - Previous editions are obsolete.

** Range Codes: A= 1- 10 pounds; B= 11- 499 pounds; C= 500 - 999 pounds.

Brad Saunders

Arcadis

Jun 18, 2009 07:56

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Jun 18, 2009 07:56

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PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number

48150LVNNG12200

Toxic Chemical, Category, or Generic Name

Copper

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS (Continued)

A. 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. 200	1. M2	1. M90
2. NA	2.	2.
3.	3.	3.
4.	4.	4.

6.2.2 Off-Site EPA Identification Number (RCRA ID No.) MID000724831

Off-Site location Name EQ Belleville

Off-site Address 49350 NORTH I94 SERVICE DRIVE

City	BELLEVILLE	State	MI	County	Wayne	Zip	48111	Country (Non-US)
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Is location under control of reporting facility or parent company?

☐ Yes☒ No

A. 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. 13	1. M2	1. M64
2. NA	2.	2.
3.	3.	3.
4.	4.	4.

SECTION 7A. ONSITE 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. Waste Treatment Method(s) Sequence [enter 3-character code(s)]	d. Waste Treatment Efficiency Estimate [enter 2 character code]												
7A.1a	<table border="1"> <tr> <td>1</td> <td>H124</td> <td>2</td> <td>H077</td> </tr> <tr> <td>3</td> <td>H123</td> <td>5</td> <td>H123</td> </tr> <tr> <td>6</td> <td>NA</td> <td>8</td> <td></td> </tr> </table>	1	H124	2	H077	3	H123	5	H123	6	NA	8		7A.1d E4
1	H124	2	H077											
3	H123	5	H123											
6	NA	8												
7A.2a	<table border="1"> <tr> <td>1</td> <td></td> <td>2</td> <td></td> </tr> <tr> <td>3</td> <td></td> <td>5</td> <td></td> </tr> <tr> <td>6</td> <td></td> <td>8</td> <td></td> </tr> </table>	1		2		3		5		6		8		7A.2d
1		2												
3		5												
6		8												
7A.3a	<table border="1"> <tr> <td>1</td> <td></td> <td>2</td> <td></td> </tr> <tr> <td>3</td> <td></td> <td>5</td> <td></td> </tr> <tr> <td>6</td> <td></td> <td>8</td> <td></td> </tr> </table>	1		2		3		5		6		8		7A.3d
1		2												
3		5												
6		8												
7A.4a	<table border="1"> <tr> <td>1</td> <td></td> <td>2</td> <td></td> </tr> <tr> <td>3</td> <td></td> <td>5</td> <td></td> </tr> <tr> <td>6</td> <td></td> <td>8</td> <td></td> </tr> </table>	1		2		3		5		6		8		7A.4d
1		2												
3		5												
6		8												
7A.5a	<table border="1"> <tr> <td>1</td> <td></td> <td>2</td> <td></td> </tr> <tr> <td>3</td> <td></td> <td>5</td> <td></td> </tr> <tr> <td>6</td> <td></td> <td>8</td> <td></td> </tr> </table>	1		2		3		5		6		8		7A.5d
1		2												
3		5												
6		8												

If additional pages of Part II, Section 6.2/7A are attached, indicate the total number of pages in this box

3

and indicate the Part II, Section 6.2/7A page number in this box: 1 (example: 1,2,3, etc.)

* For Dioxin or Dioxin-like compounds, report in grams/year

EPA Form 9350-1 (Rev. 01/2008) - Previous editions are obsolete. Confidential under FOIA Codes: A= 1- 10 pounds; B= 11- 499 pounds; C= 500 - 999 pounds.

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Jun 18, 2009 07:56

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PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number

48150LVNNG12200

Toxic Chemical, Category, or Generic Name

Copper

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS (Continued)

A. 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.	1.	1.
2.	2.	2.
3.	3.	3.
4.	4.	4.

6.2.3 Off-Site EPA Identification Number (RCRA ID No.) MID980991566

Off-Site location Name EQ Detroit

Off-site Address 1923 Frederick

City	Detroit	State	MI	County	Wayne	Zip	48211	Country (Non-US)	
------	---------	-------	----	--------	-------	-----	-------	---------------------	--

Is location under control of reporting facility or parent company?

☐ Yes☒ No

A. 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. 23000	1. M2	1. M64
2. NA	2.	2.
3.	3.	3.
4.	4.	4.

SECTION 7A. ONSITE 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. Waste Treatment Method(s) Sequence [enter 3-character code(s)]	d. Waste Treatment Efficiency Estimate [enter 2 character code]
7A.6a	7A.6b 1 2	7A.6d
	3 4 5	
	6 7 8	
7A.7a	7A.7b 1 2	7A.7d
	3 4 5	
	6 7 8	
7A.8a	7A.8b 1 2	7A.8d
	3 4 5	
	6 7 8	
7A.9a	7A.9b 1 2	7A.9d
	3 4 5	
	6 7 8	
7A.10a	7A.10b 1 2	7A.10d
	3 4 5	
	6 7 8	

If additional pages of Part II, Section 6.2/7A are attached, indicate the total number of pages in this box

3

and indicate the Part II, Section 6.2/7A page number in this box: 2 (example: 1,2,3, etc.)

* For Dioxin or Dioxin-like compounds, report in grams/year

EPA Form 9350-1 (Rev. 01/2008) - Previous editions are obsolete. Confidential under FOIA Codes: A= 1- 10 pounds; B= 11- 499 pounds; C= 500 - 999 pounds.

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PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number

48150LVNNG12200

Toxic Chemical, Category, or Generic Name

Copper

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS (Continued)

A. 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.	1.	1.
2.	2.	2.
3.	3.	3.
4.	4.	4.

6.2. 4 Off-Site EPA Identification Number (RCRA ID No.) MID000009175

Off-Site location Name Preferred Media

Off-site Address 13929 Brainbridge

City	Warren	State	MI	County	Wayne	Zip	48089	Country (Non-US)
------	--------	-------	----	--------	-------	-----	-------	---------------------

Is location under control of reporting facility or parent company?

☐ Yes☒ No

A. 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. 7900	1. M2	1. M24
2. NA	2.	2.
3.	3.	3.
4.	4.	4.

SECTION 7A. ONSITE 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. Waste Treatment Method(s) Sequence [enter 3-character code(s)]	d. Waste Treatment Efficiency Estimate [enter 2 character code]
7A.11a	7A.11b 1 2	7A.11d
	3 4 5	
	6 7 8	
7A.12a	7A.12b 1 2	7A.12d
	3 4 5	
	6 7 8	
7A.13a	7A.13b 1 2	7A.13d
	3 4 5	
	6 7 8	
7A.14a	7A.14b 1 2	7A.14d
	3 4 5	
	6 7 8	
7A.15a	7A.15b 1 2	7A.15d
	3 4 5	
	6 7 8	

If additional pages of Part II, Section 6.2/7A are attached, indicate the total number of pages in this box

3

and indicate the Part II, Section 6.2/7A page number in this box: 3 (example: 1,2,3, etc.)

* For Dioxin or Dioxin-like compounds, report in grams/year

EPA Form 9350-1 (Rev. 01/2008) - Previous editions are obsolete. Confidential under FOIA Codes: A= 1- 10 pounds; B= 11- 499 pounds; C= 500 - 999 pounds.

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PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

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Jun 18, 2009 07:56

TRI Facility ID Number

48150LVNNG12200

Toxic Chemical, Category, or Generic Name

Copper

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

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

SECTION 8. SOURCE REDUCTION AND RECYCLING ACTIVITIES

		Column A Prior Year (pounds/year*)	Column B Current Reporting Year (pounds/year*)	Column C Following Year (pounds/year*)	Column D Second Following Year (pounds/year*)
8.1					
8.1a	Total on-site disposal to Class I Underground Injection Wells, RCRA Subtitle C landfills, and other landfills	NA	NA	NA	NA
8.1b	Total other on-site disposal or other releases	NA	NA	NA	NA
8.1c	Total off-site disposal to Class I Underground Injection Wells, RCRA Subtitle C landfills, and other landfills	13000	23000	23000	23000
8.1d	Total other off-site disposal or other releases	100	200	200	200
8.2	Quantity used for energy recovery onsite	NA	NA	NA	NA
8.3	Quantity used for energy recovery offsite	NA	NA	NA	NA
8.4	Quantity recycled onsite	NA	NA	NA	NA
8.5	Quantity recycled offsite	2200	7900	7900	7900
8.6	Quantity treated onsite	NA	NA	NA	NA
8.7	Quantity treated offsite	NA	NA	NA	NA
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)				NA
8.9	Production ratio or activity index				0.97
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	a.	b.	c.	
8.10.2		a.	b.	c.	
8.10.3		a.	b.	c.	
8.10.4		a.	b.	c.	
8.11	If you wish to submit additional optional information on source reduction, recycling, or pollution control activities with this report, check "Yes."				Yes ☐

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Arcadis

Jun 18, 2009 07:56

TRI Facility ID Number
48150LVNNG12200
Toxic Chemical, Category, or Generic Name
Copper

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Arcadis

Jun 18, 2009 07:56

SECTION 8.11. Submit additional optional information on source reduction, recycling, or pollution control activities.

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Confidential under FOIA

Brad Saunders

Arcadis

Jun 18, 2009 07:56

 EPA United States Environmental Protection Agency	FORM R Section 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
		48150LVNNG12200
		Toxic Chemical, Category or Generic Name Lead

WHERE TO SEND COMPLETED FORMS: 1. TRI Data Processing Center 2. APPROPRIATE STATE OFFICE
 P.O.Box 1513 (See instructions in Appendix F)
 Lanham, MD 20703-1513

This section only applies if you are revising or withdrawing a previously submitted form, otherwise leave blank.

Revision (enter up to two code(s))

Withdrawal (enter up to two code(s))

Important: See instructions to determine when "Not Applicable (NA)" boxes should be checked.

PART I. FACILITY IDENTIFICATION INFORMATION

SECTION 1. REPORTING YEAR 2007

SECTION 2. TRADE SECRET INFORMATION

2.1	Are you claiming the toxic chemical identified on page 2 trade secret?	2.2	Is this copy	☐ Sanitized	☐ Unsanitized
	☐ Yes (Answer question 2.2; Attach substantiation forms) ☒ NO (Do not answer 2.2; Go to Section 3)		(Answer only if "YES" in 2.1)		

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:	Signature	Date Signed:
DANIEL R DEEDS PLANT MANAGER		06/30/2008

SECTION 4. FACILITY IDENTIFICATION

4.1	TRI Facility ID Number	48150LVNNG12200
Facility or Establishment Name	Facility or Establishment Name or Mailing Address (if different from street address)	
GMPT LIVONIA ENGINE		
Street	Mailing Address	
12200 MIDDLEBELT RD	NA	
City/County/State/Zip Code	City/State/Zip Code	Country (Non-US)
LIVONIA WAYNE MI 48150		

4.2	This report contains information for:	a. ☒ An entire facility	b. ☐ Part of a facility	c. ☐ A Federal facility	d. ☐ GOCO
(Important: check a or b; check c or d if applicable)					

4.3	Technical Contact Name	MATT DOCHODA	Telephone Number (include area code)
	Email Address	MATTHEW.DOCHODA@GM.COM	(734) 523-8718

4.4	Public Contact Name	DAN FLORES	Telephone Number (include area code)
	Email Address	DANIEL.FLORES@GM.COM	(313) 665-4629

4.5	NAICS Code (s) (6 digits)	Primary	a. 336312	b.	c.	d.	e.	f.
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4.7	Dun & Bradstreet Number(s) (9 digits)	a. 123024010	b.
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SECTION 5. PARENT COMPANY INFORMATION

5.1	Name of Parent Company	NA ☐	GENERAL MOTORS
5.2	Parent Company's Dun & Bradstreet Number	NA ☐	005356613

EPA FORM R
PART II. CHEMICAL - SPECIFIC INFORMATION

TRI Facility ID Number
48150LVNNG12200
Toxic Chemical, Category or Generic Name
Lead

SECTION 1. TOXIC CHEMICAL IDENTITY

(Important: DO NOT complete this section if you completed Section 2 below.)

1.1	CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.) 7439-92-1
1.2	Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.) Lead
1.3	Generic Chemical Name (Important: Complete only if Part 1, Section 2.1 is checked "Yes". Generic Name must be structurally descriptive.) NA

Distribution of Each Member of the Dioxin and Dioxin-like Compounds Category.

(If there are any numbers in boxes 1-17, then every field must be filled in with either 0 or some number between 0.01 and 100. Distribution should be reported in percentages and the total should equal 100%. If you do not have speciation data available, indicate NA.)

1.4	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
NA																	

SECTION 2. MIXTURE COMPONENT IDENTITY

(Important: DO NOT complete this section if you completed Section 1 above.)

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

SECTION 3. ACTIVITIES AND USES OF THE TOXIC CHEMICAL AT THE FACILITY

(Important: Check all that apply.)

3.1	Manufacture the toxic chemical:	3.2	Process the toxic chemical:	3.3	Otherwise use the toxic chemical:
a. ☐ Produce b. ☐ Import If produce or import: c. ☐ For on-site use/processing d. ☐ For sale/distribution e. ☐ As a byproduct f. ☐ As an impurity		a. ☐ As a reactant b. ☐ As a formulation component c. ☒ As an article component d. ☐ Repackaging e. ☐ As an impurity		a. ☐ As a chemical processing aid b. ☐ As a manufacturing aid c. ☒ Ancillary or other use	

SECTION 4. MAXIMUM AMOUNT OF THE TOXIC CHEMICAL ONSITE AT ANY TIME DURING THE CALENDAR YEAR

4.1	03 (Enter two-digit code from instruction package.)
------------	---

SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ONSITE

		A. Total Release (pounds/year*) (Enter range code or estimate**)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.1	Fugitive or non-point air emissions	NA ☒		
5.2	Stack or point air emissions	NA ☐	0.13	
5.3	Discharges to receiving streams or water bodies (enter one name per box)		M2	
Stream or Water Body Name				
5.3.1	NA			
5.3.2				
5.3.3				

If additional pages of Part II, Section 5.3 are attached, indicate the total number of pages in this box and indicate the Part II, Section 5.3 page number in this box.

* For Dioxin or Dioxin-like compounds, report in grams/year

EPA FORM R

PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number

48150LVNNG12200

Toxic Chemical, Category, or Generic Name

Lead

SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ONSITE (Continued)

		NA	A. Total Release (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)
5.4.1	Underground Injection onsite to Class I Wells	☒		
5.4.2	Underground Injection onsite to Class II-V Wells	☒		
5.5	Disposal to land onsite			
5.5.1.A	RCRA Subtitle C landfills	☒		
5.5.1.B	Other landfills	☒		
5.5.2	Land treatment/application farming	☒		
5.5.3A	RCRA Subtitle C Surface Impoundments	☒		
5.5.3B	Other surface impoundments	☒		
5.5.4	Other disposal	☒		

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

6.1 DISCHARGES TO PUBLICLY OWNED TREATMENT WORKS (POTWs)

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)

1.63

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

M2

6.1.B. 1

POTW Name

DETROIT WASTEWATER TREATMENT

POTW Address

8300 JEFFERSON

City

DETROIT

State

MI

County

WAYNE

Zip

48209

6.1.B.

POTW Name

POTW Address

City

State

County

Zip

If additional pages of Part II, Section 6.1 are attached, indicate the total number of pages

in this box and indicate the Part II, Section 6.1 page number in this box (example: 1,2,3, etc.)

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2. 1 Off-Site EPA Identification Number (RCRA ID No.)

MID047189568

Off-Site Location Name

GENERAL OIL

Off-site Address

12680 BEECH DALY

City

REDFORD

State

MI

County

WAYNE

Zip

48239

Country
(Non-US)

Is location under control of reporting facility or parent company?

Yes

☒

No

Confidential under FOIA

* For Dioxin or Dioxin-like compounds, report in grams/year

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** Range Codes: A= 1- 10 pounds; B= 11- 499 pounds; C= 500 - 999 pounds.

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PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number

48150LVNNG12200

Toxic Chemical, Category, or Generic Name

Lead

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS (Continued)

A. 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. 77.6	1. M2	1. M90
2. NA	2.	2.
3.	3.	3.
4.	4.	4.

6.2.2 Off-Site EPA Identification Number (RCRA ID No.) MID000724831

Off-Site location Name EQ Belleville

Off-site Address 49350 NORTH I94 SERVICE DRIVE

City	BELLEVILLE	State	MI	County	Wayne	Zip	48111	Country (Non-US)
------	------------	-------	----	--------	-------	-----	-------	---------------------

Is location under control of reporting facility or parent company?

☐ Yes☒ No

A. 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. 1.07	1. M2	1. M64
2. NA	2.	2.
3.	3.	3.
4.	4.	4.

SECTION 7A. ONSITE 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. Waste Treatment Method(s) Sequence [enter 3-character code(s)]	d. Waste Treatment Efficiency Estimate [enter 2 character code]
7A.1a	7A.1b	7A.1d
W	1 H124 2 H077	E4
	3 H123 4 H124 5 H123	
	6 NA 7 8	
7A.2a	7A.2b	7A.2d
	1 2 3 4 5 6 7 8	
7A.3a	7A.3b	7A.3d
	1 2 3 4 5 6 7 8	
7A.4a	7A.4b	7A.4d
	1 2 3 4 5 6 7 8	
7A.5a	7A.5b	7A.5d
	1 2 3 4 5 6 7 8	

If additional pages of Part II, Section 6.2/7A are attached, indicate the total number of pages in this box

3

and indicate the Part II, Section 6.2/7A page number in this box: 1 (example: 1,2,3, etc.)

* For Dioxin or Dioxin-like compounds, report in grams/year

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EPA FORM R PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)	TRI Facility ID Number 48150LVNNG12200 Toxic Chemical, Category, or Generic Name Lead
--	--

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS (Continued)

A. 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.	1.	1.
2.	2.	2.
3.	3.	3.
4.	4.	4.

6.2.3 Off-Site EPA Identification Number (RCRA ID No.) MID980991566

Off-Site location Name	EQ Detroit		
Off-site Address	1923 Frederick		
City	Detroit	State	MI
County	Wayne	Zip	48211
		Country (Non-US)	

 Is location under control of reporting facility or parent company? ☐ Yes ☒ No

A. 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. 1931	1. M2	1. M64
2. NA	2.	2.
3.	3.	3.
4.	4.	4.

SECTION 7A. ONSITE 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. Waste Treatment Method(s) Sequence [enter 3-character code(s)]	d. Waste Treatment Efficiency Estimate [enter 2 character code]
7A.6a	7A.6b 1 2	7A.6d
	3 4 5	
	6 7 8	
7A.7a	7A.7b 1 2	7A.7d
	3 4 5	
	6 7 8	
7A.8a	7A.8b 1 2	7A.8d
	3 4 5	
	6 7 8	
7A.9a	7A.9b 1 2	7A.9d
	3 4 5	
	6 7 8	
7A.10a	7A.10b 1 2	7A.10d
	3 4 5	
	6 7 8	

If additional pages of Part II, Section 6.2/7A are attached, indicate the total number of pages in this box and indicate the Part II, Section 6.2/7A page number in this box:

3

2

(example: 1,2,3, etc.)

* For Dioxin or Dioxin-like compounds, report in grams/year

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PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number

48150LVNNG12200

Toxic Chemical, Category, or Generic Name

Lead

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS (Continued)

A. 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.	1.	1.
2.	2.	2.
3.	3.	3.
4.	4.	4.

6.2. 4 Off-Site EPA Identification Number (RCRA ID No.) MID000009175

Off-Site location Name Preferred Media

Off-site Address 13929 Brainbridge

City	Warren	State	MI	County	Wayne	Zip	48089	Country (Non-US)	
------	--------	-------	----	--------	-------	-----	-------	---------------------	--

Is location under control of reporting facility or parent company?

☐ Yes☒ No

A. 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. 657	1. M2	1. M24
2. NA	2.	2.
3.	3.	3.
4.	4.	4.

SECTION 7A. ONSITE 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. Waste Treatment Method(s) Sequence [enter 3-character code(s)]	d. Waste Treatment Efficiency Estimate [enter 2 character code]
7A.11a	7A.11b 1 2	7A.11d
	3 4 5	
	6 7 8	
7A.12a	7A.12b 1 2	7A.12d
	3 4 5	
	6 7 8	
7A.13a	7A.13b 1 2	7A.13d
	3 4 5	
	6 7 8	
7A.14a	7A.14b 1 2	7A.14d
	3 4 5	
	6 7 8	
7A.15a	7A.15b 1 2	7A.15d
	3 4 5	
	6 7 8	

If additional pages of Part II, Section 6.2/7A are attached, indicate the total number of pages in this box

3

and indicate the Part II, Section 6.2/7A page number in this box: 3 (example: 1,2,3, etc.)

* For Dioxin or Dioxin-like compounds, report in grams/year

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PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

Jun 18, 2009 07:56

TRI Facility ID Number

48150LVNNG12200

Toxic Chemical, Category, or Generic Name

Lead

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

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

SECTION 8. SOURCE REDUCTION AND RECYCLING ACTIVITIES

		Column A Prior Year (pounds/year*)	Column B Current Reporting Year (pounds/year*)	Column C Following Year (pounds/year*)	Column D Second Following Year (pounds/year*)
8.1					
8.1a	Total on-site disposal to Class I Underground Injection Wells, RCRA Subtitle C landfills, and other landfills	NA	NA	NA	NA
8.1b	Total other on-site disposal or other releases	0.11	0.13	0.13	0.13
8.1c	Total off-site disposal to Class I Underground Injection Wells, RCRA Subtitle C landfills, and other landfills	933.92	1932.07	1932.07	1932.07
8.1d	Total other off-site disposal or other releases	113.08	79.23	79.23	79.23
8.2	Quantity used for energy recovery onsite	NA	NA	NA	NA
8.3	Quantity used for energy recovery offsite	NA	NA	NA	NA
8.4	Quantity recycled onsite	NA	NA	NA	NA
8.5	Quantity recycled offsite	181.9	657	657	657
8.6	Quantity treated onsite	NA	NA	NA	NA
8.7	Quantity treated offsite	NA	NA	NA	NA
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)	NA			
8.9	Production ratio or activity index	0.97			
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	a.	b.	c.	
8.10.2		a.	b.	c.	
8.10.3		a.	b.	c.	
8.10.4		a.	b.	c.	
8.11	If you wish to submit additional optional information on source reduction, recycling, or pollution control activities with this report, check "Yes."				Yes ☐

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TRI Facility ID Number
48150LVNNG12200
Toxic Chemical, Category, or Generic Name
Lead

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SECTION 8.11. Submit additional optional information on source reduction, recycling, or pollution control activities.

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 EPA United States Environmental Protection Agency	FORM R Section 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
		48150LVNNG12200
		Toxic Chemical, Category or Generic Name
		Nickel

WHERE TO SEND COMPLETED FORMS: 1. TRI Data Processing Center 2. APPROPRIATE STATE OFFICE
 P.O.Box 1513 (See instructions in Appendix F)
 Lanham, MD 20703-1513

This section only applies if you are revising or withdrawing a previously submitted form, otherwise leave blank.

Revision (enter up to two code(s))

Withdrawal (enter up to two code(s))

Important: See instructions to determine when "Not Applicable (NA)" boxes should be checked.

PART I. FACILITY IDENTIFICATION INFORMATION

SECTION 1. REPORTING YEAR 2007

SECTION 2. TRADE SECRET INFORMATION

2.1	Are you claiming the toxic chemical identified on page 2 trade secret?	2.2	Is this copy	☐ Sanitized	☐ Unsanitized
	☐ Yes (Answer question 2.2; Attach substantiation forms) ☒ NO (Do not answer 2.2; Go to Section 3)		(Answer only if "YES" in 2.1)		

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:	Signature	Date Signed:
DANIEL R DEEDS PLANT MANAGER	<i>[Signature]</i>	06/30/2008

SECTION 4. FACILITY IDENTIFICATION

4.1	TRI Facility ID Number	48150LVNNG12200
Facility or Establishment Name	Facility or Establishment Name or Mailing Address (if different from street address)	
GMPT LIVONIA ENGINE		
Street	Mailing Address	
12200 MIDDLEBELT RD	NA	
City/County/State/Zip Code	City/State/Zip Code	Country (Non-US)
LIVONIA WAYNE MI 48150		

4.2	This report contains information for:	a. ☒ An entire facility	b. ☐ Part of a facility	c. ☐ A Federal facility	d. ☐ GOCO
(Important: check a or b; check c or d if applicable)					

4.3	Technical Contact Name	MATT DOCHODA	Telephone Number (include area code)
	Email Address	MATTHEW.DOCHODA@GM.COM	(734) 523-8718

4.4	Public Contact Name	DAN FLORES	Telephone Number (include area code)
	Email Address	DANIEL.FLORES@GM.COM	(313) 665-4629

4.5	NAICS Code (s) (6 digits)	Primary	a. 336312	b.	c.	d.	e.	f.
-----	---------------------------	---------	-----------	----	----	----	----	----

4.7	Dun & Bradstreet Number(s) (9 digits)	a. 123024010	b.
-----	---------------------------------------	--------------	----

SECTION 5. PARENT COMPANY INFORMATION

5.1	Name of Parent Company	NA ☐	GENERAL MOTORS
5.2	Parent Company's Dun & Bradstreet Number	NA ☐	005356613

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PART II. CHEMICAL - SPECIFIC INFORMATION

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TRI Facility ID Number
 48150LVNNG12200
 Toxic Chemical, Category or Generic Name
 Nickel

SECTION 1. TOXIC CHEMICAL IDENTITY

(Important: DO NOT complete this section if you completed Section 2 below.)

1.1	CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.) 7440-02-0
1.2	Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.) Nickel
1.3	Generic Chemical Name (Important: Complete only if Part 1, Section 2.1 is checked "Yes". Generic Name must be structurally descriptive.) NA

Distribution of Each Member of the Dioxin and Dioxin-like Compounds Category.

(If there are any numbers in boxes 1-17, then every field must be filled in with either 0 or some number between 0.01 and 100. Distribution should be reported in percentages and the total should equal 100%. If you do not have speciation data available, indicate NA.)

1.4	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
NA																	

SECTION 2. MIXTURE COMPONENT IDENTITY

(Important: DO NOT complete this section if you completed Section 1 above.)

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

SECTION 3. ACTIVITIES AND USES OF THE TOXIC CHEMICAL AT THE FACILITY

(Important: Check all that apply.)

3.1	Manufacture the toxic chemical:	3.2	Process the toxic chemical:	3.3	Otherwise use the toxic chemical:
a. ☐ Produce b. ☐ Import If produce or import: c. ☐ For on-site use/processing d. ☐ For sale/distribution e. ☐ As a byproduct f. ☐ As an impurity		a. ☐ As a reactant b. ☐ As a formulation component c. ☒ As an article component d. ☐ Repackaging e. ☐ As an impurity		a. ☐ As a chemical processing aid b. ☐ As a manufacturing aid c. ☐ Ancillary or other use	

SECTION 4. MAXIMUM AMOUNT OF THE TOXIC CHEMICAL ONSITE AT ANY TIME DURING THE CALENDAR YEAR

4.1	03 (Enter two-digit code from instruction package.)
------------	---

SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ONSITE

		A. Total Release (pounds/year*) (Enter range code or estimate**)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.1	Fugitive or non-point air emissions	NA ☒		
5.2	Stack or point air emissions	NA ☒		
5.3	Discharges to receiving streams or water bodies (enter one name per box)			
Stream or Water Body Name				
5.3.1	NA			
5.3.2				
5.3.3				

If additional pages of Part II, Section 5.3 are attached, indicate the total number of pages in this box and indicate the Part II, Section 5.3 page number in this box.

* For Dioxin or Dioxin-like compounds, report in grams/year

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PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number

48150LVNNG12200

Toxic Chemical, Category, or Generic Name

Nickel

SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ONSITE (Continued)

		NA	A. Total Release (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)
5.4.1	Underground Injection onsite to Class I Wells	☒		
5.4.2	Underground Injection onsite to Class II-V Wells	☒		
5.5	Disposal to land onsite			
5.5.1.A	RCRA Subtitle C landfills	☒		
5.5.1.B	Other landfills	☒		
5.5.2	Land treatment/application farming	☒		
5.5.3A	RCRA Subtitle C Surface Impoundments	☒		
5.5.3B	Other surface impoundments	☒		
5.5.4	Other disposal	☒		

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

6.1 DISCHARGES TO PUBLICLY OWNED TREATMENT WORKS (POTWs)

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)

0

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

M2

6.1.B. 1

POTW Name

DETROIT WASTEWATER TREATMENT

POTW Address

8300 JEFFERSON

City

DETROIT

State

MI

County

WAYNE

Zip

48209

6.1.B.

POTW Name

POTW Address

City

State

County

Zip

If additional pages of Part II, Section 6.1 are attached, indicate the total number of pages

in this box and indicate the Part II, Section 6.1 page number in this box (example: 1,2,3, etc.)

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2. 1 Off-Site EPA Identification Number (RCRA ID No.)

MID047189568

Off-Site Location Name

GENERAL OIL

Off-site Address

12680 BEECH DALY

City

REDFORD

State

MI

County

WAYNE

Zip

48239

Country
(Non-US)

Is location under control of reporting facility or parent company?

Yes

☒

No

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* For Dioxin or Dioxin-like compounds, report in grams/year

EPA Form 9350-1 (Rev. 01/2008) - Previous editions are obsolete.

** Range Codes: A= 1- 10 pounds; B= 11- 499 pounds; C= 500 - 999 pounds.

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PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number

48150LVNNG12200

Toxic Chemical, Category, or Generic Name

Nickel

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS (Continued)

A. 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. M2	1. M90
2. NA	2.	2.
3.	3.	3.
4.	4.	4.

6.2.2 Off-Site EPA Identification Number (RCRA ID No.) MID000724831

Off-Site location Name EQ Belleville

Off-site Address 49350 NORTH I94 SERVICE DRIVE

City	BELLEVILLE	State	MI	County	Wayne	Zip	48111	Country (Non-US)
------	------------	-------	----	--------	-------	-----	-------	---------------------

Is location under control of reporting facility or parent company?

☐ Yes☒ No

A. 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. 0	1. M2	1. M90
2. NA	2.	2.
3.	3.	3.
4.	4.	4.

SECTION 7A. ONSITE 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. Waste Treatment Method(s) Sequence [enter 3-character code(s)]	d. Waste Treatment Efficiency Estimate [enter 2 character code]
7A.1a	7A.1b	7A.1d
W	1 H124 2 H077	E4
	3 H123 4 H124 5 H123	
	6 NA 7 8	
7A.2a	7A.2b	7A.2d
	1 2 3 4 5 6 7 8	
7A.3a	7A.3b	7A.3d
	1 2 3 4 5 6 7 8	
7A.4a	7A.4b	7A.4d
	1 2 3 4 5 6 7 8	
7A.5a	7A.5b	7A.5d
	1 2 3 4 5 6 7 8	

If additional pages of Part II, Section 6.2/7A are attached, indicate the total number of pages in this box

3

and indicate the Part II, Section 6.2/7A page number in this box: 1 (example: 1,2,3, etc.)

* For Dioxin or Dioxin-like compounds, report in grams/year

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PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number

48150LVNNG12200

Toxic Chemical, Category, or Generic Name

Nickel

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS (Continued)

A. 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.	1.	1.
2.	2.	2.
3.	3.	3.
4.	4.	4.

6.2.3 Off-Site EPA Identification Number (RCRA ID No.) MID980991566

Off-Site location Name EQ Detroit

Off-site Address 1923 Frederick

City	Detroit	State	MI	County	Wayne	Zip	48211	Country (Non-US)	
------	---------	-------	----	--------	-------	-----	-------	---------------------	--

Is location under control of reporting facility or parent company?

☐ Yes☒ No

A. 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. 92	1. M2	1. M64
2. NA	2.	2.
3.	3.	3.
4.	4.	4.

SECTION 7A. ONSITE 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. Waste Treatment Method(s) Sequence [enter 3-character code(s)]	d. Waste Treatment Efficiency Estimate [enter 2 character code]
7A.6a	7A.6b	7A.6d
	3	
	6	
7A.7a	7A.7b	7A.7d
	3	
	6	
7A.8a	7A.8b	7A.8d
	3	
	6	
7A.9a	7A.9b	7A.9d
	3	
	6	
7A.10a	7A.10b	7A.10d
	3	
	6	

If additional pages of Part II, Section 6.2/7A are attached, indicate the total number of pages in this box

3

and indicate the Part II, Section 6.2/7A page number in this box: 2 (example: 1,2,3, etc.)

* For Dioxin or Dioxin-like compounds, report in grams/year

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PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number

48150LVNNG12200

Toxic Chemical, Category, or Generic Name

Nickel

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS (Continued)

A. 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.	1.	1.
2.	2.	2.
3.	3.	3.
4.	4.	4.

6.2. 4 Off-Site EPA Identification Number (RCRA ID No.)

MID000009175

Off-Site location Name

Preferred Media

Off-site Address

13929 Brainbridge

City

Warren

State

MI

County

Wayne

Zip

48089

Country
(Non-US)

Is location under control of reporting facility or parent company?

☐ Yes☒ No

A. 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. 31	1. M2	1. M24
2. NA	2.	2.
3.	3.	3.
4.	4.	4.

SECTION 7A. ONSITE 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. Waste Treatment Method(s) Sequence [enter 3-character code(s)]	d. Waste Treatment Efficiency Estimate [enter 2 character code]
7A.11a	7A.11b 1 2	7A.11d
	3 4 5	
	6 7 8	
7A.12a	7A.12b 1 2	7A.12d
	3 4 5	
	6 7 8	
7A.13a	7A.13b 1 2	7A.13d
	3 4 5	
	6 7 8	
7A.14a	7A.14b 1 2	7A.14d
	3 4 5	
	6 7 8	
7A.15a	7A.15b 1 2	7A.15d
	3 4 5	
	6 7 8	

If additional pages of Part II, Section 6.2/7A are attached, indicate the total number of pages in this box

3

and indicate the Part II, Section 6.2/7A page number in this box:

3

(example: 1,2,3, etc.)

* For Dioxin or Dioxin-like compounds, report in grams/year

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PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

Jun 18, 2009 07:56

TRI Facility ID Number

48150LVNNG12200

Toxic Chemical, Category, or Generic Name

Nickel

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

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

SECTION 8. SOURCE REDUCTION AND RECYCLING ACTIVITIES

		Column A Prior Year (pounds/year*)	Column B Current Reporting Year (pounds/year*)	Column C Following Year (pounds/year*)	Column D Second Following Year (pounds/year*)
8.1					
8.1a	Total on-site disposal to Class I Underground Injection Wells, RCRA Subtitle C landfills, and other landfills	NA	NA	NA	NA
8.1b	Total other on-site disposal or other releases	NA	NA	NA	NA
8.1c	Total off-site disposal to Class I Underground Injection Wells, RCRA Subtitle C landfills, and other landfills	135	92	92	92
8.1d	Total other off-site disposal or other releases	2	2	2	2
8.2	Quantity used for energy recovery onsite	NA	NA	NA	NA
8.3	Quantity used for energy recovery offsite	NA	NA	NA	NA
8.4	Quantity recycled onsite	NA	NA	NA	NA
8.5	Quantity recycled offsite	9	31	31	31
8.6	Quantity treated onsite	NA	NA	NA	NA
8.7	Quantity treated offsite	NA	NA	NA	NA
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)	NA			
8.9	Production ratio or activity index	0.97			
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	a.	b.	c.	
8.10.2		a.	b.	c.	
8.10.3		a.	b.	c.	
8.10.4		a.	b.	c.	
8.11	If you wish to submit additional optional information on source reduction, recycling, or pollution control activities with this report, check "Yes."				Yes ☐

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SECTION 8.11. Submit additional optional information on source reduction, recycling, or pollution control activities.

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