

December 16, 2005

Roy VanOs, Ph.D.
Utah Department of Environmental Quality
Division of Solid and Hazardous Waste
288 North 1460 West
P.O. Box 144880
Salt Lake City, UT 84114

Subject: Application Revision for Permit #9102 for North Salt Lake Medical Waste
Incinerator

Dear Dr. VanOS:

On May 14, 2004, Stericycle submitted a permit renewal application for continued operation. As per this notification, Stericycle is submitting a revised permit renewal application, which updates the following sections of the application:

- Section 3 and 7 of Application
- Section I, III, VIII, X and XVI of the Plan of Operation

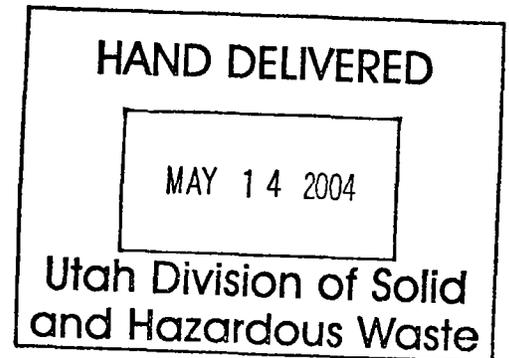
If you have any questions, regarding these application revisions, please contact me at (801) 936-1171.

Sincerely,

Kirk Christenson, Plant Operations Manager
Stericycle, Inc.

May 11, 2004

Dennis R. Downs, Executive Secretary
Utah Department of Environmental Quality
Division of Solid and Hazardous Waste
288 North 1460 West
P.O. Box 144880
Salt Lake City, UT 84114



Subject: Renewal of Permit #9102 for North Salt Lake Medical Waste Incinerator

Dear Mr. Downs:

Stericycle, Inc. currently operates a Class V Incinerator located at 90 North and 1100 West in North Salt Lake City, UT. On November 8, 2002, Stericycle submitted a permit renewal application for continued operation. As per this notification, Stericycle is submitting a revised permit renewal application, which updates the names of the individuals, who are currently the active "responsible parties" for the operations of the facility.

In addition, pursuant to Utah Code Section 19-6-108(c) Stericycle is requesting an increase to the throughput of the incinerator to 2025 lb/HR. This increase is 50% above the original total throughput of 1350 lb/HR that was approved in the original plan of operation.

Finally, we request that the following language be adopted in the 2004 Permit #9102 Class V Incinerator Condition I. General Compliance Responsibilities to read:

B. Acceptable Waste

This permit allows for incineration of solid wastes, primarily infectious wastes as listed in the Plan of Operation Section II: Description of Waste. Incineration of other solid wastes not listed herein will be considered a violation of this permit and grounds for appropriate enforcement action.

C. Prohibited Waste

The following wastes are prohibited from being accepted at this incinerator facility:

- Any hazardous waste as defined by UAC R315-301-2 (30)
- Asbestos waste as defined by UAC R315-301-2 (5)

- Construction / Demolition waste as defined by UAC R315-301-2 (17)
- PCBs as defined by UAC R315-301-2 (53)
- The following Special Wastes as defined by UAC R315-301-2 (71)
 - (a) Ash
 - (b) Automobile bodies
 - (e) Waste tires
 - (g) Asbestos
 - (h) Waste exempt from hazardous waste regulations under section R315-2-4
 - (i) Conditionally exempt small quantity generator hazardous waste as defined by section R315-2-5
 - (j) Waste containing PCB's
 - (k) Petroleum contaminated soils
 - (l) Waste asphalt
 - (m) Sludge as defined by section R315-2-5 (68)
- Yard waste as defined by UAC R315-301-2 (85)

If you have any questions, regarding this "Addendum" and the permit renewal application for Stericycle, please contact Dan Locke or Kirk Christenson at (801) 936-1171.

Sincerely,



Dan Locke, Plant Operations Manager
Stericycle, Inc.
90 N 1100 W
North Salt Lake City, UT 84054

FACILITY GENERAL INFORMATION

I. Utah Solid Waste Incinerator Permit Application Form

T.O.C.

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*This is a renewal application for an existing facility. Additional facility technical information was submitted with the original application.



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FACILITY GENERAL INFORMATION

1 Utah Solid Waste Incinerator Permit Application Form

Utah Solid Waste Incinerator Permit Application Form

Part I. General Information APPLICANT PLEASE COMPLETE ALL SECTIONS

Incinerator Type	<input checked="" type="checkbox"/> Large <input type="checkbox"/> Small	Energy Recovery	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Application Type	<input type="checkbox"/> New Application <input checked="" type="checkbox"/> Renewal Application	<input type="checkbox"/> Facility Expansion <input type="checkbox"/> Modification
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For Renewal Applications, Facility Expansion Applications and Modifications Enter Current Permit Number 9102

III. Facility Name and Location

Legal Name of Facility Stericycle, Inc.			
Site Address (street or directions to site) 90 North 1100 West			County
City North Salt Lake City	State UT	Zip Code 84054	Telephone (801) 936-1171
Township 1 N	Range 1 W	Section(s) 3	Quarter/Quarter Section WE / NE Quarter Section SW
Main Gate Latitude	degrees 111 minutes 56 seconds 31	Longitude	degrees 40 minutes 50 seconds 56

IV. Facility Owner(s) Information

Legal Name of Facility Owner Stericycle, Inc.			
Address (mailing) 28161 North Keith Drive			
City Lake Forest	State IL	Zip Code 60045	Telephone (847) 607-2008

V. Facility Operator(s) Information

Legal Name of Facility Operator Stericycle, Inc.			
Address (mailing) 90 North 1100 West			
City North Salt Lake City	State UT	Zip Code 84054	Telephone (801) 936-1171

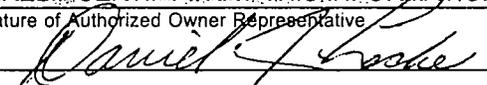
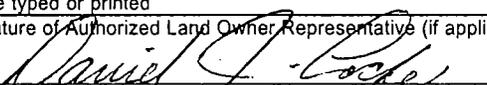
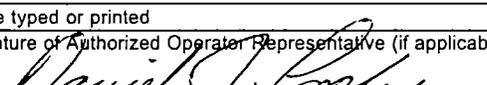
VI. Property Owner(s) Information

Legal Name of Property Owner Stericycle, Inc.			
Address (mailing) 28161 North Keith Drive			
City Lake Forest	State IL	Zip Code 60045	Telephone (847) 607-2008

VII. Contact Information

Owner Contact Mark C. Miller		Title President & Chief Executive Officer	
Address (mailing) 28161 North Keith Drive			
City Lake Forest	State IL	Zip Code 60045	Telephone (847) 607-2008
Email Address		Alternative Telephone (cell or other)	
Operator Contact Daniel J. Locke		Title Operations Manager	
Address (mailing) 90 North 1100 West			
City North Salt Lake City	State UT	Zip Code 84054	Telephone (801) 936-1171
Email Address dlocke@stericycle.com		Alternative Telephone (cell or other) (801) 330-1171	
Property Owner Contact Mark C. Miller		Title President & Chief Executive Officer	
Address (mailing) 28161 North Keith Drive			
City Lake Forest	State IL	Zip Code 60045	Telephone (847) 607-2008
Email Address		Alternative Telephone (cell or other)	

Utah Solid Waste Incinerator Permit Application Form

Part II General Information (Continued)		
VIII. Waste Types (check all that apply)		IX. Facility Design Capacity
Waste Type <input type="checkbox"/> Municipal Waste <input type="checkbox"/> Asbestos <input type="checkbox"/> Construction & Demolition <input type="checkbox"/> PCB's (R315-315-7(3) only) <input type="checkbox"/> Industrial <input checked="" type="checkbox"/> Animals <input checked="" type="checkbox"/> Other <u>See Section II Plan of Operations</u>	Tons per Day <u>or</u> <u>24.3</u> Pound per Hour <u>2025</u>	
X. Fee and Application Documents		
Indicate Documents Attached To This Application <input checked="" type="checkbox"/> Facility Map or Maps <input checked="" type="checkbox"/> Facility Legal Description <input checked="" type="checkbox"/> Plan of Operation <input checked="" type="checkbox"/> Waste Description <input checked="" type="checkbox"/> Ash Sampling Plan <input checked="" type="checkbox"/> Closure Design <input checked="" type="checkbox"/> Cost Estimates <input checked="" type="checkbox"/> Financial Assurance	<input type="checkbox"/> Application Fee: Amount \$	Commercial Facility Special Requirements <input type="checkbox"/> Documents required by UCA 19-6-108(9) and (10)
HEREBY CERTIFY THAT THIS INFORMATION AND ALL ATTACHED PAGES ARE CORRECT AND COMPLETE.		
Signature of Authorized Owner Representative  _____ Daniel J. Locke Name typed or printed	Title Operations Manager	Date May 12, 2004
Address 90 N 1100 W, North Salt Lake City, UT 84054		
Signature of Authorized Land Owner Representative (if applicable)  _____ Daniel J. Locke Name typed or printed	Title Operations Manager	Date May 12, 2004
Address 90 N 1100 W, North Salt Lake City, UT 84054		
Signature of Authorized Operator Representative (if applicable)  _____ Daniel J. Locke Name typed or printed	Title Operations Manager	Date May 12, 2004
Address 90 N 1100 W, North Salt Lake City, UT 84054		

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FACILITY GENERAL INFORMATION

2 General Description of the Facility

Facility Name: Stericycle, Inc.
North Salt Lake, Davis County, Utah Facility

Facility Owner: Stericycle Inc.
28161 North Keith Drive
Lake Forest, IL 60045

Location: 90 North 1100 West
North Salt Lake, UT 84054

The site is currently fully developed as an incineration facility. The total improvements include a 4,000 sq. ft. office to the west attached to an 11,250 sq. ft. fully enclosed processing area and an attached 6,830 sq. ft. fully enclosed storage and truck wash bay to the east. The perimeter is paved and landscaped with a pre-cast cement wall enclosure.

The facility operates a dual chamber controlled air incinerator, equipped with automatic waste feed and ash removal systems. The flue gas generated from the incineration process is first cooled by means of a waste heat boiler, which has the capacity to generate over 11,000 lb/hr of steam. An evaporative gas cooler prior to the air pollution control scrubbing system further cools the flue gas. The first stage of the air pollution control system is a multi-pass dry reactor, where carbon is injected to control potential emissions of dioxin, furan and mercury. The next stage consists of an electrostatic precipitator that removes particulate matter from the gas stream. The final stage is a wet absorber tower, where a sodium hydroxide solution scrubs the gas stream to remove any acid vapors.

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FACILITY GENERAL INFORMATION

III. Legal Description

The facility is situated on a 5.23-acre parcel of land in the City of North Salt Lake. The address of the site is 90 North 1100 West Street.

The legal description of the facility site is as follows:

All of Lot 3, WASATCH FRONT INDUSTRIAL PARK, PLAT A, according to the official plat thereof, on file and of record in the Davis County Recorder's Office. Recorded July 6, 1977, as Entry No. 466509, in book 567, at page 475, Davis County Recorders Office. The incinerator is located in the SE ¼ of the NE ¼ of the SW ¼ of Section 3, Township 1N, Range 1W SLBM. The coordinates of the front gate of this facility are:

Longitude: 40° 50' 56" North
Latitude: 111° 56' 31" West

The legal owner of this property is Stericycle, Inc of 28161 North Keith Drive, Lake Forest, Illinois 60045. The responsible party for site operations is wholly owned subsidiary of the aforementioned owner, Stericycle, Inc. The on-site representative of this operating corporation is:

Kirk Christenson
Operations Manager
Office: (801) 936-1171
Mobile: (801) 330-1758
Fax: (801) 936-5891
Email: kchristenson@stericycle.com

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FACILITY GENERAL INFORMATION

4 Proof of Ownership



State of Utah

DEPARTMENT OF ENVIRONMENTAL QUALITY DIVISION OF SOLID AND HAZARDOUS WASTE

Michael O. Leavitt
Governor

Dianne R. Nielson, Ph.D.
Executive Director

Dennis R. Downs
Director

288 North 1460 West
P.O. Box 144880
Salt Lake City, Utah 84114-4880
(801) 538-6170
(801) 538-6715 Fax
(801) 536-4414 T.D.D.
www.deq.state.ut.us Web

November 30, 2000

Selin Hoboy,
Environmental Health and Safety Manager
Stericycle,
90 North 1100 West
North Salt Lake, 84054

SUBJECT: Acknowledgment of Facility Name Change
Reference Letter #99.04348
Reference Letter #00.00702

Dear Ms. Hoboy:

The Executive Secretary of the Solid and Hazardous Waste Control Board has received and reviewed a letter from James Kean, JD, LLM notifying our Division of the transfer of ownership of BFI Medical Waste, Inc. to Stericycle, Inc. during November, 1999. Upon request, another letter from Chuck Merritt, representative of Stericycle, Inc., was also received stating that Mr. James Kean, JD, LLM, represented Stericycle in this claim of transfer of ownership.

This notice formally acknowledges the name change for the medical waste facility formally permitted as BFI Medical Waste, Inc. to Stericycle, Inc. All correspondence, permits, and actions will recognize Stericycle, Inc., as the responsible party for the facility located at 90 North 1100 West, North Salt Lake City, Utah 84054.

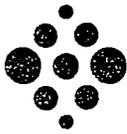
If you have any further questions regarding this letter, please contact Roy Van Os or Ralph Bohn at (801) 538-6170

Sincerely,


Dennis R. Downs, Executive Secretary
Utah Solid and Hazardous Waste Control Board

DRD/RVO/kk

c: Selin Hoboy, 5355 Colorado Blvd, Dacono, Co 80514
Mike Behesti, DAQ
Delane McGarvey, Davis County Health Dept.
Stericycle File



Stericycle®

February 22, 2000

Dennis R. Downs
Utah Department of Environmental Quality
Division of Solid and Hazardous Waste
288 North 1460 West
P.O. Box 144880
Salt Lake City, Utah 84114-4880

**HAND DELIVERED
DIVISION OF SOLID &
HAZARDOUS WASTE**

FEB 22 2000
AM 7 8 9 10 11 12 1 2 3 4 5 6 **PM**

Re: Stericycle, Inc. – North Salt Lake
Permit to Operate Incinerator, No. 9102

Dear Mr. Downs,

Please accept this written notice that Mr. James Kean serves as legal counsel for Stericycle, Inc. This is written at the request of Mr. Roy VanOs and Mr. Ralph Bohn in response to correspondence received by your office on December 13, 1999 from Mr. Kean. Mr. Kean's correspondence relates to the purchase of the stock of BFI Medical Waste, Inc. by Stericycle, Inc. on November 12, 1999.

Pursuant to this purchase, Stericycle assumes legal responsibilities for the compliant operation of the BFI-North Salt Lake incinerator, as outlined within permit no. 9102, issued to BFI on June 1, 1998.

If you have further questions or comments please do not hesitate to telephone me at (303) 776-8090, or (720) 635-3602.

Sincerely,

Chuck Merritt
Area Vice President – Environment, Safety & Health
Stericycle, Inc.

cc: file



RECEIVED

Fed Ex
DEC 08 1999
99.04605
Division of Solid & Hazardous Waste
Utah Department of Environmental Quality

EMCON/OWT Solid Waste Services

1414 South Fifth Street, Suite 200
Springfield, IL 62703-2805
Tel. 217.492.9450
Fax. 217.492.9453

A Member of The IT Group

December 7, 1999

Mr. Dennis Downs, Director
Utah Department of Environmental Quality
Division of Solid and Hazardous Waste
288 North 1460 West
P.O. Box 144880
Salt Lake City, Utah 84114-4880

Re: BFI Medical Waste, Inc. - Washington
Medical Waste Transfer Station

Dear Mr. Downs:

Recently Browning-Ferris Industries merged its medical waste operations into a new subsidiary, BFI Medical Waste, Inc. This consolidation of medical waste operations was in preparation for a contemplated transfer of the new subsidiary to Stericycle, Inc.

We are writing on behalf of Stericycle, Inc. to inform you that it acquired all of the outstanding stock of BFI Medical Waste, Inc. on November 12, 1999. As a result of this acquisition, Stericycle, Inc. owns all of BFI Medical Waste, Inc. including the operations located at 180 North 1100 East in Washington. Stericycle, Inc. is committed to continuing the operation of this facility in compliance and in a safe and responsible manner.

Enclosed is the revised Performance Bond required by your office.

Should you have any questions or require additional information, please contact me at (217) 492-9450 extension 101.

Sincerely,

Rachelle Maxheimer, Project Coordinator
IT-EMCON

Attachments: Performance Bond

cc: Cory Tennant, BFI Medical Waste

SURETY RIDER

To be attached to and form a part of Performance & Payment Bonds Number
ESD 5297835 dated 11 / 12 / 99 executed by
STERICYCLE, INC. AND BFI MEDICAL WASTE, INC. as Principal, and
The Insurance Company of the State of Pennsylvania as Surety, in favor of
UTAH DEPARTMENT OF ENVIRONMENTAL QUALITY as Obligee.
Provided, however, that the Obligee accepts this bond subject to the following conditions
and provisions:

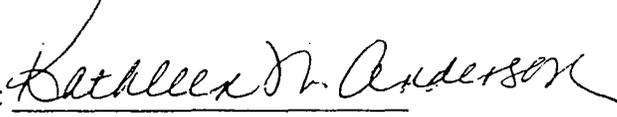
1. This bond is for the term beginning 5/17/99 and ending
5/17/00.
2. This bond may be extended for additional term(s) of twelve (12) months at the option
of the surety, by continuation certificate executed by the surety. At no time will the
period of exposure under this bond exceed twelve (12) months. Notification of Non-
Renewal shall be given by Certified Mail to the Obligee no later than thirty (30) days
prior to the expiration date of the bond. Failure of the surety to issue a Continuation
Certificate or otherwise extend the term, shall not constitute a default under the
Performance Bond.
3. In the event of default by the Principal in performance of the contract during the term
of this bond, the surety shall be liable only for the loss to the Obligee due to actual
excess costs of performance of the contract up to the termination of the term of this
bond. Maximum aggregate liability of the surety is limited to the penal sum of this
bond.
4. Any suit under this Performance Bond must be instituted before the expiration of two
(2) years from the last day of the term of this Performance Bond or any continuation
thereof. If this limitation is made void by any law controlling the contract hereof,
such limitation shall be deemed to be amended to equal the minimum period of
limitation permitted by such law.

Signed, sealed and dated this 11 / 12 / 99.

Principal
STERICYCLE, INC. AND BFI MEDICAL WASTE, INC.

By: 

The Insurance Company of the State of
Pennsylvania

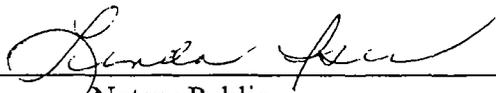
By: 

KATHLEEN M. ANDERSON
Attorney-in-fact

State of **Illinois**
County of **Cook**

On the 12^h day of **November** 1999, before me personally came **Kathleen M. Anderson** to me known, who, being by me duly sworn, did depose and say: that she resides in **Cook County, Illinois** that she is the **Attorney-in-Fact** of **The Insurance Company of the State of Pennsylvania**





Notary Public

The Insurance Company of the State of Pennsylvania

Principal Bond Office: 175 Water Street, New York, N.Y. 10038



POWER OF ATTORNEY

No. 02-B-08281

KNOW ALL MEN BY THESE PRESENTS:

That The Insurance Company of the State of Pennsylvania, a Pennsylvania corporation, does hereby appoint

---Thomas J. Joslin, Christine Marotta, Sandra Martinez, Linda Iser, Kathleen M. Anderson, Kathleen J. Mailes, Karen Daniel: of Chicago, Illinois---

its true and lawful Attorney(s)-in-Fact, with full authority to execute on its behalf bonds, undertakings, recognizances and other contracts of indemnity and writings obligatory in the nature thereof, issued in the course of its business, and to bind the company thereby.

IN WITNESS WHEREOF, The Insurance Company of the State of Pennsylvania has executed these presents



this 21st day of April, 1999.

Lawrence W. Carlstrom, Vice President

STATE OF NEW YORK } COUNTY OF NEW YORK}ss.

On this 21st day of April, 1999 before me came the above named officer of The Insurance Company of the State of Pennsylvania, to me personally known to be the individual and officer described herein, and acknowledged that he executed the foregoing instrument and affixed the seal of said corporation thereto by authority of his office.

Joseph B. Nozzio

JOSEPH B. NOZZIO Notary Public, State of New York No. 01-NO4652754 Qualified in Westchester County Term Expires Jan. 31, 2000

CERTIFICATE

Excerpts of Resolution adopted by the Board of Directors of The Insurance Company of the State of Pennsylvania, on May 18, 1976:

"RESOLVED, that the Chairman of the Board, the President, or any Vice President be, and hereby is, authorized to appoint Attorneys-in-Fact to represent and act for and on behalf of the Company to execute bonds, undertakings, recognizances and other contracts of indemnity and writings obligatory in the nature thereof, and to attach thereto the corporate seal of the Company, in the transaction of its surety business;

"RESOLVED, that the signatures and attestations of such officers and the seal of the Company may be affixed to any such Power of Attorney or to any certificate relating thereto by facsimile, and any such Power of Attorney or certificate bearing such facsimile signatures or facsimile seal shall be valid and binding upon the Company when so affixed with respect to any bond, undertaking, recognizance or other contract of indemnity or writing obligatory in the nature thereof;

"RESOLVED, that any such Attorney-in-Fact delivering a secretarial certification that the foregoing resolutions still be in effect may insert in such certification the date thereof, said date to be not later than the date of delivery thereof by such Attorney-in-Fact."

I, Elizabeth M. Tuck, Secretary of The Insurance Company of the State of Pennsylvania, do hereby certify that the foregoing excerpts of Resolution adopted by the Board of Directors of this corporation, and the Power of Attorney issued pursuant thereto, are true and correct, and that both the Resolution and the Power of Attorney are in full force and effect.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the facsimile seal of the corporation

this 12th day of November, 1999.



Elizabeth M. Tuck, Secretary

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FACILITY GENERAL INFORMATION

5 Area Served by the Facility

This facility serves the greater Salt Lake City as well as the entire state of Utah. As part of Stericycle's business network, this facility also services various markets throughout North America. The primary market served is Stericycle's Western Regional system, including but not limited to the Pacific Coast and Intermountain States.



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FACILITY GENERAL INFORMATION

6 Waste Type and Anticipated Daily Volumes

The medical waste processed at the facility is solid waste generated in health care or health care-related facilities, animal care, and research facilities, pharmaceutical manufacturing and distribution facilities, and in the production and testing of biological material. It also includes special waste streams, which were approved by the Division of Solid and Hazardous Waste as described below.

A. Waste Stream Composition:

Typical wastes include paper, plastic, cloth, diagnostic cultures, human and animal tissues generated by hospitals, nursing homes, clinics, and other medical, dental and veterinary facilities; and expired and unused pharmaceuticals.

B. Medical Waste:

Regulated medical waste is generally defined as any waste that can cause an infectious disease or that reasonably can be suspected of harboring human pathogenic organisms. It is also known as red bag waste, infectious waste, potentially infectious waste, biomedical waste, and biohazardous waste. Regulated medical waste includes single-use disposable items such as needles, syringes, gloves, and laboratory, surgical, emergency room and other supplies, which have been in contact with blood, blood products, bodily fluids, cultures or stocks of infectious agents.

C. Special wastes as defined by UAC R315-302-2 include:

1. Furniture (c) contaminated with potentially infectious materials
2. Infectious waste (d)
3. Dead animals (f)

D. Other Waste Streams:

1. Expired and unused pharmaceuticals
2. Confidential records / proprietary packaging and products
3. Contraband (e.g. police evidence)

4. Agriculture (APHIS) Waste
5. Outdated, off-specification or unused consumer commodities
6. Recalled or outdated disposable medical equipment or supplies
7. "Municipal solid waste" as defined by UAC R315-302-2 (46) contaminated with potentially infectious materials

Other non-hazardous waste as approved by the Division of Solid and Hazardous Waste.

E. Estimated Volume

The base capacity, for the purpose of compliance with UAC 19-6-108(1)(6) of this incinerator is 1850 pounds per hour (which is 22.2 tons per day). The capacity of 1850 pounds per hour shall be based on the annual amount of waste incinerated divided by 8760 (the total number of hours per year). The hourly incineration rate for this incinerator shall not be greater than the three-hour capacity allowed under the existing Air Quality Permit.



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FACILITY GENERAL INFORMATION

7 Land Use Compatibility

Local Zoning

The site is within the Manufacturing (M-D) District. Adjacent to this District are a General Commercial (C-G) District and a Planned Development (PD) District as indicated on the map. Immediately North to the facility is the Foxburo Sub development and is currently part of the Planed Development.

Businesses in Vicinity

Two businesses are located approximately 0.15 miles southeast and southwest of the site. The South Davis County Sewer Plant is located approximately 0.36 miles west of the site. A variety of other industries and businesses are within the extended industrial area including an oil refinery and several trucking operations.

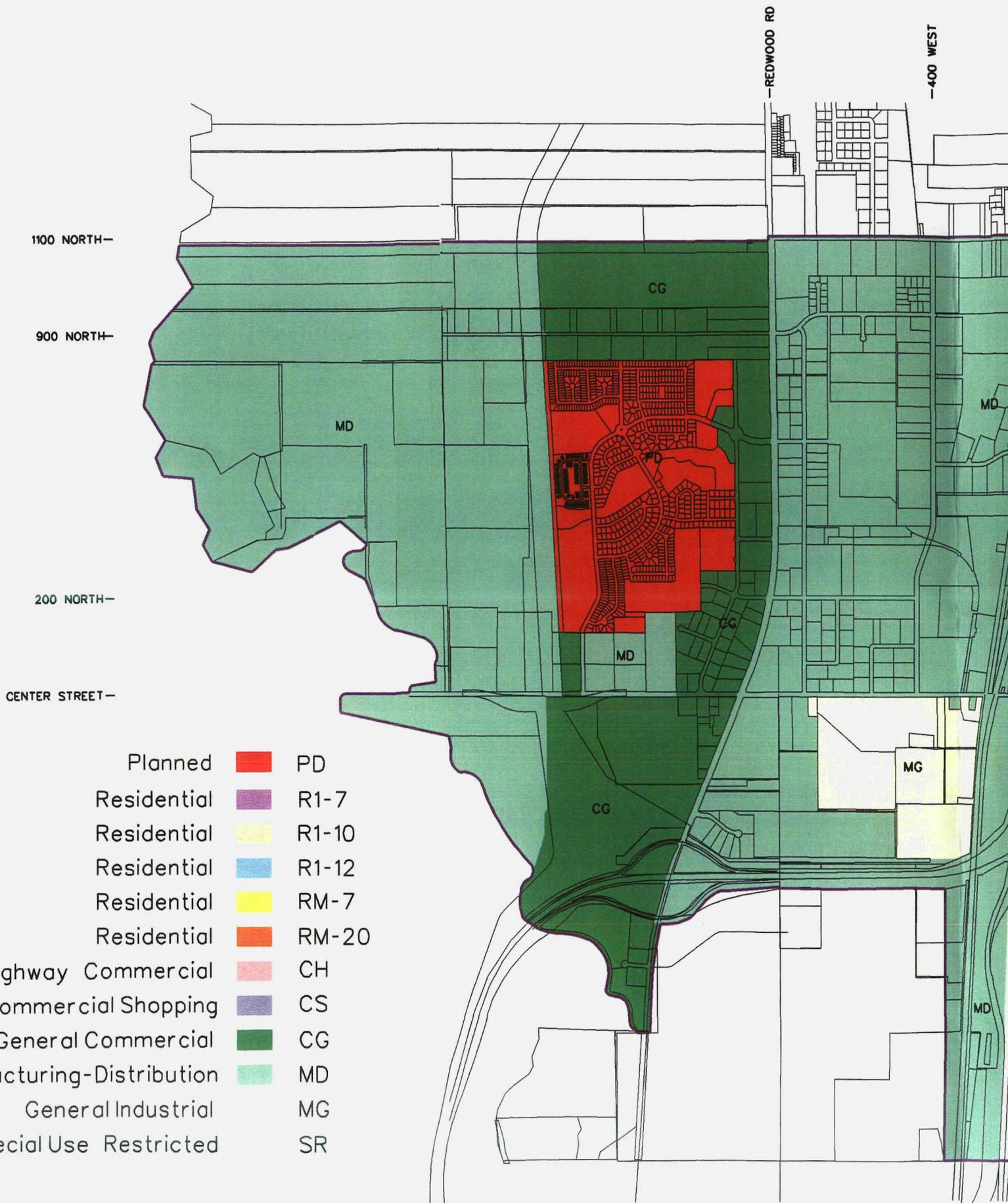
Roads

1100 West Street north of Center Street enters into a planned development zone, which is adjacent to the facility site. No roads, improved or unimproved, are found on the site.

Maps Showing Existing Land Use (within 1000 feet)

See Attached North Salt Lake Zoning Map

Source: <http://www.nslcity.cc/zoning-map-2003.pdf>



- Planned ■ PD
- Residential ■ R1-7
- Residential ■ R1-10
- Residential ■ R1-12
- Residential ■ RM-7
- Residential ■ RM-20
- Highway Commercial ■ CH
- Commercial Shopping ■ CS
- General Commercial ■ CG
- Manufacturing-Distribution ■ MD
- General Industrial ■ MG
- Special Use Restricted ■ SR

DATE	BY	DESCRIPTION	DESIGN
			PAO
			DRAWN ØKH
			CHECKED
			DATE APRIL 2005
			F.B. NO.
			P.G. NO.

North
Z

8

FACILITY GENERAL INFORMATION

8 Geology

General Topography

The site is located on flat ground, which slopes westward at 5 ft./elevation per 3200 ft./linear. Elevation at the site is approximately 4216 feet above sea level.

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FACILITY GENERAL INFORMATION

9 Surface Water*

Water Supply Wells

One water supply well is located approximately 0.45 miles away. The water right for diversion is assigned to a fertilizer company.

Water Courses

No watercourses are found on the facility site. The site is located approximately 0.68 miles east of the Jordan River, a flowing watercourse, which drains into the Great Salt Lake.

Surface Drainage Channels

No surface drainage channels are found on site of the facility, nor are any located within 600 feet of the facility site.

Run-on/Run-off Control

The facility maintains a berm surrounding the perimeter of the storage and processing areas to control run-on and run-off. The employee parking and vehicle turnaround areas are covered by asphalt and concrete pavement. The areas surrounding the building are graded to provide drainage away from the building. The waste processing and storage areas are elevated from ground surface to prevent surface water run-on. The facility site is not located in or immediately near drainage channels or drainage paths. The facility will collect and treat all run-off from the active areas of the site that may result from a 25-year storm event, and divert all run-on for the maximum flow of a 25-year storm around the site.

*This is a renewal application for an existing facility. Additional facility technical information was submitted with the original application.

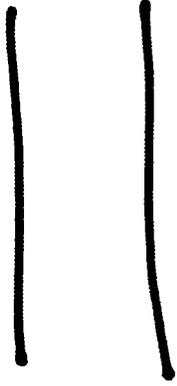
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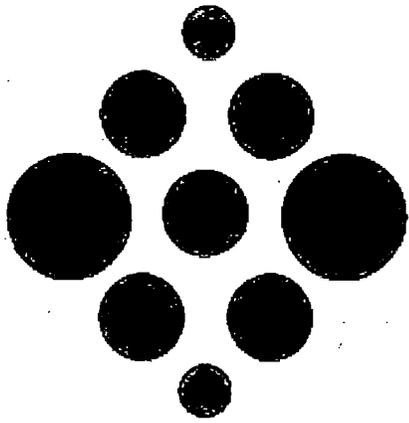
FACILITY GENERAL INFORMATION

10 Ground Water*

One water supply well is located approximately 0.45 miles away. The water right for diversion is assigned to a fertilizer company.

*This is a renewal application for an existing facility. Additional facility technical information was submitted with the original application.





Stericycle®

NORTH SALT LAKE MEDICAL WASTE FACILITY

PLAN OF OPERATION

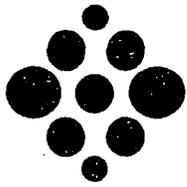
STERICYCLE, INC.
90 North 1100 West
North Salt Lake, UT

Revised: December 16, 2005

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I



Stericycle®

STERICYCLE, INC. – NORTH SALT LAKE, UTAH

**WASTE MANAGEMENT PROCEDURES
SECTION I**

Revision Date: December 16, 2005

**SECTION I: WASTE MANAGEMENT PROCEDURES
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WASTE MANAGEMENT PROCEDURES

1.0 DESCRIPTION OF WASTE

The medical waste processed at the facility is solid waste generated in health care or health care-related facilities, animal care, and research facilities, pharmaceutical manufacturing and distribution facilities. It also includes special waste streams, which were approved by the Division of Solid and Hazardous Waste.

A. Waste Stream Composition:

Typical wastes include paper, plastic, cloth, diagnostic cultures, human and animal tissues generated by hospitals, nursing homes, clinics, and other medical, dental and veterinary facilities; and expired and unused pharmaceuticals.

B. Estimated Annual Quantities:

The current permitted capacity of the incinerator is 2025 pounds per hour averaged. The estimated annual quantity of waste processed at the facility is approximately 8,865 tons per year.

C. Medical Waste:

Regulated medical waste is generally defined as any waste that can cause an infectious disease or that reasonably can be suspected of harboring human pathogenic organisms. It is also known as red bag waste, infectious waste, potentially infectious waste, biomedical waste, and biohazardous waste. Regulated medical waste includes single-use disposable items such as needles, syringes, gloves, and laboratory, surgical, emergency room and other supplies, which have been in contact with blood, blood products, bodily fluids, cultures or stocks of infectious agents.

D. Special wastes as defined by UAC R315-302-2 include:

1. Furniture (c) contaminated with potentially infectious materials
2. Infectious waste (d)
3. Dead animals (f)

3. Dead animals (f)

E. Other Waste Streams:

1. Expired and unused pharmaceuticals
2. Confidential records / proprietary packaging and products
3. Contraband (e.g. police evidence, excluding guns and munitions)
4. Agriculture (APHIS) Waste
5. Outdated, off-specification or unused consumer commodities
6. Recalled or outdated disposable medical equipment or supplies
7. "Municipal solid waste" as defined by UAC R315-302-2 (46) contaminated with potentially infectious materials

Other non-hazardous waste as approved by the Division of Solid and Hazardous Waste.

F. Areas Served by Facility:

This facility serves the greater Salt Lake City as well as the entire state of Utah. As part of Stericycle's business network, this facility also services various markets throughout North America. The primary market served is Stericycle's Western Regional system, including but not limited to the Pacific Coast and Intermountain States.

2.0 WASTE IDENTIFICATION PROCEDURES

Stericycle, Inc. has established itself as this country's leading medical waste management company. Throughout its system, the Company has implemented policies, operating procedures, and safeguards, which ensure appropriate and safe packaging, collection, handling, and destruction of this waste stream. Integral to this system is the Company's policy that waste, which is not suitable for treatment, shall be rejected at the earliest possible point in the collection process.

A. Non-conforming Waste:

Non-conforming waste will not be accepted for treatment at Stericycle, Inc. facilities and includes:

1. Chemical materials which are regulated as hazardous under RCRA or UAC Subsection 19-6-102 (9) and Section R315-2-3;
2. Complete human remains;
3. Compressed gas cylinders and canisters (including aerosol cans)
4. Radioactive materials;
5. Explosive materials;
6. Bulk cytotoxic materials;

B. Generator Responsibility/Hazardous Waste:

The generator is guided by federal and state regulations and bears significant responsibility for waste stream segregation and proper disposal. Generators are advised that the above listed materials are prohibited from inclusion in waste containers. Ongoing training, waste evaluation, and reference materials are available to all customers to ensure the proper identification, segregation, and packaging of authorized waste stored or treated at the facility.

All generators, which dispose waste at the facility, are required to comply with strict segregation, packaging, and sealing standards monitored by Stericycle, Inc. Customers are advised that the above listed materials are prohibited from inclusion in waste containers.

C. Radioactive Material:

All waste is screened for radioactive material prior to the treatment process. It is Stericycle's Policy to prohibit the treatment or disposal of medical waste that also contains regulated sources of radiation. A radiation monitor is installed on the waste conveyor system at the North Salt Lake facility. If radiation is detected at regulated levels, the container is isolated, logged, and procedures for notification of proper authorities and further appropriate handling are initiated.

D. Expired, Unused, and Previously Dispensed Pharmaceuticals:

Acceptance of pharmaceutical waste is governed by the procedures described in Section III *Waste Acceptance Protocol*. These procedures involve certification that the waste does not include RCRA hazardous wastes, TSCA regulated materials or wastes considered hazardous by any other appropriate regulatory agency. On-site verification includes the acceptance of proper shipping documentation.

E. Service Agreement:

Prior to servicing a medical waste generator, a contractual service agreement is signed by an authorized representative of the customer. The terms of the service agreement specifically exclude corrosive, reactive, radioactive, toxic and other hazardous wastes and substances as defined in any applicable federal, state, county, or municipal laws, regulations, and guidelines.

F. Waste Tracking:

Stericycle, Inc. employs its own proprietary bar code identification and tracking system, *Biotrack*, in which each container is labeled with the generator's unique code. At the time of collection, the driver scans the containers to be collected with a handheld computer which prints a receipt indicating the date and time of collection. The receipt is given to the generator. The *Biotrack* document provides the generator with verification of collection and provides Stericycle, Inc. one of the means to track the waste from collection to treatment. Attachment 1 contains examples of tracking documents used by Stericycle. Each month customers are sent an invoice, which summarizes their collections for the month.

G. Waste Screening Procedures and Policies:

In accordance with Federal D.O.T. regulations, drivers do not handle or transport waste that has not been properly segregated, packaged and labeled in approved containers. According to environmental regulations, it is the generator's responsibility to remove any hazardous, radioactive, or non-conforming waste in non-intact packaging. Comprehensive waste screening procedures and guidelines are outlined in Section III-*Waste Acceptance Protocol*.

3.0 WASTE HANDLING AND STORAGE

A. Container Management Area:

1. Waste Receiving/Storage:

Collection and transport vehicles arriving at the facility are directed either to one of the five unloading docks or a holding area. Containers removed from these vehicles are staged for destruction or storage. All waste, which will be destroyed directly or within 24 hours of arrival, will be held in the holding area. Waste that

will not be destroyed within a 24-hour period will be directed to a refrigerated storage trailer.

Good waste storage practice, which affords protection from animal intrusion, does not provide a breeding place or a food source for insect and rodents, and minimized exposure to the public, will be maintained. Any material that emits strong odors shall be stored under refrigeration. Waste stored longer than 7 days shall be refrigerated at 40 F or lower. All waste will be destroyed within 30 days from the day of pickup as listed on the shipping manifest.

Possible disease vectors are further managed through the use of an extermination service on an as needed basis.

2. Floor and Drainage:

All staging and processing floors are constructed of concrete slab pitched to collection sumps to prevent run-off.

3. Routine Decontamination:

Disinfectant and/or degreaser are used to clean and decontaminate the container management area as required to maintain sanitary and clean conditions.

B. Description of Containers:

Containers collected or transported into the facility consist of plastic tubs, cardboard boxes, fiberboard drums, or sharps containers. Containers will be marked appropriately according to all local, state, and federal regulations.

1. Tubs:

Tubs are constructed of heavy plastic with tight-fitting lids. They typically range in size from 5 to 90 gallons capacity or other Stericycle, Inc. approved size of container.

2. Cardboard Boxes:

Cardboard containers typically range in size from less than 1-gallon to 60-gallon capacity, or other Stericycle, Inc. approved size container.

3. Fiberboard Drums:

Disposable drums of various sizes may be used to containerize waste.

4. Sharps Containers:

Disposable sharps containers of various sizes are used to containerize sharps waste.

C. Container Management Practices:

1. Container Flow in Management Area:

Incoming waste containers are removed from vehicles onto the dock allowing adequate aisle space for workers to move about the receiving area.

2. Container Handling:

Boxes and tubs, once loaded onto the conveyor system, are moved and loaded into the incinerator hopper. Tubs are conveyed to the hopper loading area where the lids are manually removed and manually inverted so that the biohazard bags inside fall into the incinerator hopper. The inverted lids and tubs are then placed on a conveyor, which carries them through the tub wash decontamination system.

D. Removal of Liquids:

Removal of liquids necessary due to spills or leakage of medical waste containers is accomplished according to Section VIII-*Spill Prevention Countermeasure and Control Plan* and Section IX-*Contingency Plan*.

E. Waste Transportation:

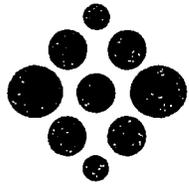
Vehicles used to transport infectious waste shall comply with DOT and applicable local transportation requirements. All drivers shall be trained in and comply with these requirements.

Each vehicle used for transporting infectious waste shall be maintained in a condition such that under conditions normally incident to transportation, there shall be no releases of infectious waste to the environment.

Any vehicle used for transporting infectious waste shall be free from leaks, and all discharge openings shall be securely closed during transportation.

ATTACHMENT 1
TRACKING DOCUMENTS

II



Stericycle®

STERICYCLE, INC. – NORTH SALT LAKE, UTAH

**ASH ANALYSIS AND MANAGEMENT PLAN
SECTION II**

Revision Date: May 12, 2004

**SECTION II: ASH ANALYSIS AND MANAGEMENT PLAN
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STERICYCLE, INC. NORTH SALT LAKE

ASH ANALYSIS AND MANAGEMENT PLAN

1.0 PURPOSE

To ensure the proper management of North Salt Lake Facility's ash waste stream in compliance with Federal and State programs. This policy also contains elements applicable to Waste Analysis as it pertains to Stericycle, Inc. of Utah.

2.0 DEFINITIONS

Bottom Ash refers to the residual waste generated during incineration and collected in the ash quench pit.

DEQ refers to the Utah Department of Environmental Quality, the state agency responsible for enforcing environmental regulations.

EPA refers to the United States Environmental Protection Agency, the Federal agency responsible for enforcing Federal regulations relating to the environment.

Fly Ash refers to the particulate ash removed from the flue gas and collected in the Electro-Static Precipitator.

RCRA empty means that a container has less than one inch of residue remaining in the bottom of the container and that the pressure in the container approaches atmospheric.

Satellite collection site is a site near the point of generation where slowly accumulating hazardous waste can accumulate for longer periods than normal generator requirements (40CFR 262.34 (c)(i) and (c)(ii)).

TCLP means Toxic Characteristic Leaching Protocol, which is used to characterize solid waste under the US hazardous waste regulations 40 CFR 261.

Waste Management Area is the contained area at the North Salt Lake Facility where wastes are stored prior to disposal. The operations department controls the area and the safety department is responsible for inspections and technical assistance.

3.0 SCOPE

This standard shall apply to the North Salt Lake facility so long as it generates bottom ash and/or fly ash.

4.0 RESPONSIBILITIES

Safety Office

Shall maintain a listing of all Treatment, Storage, and Disposal (TSD) facilities and solid waste disposal facilities used by the North Salt Lake Facility.

Shall conduct quarterly inspections to ensure records, storage, etc. are in compliance with RCRA.

Shall train all employees whose jobs involve contact with ash to include but not be limited to handling and disposal of these wastes.

Shall establish an accounting system to track the types, amounts, and hazardous constituents of the ash, as well as the dates they are generated.

Environmental Coordinator

Shall coordinate all waste activities at the North Salt Lake Facility.

Facilities Manager

Shall maintain, at each site, a list of facilities used for Treatment, Storage, and Disposal and waste streams sent to the facility.

Shall maintain documentation of hazardous waste shipments in accordance with the EPA's record-keeping requirements.

Supervisor

Shall ensure that all employees whose jobs involve contact with ash are properly trained in the handling and disposal of these wastes.

HAZARDOUS WASTE MINIMIZATION

Hazardous waste minimization is defined by the United States Environmental Protection Agency (USEPA) as the reduction of the volume or the toxicity of hazardous wastes, through either source reduction or recycling, resulting in the reduction of risks to human health and the environment.

It shall be Stericycle policy to implement an effective waste acceptance protocol, resulting in many benefits to the company, including, but not

limited to:

Elimination of hazardous waste generated reducing waste management and compliance costs.

Minimizing hazards to people.

Minimizing releases to the environment.

5.0 ASH ANALYSIS

Ash generated on-site with the potential to be RCRA regulated shall be characterized to determine whether it is a hazardous waste.

At a minimum, the characterization must include all information needed to safely treat, store, or dispose of the waste.

Ash analysis shall be repeated if there is a change in process affecting the waste stream.

Bottom Ash analysis shall be repeated no later than semi-annually for bottom ash utilizing U.S. EPA Method 1311 for RCRA 8 metals and every five years for the full TCLP analysis for organic constituents.

Ash analysis shall be conducted by a certified laboratory.

6.0 SAMPLE COLLECTION, PRESERVATION, AND HANDLING

All samples shall be collected using an appropriate sampling plan to assure samples are representative. Preservatives shall not be added to samples before extraction. Samples may be refrigerated unless refrigeration results in irreversible physical change to the waste.

Ash sampling plan:

Take a composite bulk sample by collecting ash from four locations at a two-foot depth. The final composite is recommended to be a minimum of 0.5L (may be more when required by the laboratory).

When the waste is to be evaluated for volatile organic analytes, care shall be taken to minimize the loss of volatiles. Samples shall be collected and stored in a manner intended to prevent the loss of volatile organic analytes (e.g., samples should be collected in Teflon-lined septum capped vials and stored at 4 C. Samples should be opened only immediately prior to extraction).

PROCEDURE FOR HANDLING ASH IDENTIFIED AS CHARACTERICTICALLY HAZARDOUS

All required personal protective equipment must be worn. This includes safety glasses, gloves and any PPE required for the specific waste.

Handling:

Ash is to be placed in designated collection containers (One-yard Helios Bags) to await disposal.

Collection containers shall be handled as outlined in the Fugitive Dust Control Plan for the minimization of aerosolized particulate.

Collection containers shall only accumulate in those areas designated as Satellite Accumulation Areas.

When collection containers are full, they are to be sealed and transferred to the Waste Management Area.

Storage:

Collection containers shall be stored in the Waste Management Area.

Collection containers shall be labeled at the time they are placed in the Waste Management Area to include, but not limited to, the date of generation, generator, description of the waste, and the words "HAZARDOUS WASTE".

Hazardous waste shall not be stored in the Waste Management Area for a period greater than 90 days.

Weekly inspections of the Waste Management Area shall be conducted to include, but not be limited to, the length of time waste has been stored, the condition of all containers, the amount of waste stored, and identification of any releases.

Transport/Disposal:

The Safety Office shall maintain a listing of all Treatment, Storage, and Disposal (TSD) facilities used by the North Salt Lake Facility.

TSD facilities receiving waste from Stericycle shall have all the appropriate permits as required by Federal and State rules.

Each shipment of hazardous waste shall be accompanied by a properly filled out and signed Hazardous Waste Manifest, along with the appropriate labeling and placarding, when applicable.

Each manifest shall be tracked during the transport and destruction process and maintained for a period of 3-years.

8.0 REFERENCES

US Code of Federal Regulations, Title 40, Section 261.

US Code of Federal Regulations, Title 40, Section 262.34 (c)(i) and (c)(ii)

III



STERICYCLE, INC. – NORTH SALT LAKE, UTAH

**WASTE ACCEPTANCE PROTOCOL
SECTION III**

Revision Date: December 16, 2005

**SECTION III: WASTE ACCEPTANCE PROTOCOL
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- 2.0 Non-conforming Waste not Accepted by STERICYCLE, INC.
- 3.0 Segregation and Packaging of Waste
- 4.0 Labeling and Marking of Medical Waste Containers
- 5.0 Disposable vs. Reusable Containers – Decontamination
- 6.0 Storage of Medical Waste
- 7.0 Tracking Documents for Medical Waste
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- 9.0 Acceptance of Waste at the Facility
- 10.0 Treatment of Waste
- 11.0 Laws, Regulations and Policies for Medical Waste Disposal

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Received and accepted by _____ Date _____
Signature

Title _____

Customer facility/address _____

STERICYCLE, INC. NORTH SALT LAKE

WASTE ACCEPTANCE PROTOCOL

1.0 WASTE ACCEPTED BY STERICYCLE, INC.

STERICYCLE, INC. accepts those wastes that are generated in the diagnosis, treatment, or immunization of humans or animals or related research, in the production/testing of biological materials (vaccines), and in the preparation and administration of chemotherapy waste. STERICYCLE, INC. acceptance practices are subject to those wastes defined by federal, state and local laws as medical, biohazardous, biomedical, infectious or other as defined below:

1.1 Biohazardous Waste Including Pathological Waste:

1.2.1 Laboratory waste includes:

- Cultures – medical/pathological
- Cultures/stocks of infectious agents – research and industrial
- Vaccines and related waste generated in the production thereof
- Microbiologic specimens and related waste

1.2.2 Surgical specimens/tissues, contaminated animal parts, tissues, carcasses or body fluids (pathological waste exclusive of preservative agents)

1.2.3 Fluid blood/blood products, containers/equipment and exudates, secretions, body fluids including, but not limited to, isolation waste

1.2 Sharps Waste Including, But Not Limited To:

1.2.4 Needles, syringes, blades, needles with attached tubing, disposable surgical instruments

1.2.5 Medical/laboratory glassware including slides, pipettes, blood tubes, blood vials, contaminated broken glass

1.3 Other medical waste as required by the infection control staff, physician, veterinarian or local health officer to be isolated and handled as regulated medical waste.

1.4 Trace-Contaminated Chemotherapy (Antineoplastic/Cytotoxic Drugs) Waste:

1.4.1 Gowns, gloves, masks, barriers, IV tubing, empty bags/bottles, needles and syringes, empty drug vials, spill kits, and other items generated in the preparation and administration of antineoplastic drugs

1.5 Other Wastes:

1.5.1 Expired and unused pharmaceuticals:

Where prior authorization or certification has been received from STERICYCLE, INC., pharmaceutical waste may be accepted for destruction. Pharmaceuticals,

which may be, considered hazardous waste according to Federal or State regulations cannot be accepted for treatment.

- 1.5.2 Confidential records / proprietary packaging and products
- 1.5.3 Contraband (e.g. police evidence)
- 1.5.4 Agriculture (APHIS) Waste
- 1.5.5 Outdated, off-specification or unused consumer commodities
- 1.5.6 Recalled or outdated disposable medical equipment or supplies
- 1.5.7 "Municipal solid waste" as defined by UAC R315-302-2 (46) contaminated with potentially infectious materials
- 1.5.8 Other non-hazardous waste as approved by the Division of Solid and Hazardous Waste.

2.0 NON-CONFORMING WASTE NOT ACCEPTED BY STERICYCLE, INC.

2.1 Radioactive Waste:

- 2.1.1 STERICYCLE, INC. will not accept any low-level radioactive waste. Prior to treatment, all containers will be inspected by means of a radiation monitor. Any container reflecting a level above twice background (50 microRems) will be rejected.

2.2 Hazardous Waste:

- 2.2.1 STERICYCLE, INC. will not accept any waste regulated as a hazardous waste under Utah Administrative Code (UAC) R315-301-2 (30).

2.3 Bulk Chemotherapy Waste (Antineoplastic/Cytotoxic Drugs):

- 2.3.1 Full or partially full (.V. bottles/bags and vials of chemotherapy agents constitute a hazardous waste and must be managed accordingly by a licensed hazardous waste contractor. STERICYCLE, INC. will not accept any full chemotherapy drug vials. It is recommended that such agents be returned to the pharmaceutical company for disposal.
- 2.3.2 STERICYCLE, INC. will accept sharps and I.V. tubing and bags/bottles which are being discarded and are considered incidental to preparation and administration of the drugs. Intravenous tubing, bags, bottles, vials and syringes used in chemotherapy preparation and administration must be "empty", containing only residual amounts of antineoplastic drugs. Refer to your state regulations for the appropriate definition of "empty".

2.4 Complete Human Remains, Cadavers, and Fetal Remains:

2.4.1 STERICYCLE, INC. policy is that human remains and cadavers be segregated from the medical waste stream and buried or cremated. STERICYCLE, INC. will not accept these materials.

2.4.2 STERICYCLE, INC. will not accept recognizable fetal remains. STERICYCLE, INC. can provide information, which may assist the customer in appropriate disposal.

2.5 Compressed Gas Cylinders/Canisters, and Aerosol Cans

2.6 Improperly Packaged, Leaking or Damaged Containers.

3.0 SEGREGATION AND PACKAGING OF WASTE

3.1 Biohazardous Waste:

3.1.1 Waste materials must be segregated at the point of origin and placed in at least one red biohazard bag which is impervious to moisture and of sufficient strength to preclude ripping, tearing or bursting under normal waste handling conditions. Bags must be tied, or otherwise secured, to prevent leakage or expulsion of contents. (Davis County and Salt Lake County require biohazard bags be a minimum of 3 ml in thickness)

3.1.2 The containment of waste in "autoclavable" bags is acceptable but not required for STERICYCLE, INC. processing. If used these bags must be red in color, or clear with a red bag inside, and otherwise in compliance with federal, state, and local requirements.

3.2 Sharps Waste – Needles, Blades, Syringes, Broken Medical Glassware:

3.2.1 These wastes must be segregated at the point of use and placed in rigid, puncture-resistant containers which when sealed are leak resistant and cannot easily be opened.

3.2.2 Care should be taken not to overfill sharps containers in order to avoid associated hazards.

3.3 Body Fluids, Suctioned Fluids and Other Non-Chemical Fluids:

3.3.1 Any volume of fluids, which are not absorbed within other waste materials such as sponges or dressings, must be within leak-resistant, break-resistant containers with tight lids or stoppers to prevent leakage.

3.3.2 The discharge of liquid and semi-liquid wastes other than hazardous waste, laboratory waste or microbiological specimens to a public sewage system is acceptable if performed in a manner, which does not pose an occupational hazard per state, local sewer district, and OSHA standards.

3.4 Containment of Biohazardous and Sharps Waste Prior to STERICYCLE, INC. Collection:

3.4.1 Medical waste contained as described in 3.1-3.3 must then be placed by the customer facility into properly-lidded and secured STERICYCLE, INC. cardboard cartons, plastic tubs or fiberboard drums for transport off-site, depending upon the types of waste and specific requirements of the STERICYCLE, INC. district providing service. At a minimum, all medical waste must be secured in at least one red biohazard bag or liner prior to placement in the carton, drum or tub. Sharps containers may be placed into cartons, drums or tubs along with bagged waste, but need not be red-bagged.

3.5 Segregation and Containment for Specific Treatment Requirements:

3.5.1 Chemotherapy waste and pathological waste (human organs, body parts and surgical specimens) and contaminated animals parts/tissues and carcasses require incineration, whereas other biohazardous waste/sharps waste are amenable to either steam autoclave processing or incineration.

3.5.2 Pathological waste and chemotherapy waste must be segregated and packaged into STERICYCLE, INC. designated containers, separate from other biohazardous waste and sharps waste, in order to assure appropriate treatment methods for specific waste types.

3.5.2.1 In order to insure safe handling, provision of proper treatment/incineration and appropriate cleanup techniques in the event of a spill, STERICYCLE, INC. requires that all chemotherapy waste be segregated from medical waste and labeled as such.

3.5.2.2 Since pathological waste must be incinerated, STERICYCLE, INC. requires that customers use containers, which are identified as such and are provided specifically for this type of waste. It is necessary for pathological waste to be segregated from any preservative liquids prior to being packaged for STERICYCLE, INC. collection.

3.6 International Waste:

3.6.1 Shipyard and airline waste must be secured in trash bags and placed into strong cardboard boxes or STERICYCLE, INC. plastic tubs prior to transport as directed by local port authority compliance agreement. Leaking or damaged containers will not be accepted.

3.7 Medical Records:

3.7.1 Medical Records must be contained in sturdy, well secured/taped cardboard boxes prior to collection for shredding/destruction.

4.0 LABELING AND MARKING OF MEDICAL WASTE BAGS AND CONTAINERS

4.0 Biohazard Bags:

- 4.0.1 Bags must be red in color and labeled with the words "*INFECTIOUS WASTE*" or with the international biohazard symbol and the word "*BIOHAZARD*"

4.1 Sharps Containers:

- 4.1.1 Containers must have labels affixed that are predominantly orange or orange-red in color with the international biohazard symbol and the word "*BIOHAZARD*" in a contrasting color.

4.2 Secondary Containers:

- 4.2.1 Whether containers are disposable cartons, fiber drums, sharps containers or reusable STERICYCLE, INC. plastic tubs, they will designate the type of waste which is to be placed within and be labeled as required by the State of Utah, Davis County Health Department, and OSHA ("*BIOHAZARD*", universal biohazard symbol, "*SHARPS WASTE*" *CHEMOTHERAPY*", etc.)
- 4.2.2 STERICYCLE, INC. BIOTRACK™ bar codes on each container provide for the identification, tracking and proper treatment of medical waste shipped off-site by each facility serviced by STERICYCLE, INC.

5.0 DISPOSABLE vs. REUSABLE WASTE CONTAINERS – DECONTAMINATION

5.1 Disposable Boxes/Fiber Drums:

- 5.1.1 These containers are incinerated or autoclaved along with wastes contained within. The treatment process is dictated by the type of waste (pathology/chemotherapy vs. biohazardous/sharps wastes).

5.2 Disposable Sharps Containers:

- 5.2.1 All containers are subjected to the same treatment process as the sharps wastes within the container.

5.3 Reusable STERICYCLE, INC. Plastic Tub and Lids:

- 5.3.1 Used STERICYCLE, INC. containers are decontaminated by exposure to a tub wash process utilizing approved disinfectants and hot water at the STERICYCLE, INC. facility prior to delivery to customer facilities.

6.0 STORAGE OF MEDICAL WASTE

6.1 Dedicated Storage Enclosure – Customer Site:

- 6.1.1 Medical waste to be collected by STERICYCLE, INC. shall be maintained in an enclosure or designated accumulation area, which is secured, to deny access to unauthorized persons marked with warning signs, and provides protection from animals, rodents, insects and natural elements.
- 6.1.2 Medical waste to be stored on-site will be held in accordance with local regulations, including refrigeration where required, prior to treatment by

STERICYCLE, INC. (Davis County requires 32°F after 7 days) for non-sharps waste.

- 6.1.3 Waste to be transported off-site shall not be subjected to trash chutes, compaction or grinding prior to collection/treatment by STERICYCLE, INC.

7.0 TRACKING DOCUMENTS FOR MEDICAL WASTE

7.1 STERICYCLE, INC. "BIOTRACK™" System for Tracking Waste:

- 7.1.1 All waste collected by a medical waste transporter from the generating facility/person for treatment must be accompanied by a tracking document.
- 7.1.2 STERICYCLE, INC. has a unique approach to the tracking process known as "BIOTRACK™". Barcodes and optical scanners or "readers" record pertinent data required for tracking and billing.
- 7.1.3 The tracking document must meet Davis County Health Department requirements, which include, but are not limited to:
 - 7.1.3.1 Name, address, telephone number of medical waste hauler
 - 7.1.3.2 Type and quantity of medical waste transported
 - 7.1.3.3 Generator name, addresses and phone number
 - 7.1.3.4 Name, address, telephone number of permitted medical waste treatment facility
 - 7.1.3.5 Authorized signature at the permitted treatment facility receiving the waste (treatment facility copy only)
- 7.1.4 A signed copy of the tracking document(s) will be provided to the customer at the time of waste collection or acceptance.
- 7.1.5 The tracking document(s) will be in the custody of the STERICYCLE, INC. driver hauling the medical waste to its treatment destination at all times.
- 7.1.6 Documentation will be mailed to collection customers by STERICYCLE, INC. on a monthly basis detailing receipt/treatment of medical waste collected by STERICYCLE, INC.
- 7.1.7 STERICYCLE, INC. will maintain signed copies of all tracking documents for a minimum of 3 years.

8.0 TRANSPORTATION OF MEDICAL WASTE

8.1 Permitted Vehicles:

- 8.1.1 STERICYCLE, INC. operates all its vehicles with Infectious Waste Transporter Permits for medical waste transport to permitted treatment, management facilities or transfer stations.

8.2 Drivers' Responsibility/Authority:

- 8.2.1 STERICYCLE, INC. drivers are authorized to reject any containers which do not meet specifications. Odor, leakage, bulging, damaged containers, improper packaging or securing of containers, and improper segregation are some of the causes for rejection of medical waste.
- 8.2.2 Containers may be subject to an off-specification charge for repackaging and special handling, if such is required.

8.3 Emergency Spill Response:

- 8.3.1 STERICYCLE, INC. vehicles with Infectious Waste Transporter Permits are equipped with emergency spill kits, and drivers are trained in emergency spill response procedures.

8.4 Transportation Compliance:

- 8.4.1 All transportation practices are policies for medical waste provided by STERICYCLE, INC. comply with Federal DOT and Utah DMV laws and regulations.

9.0 ACCEPTANCE OF WASTE AT THE FACILITY

9.1 Employee Authorization:

- 9.1.1 STERICYCLE, INC. facility employees are authorized to reject any containers that do not meet specifications. Odors, leakage, bulging, damaged containers, improper packaging or securing of containers, and improper segregation are some of the causes for rejection of medical waste.
- 9.1.2 Containers may be subject to an off-specification charge for repackaging and special handling, if such is required.

10.0 TREATMENT OF WASTE

10.1 Treatment Facilities:

- 10.1.1 All waste collected by STERICYCLE, INC. will be transported to a STERICYCLE, INC. owned/operated facility or STERICYCLE, INC. contracted facility for treatment/disposal.
- 10.1.2 Treatment facilities operate in compliance with applicable federal, state and local laws/regulations and hold all required permits and licenses.

10.2 Treatment Methods/Parameters:

- 10.2.1 Pathological waste (human and contaminated animal body parts, organs and tissue specimens) will be incinerated.
- 10.2.2 Trace chemotherapy waste will be incinerated.

- 10.2.3 Biohazardous waste and sharps waste, excluding trace chemotherapy and pathological wastes, will be subjected to incineration or steam autoclave processing.
- 10.2.4 International waste will be subjected to incineration or steam autoclave processing per compliance agreement with the local port authority or U.S.D.A.
- 10.2.5 Medical records will be destroyed by either incineration or shredding.

11 MEDICAL WASTE DISPOSAL LAWS, REGULATIONS AND POLICIES

11.1 State of Utah Regulations:

- 11.1.1 The Utah Department of Environmental Quality, Division of Solid and Hazardous Waste has adopted Solid Waste Permitting and Management Rules R315-301-13, which include infectious Waste Treatment and Disposal Requirements.

11.2 Local Authorities:

- 11.2.1 In addition to the State of Utah regulations, the following counties have adopted rules for the segregation, packaging, storage, transportation, treatment and disposal of infectious/medical/ biohazardous waste:

- 11.2.1.1 Davis County

Davis County Infectious Waste Regulations adopted 10/2/90 by the Davis County Board of Health.

- 11.2.1.2 Salt Lake County

Health Regulations #1, amended 10/7/89 by the Salt Lake City-County Board of Health

- 11.2.1.3 Weber-Morgan Counties

Infectious Waste Regulations adopted 11/23/92 by the Weber-Morgan District Board of Health.

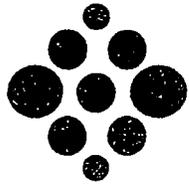
11.3 Occupational Standards for Management of "*Blood and Potentially Infectious Materials*" – OSHA:

- 11.3.1 OSHA also regulates "*blood and potentially infectious materials*" and the handling, containment, labeling, and storage of "*regulated waste*" through the "Final Rule on Occupational Exposure to Bloodborne Pathogens." (OSHA-1992) The Rule requires the utilization of "*Universal Precautions*" (CDC-1989 in managing all blood, certain body fluids and contaminated materials as "*potentially infectious*". The Bloodborne Pathogens Rule includes specific requirements pertaining to personal protective equipment (PPE), housekeeping, exposure control, engineering and work practice controls, record keeping, signs and labels, training, and hepatitis B vaccination. STERICYCLE, INC. is

governed by this regulation and is in full compliance under a comprehensive Exposure Control Program developed specifically for its medical waste drivers and operators.

- 11.3.2 "*Potentially infectious materials*" include human blood/blood components and products, as well as semen, vaginal secretions, cerebrospinal, pleural, pericardial, peritoneal and amniotic fluids, saliva in dental procedures, body fluids visibly contaminated with blood, and all body fluids in situations where it is impossible to differentiate between fluids.

IV



Stericycle®

STERICYCLE, INC. – NORTH SALT LAKE, UTAH

**INSPECTION PROCEDURES
SECTION IV**

Revision Date: May 12, 2004

SECTION IV: INSPECTION PROCEDURES
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STERICYCLE, INC. NORTH SALT LAKE

INSPECTION PROCEDURES

1.0 Introduction

The inspections outlined in this Section are the minimum required. All inspections required by this plan will be documented on forms and maintained at the facility. The forms included in this Attachment are only examples. The list of all required inspection items, frequencies and equipment/area inspected is included as an Inspection Matrix. Although the format of the inspection forms may change, all items in the Inspection Matrix will be included on the forms.

This Inspection Attachment addresses those areas that store and or treat medical waste. It addresses mainly the Process Area and Air Pollution Control equipment. It also includes inspection items that pertain to the Stericycle facility's ability to respond quickly to a spill, fire, explosion and/or natural disaster.

All inspections are documented and maintained at the facility for a minimum of five years. All inspection forms will note the day, the inspector's name, the time of the inspection, any deficiencies found or corrective action taken and the work order number indicating that a repair request has been submitted to the maintenance department. If a repair is immediately correctable (such as by replacing a sign, or getting another fire extinguisher) the corrective action will be noted on the form rather than initiating a work order. All items on the inspection logs will be completed (i.e. no blanks). If an item is not applicable, it will be noted on the form along with the reason. Actual gauge readings from equipment, where gauges are present, will be noted on the inspection forms.

2.0 Frequency of Inspections

The following specifies the minimum frequency of inspection for each required item.

2.1 Daily

- Inspect loading and unloading areas.
- Inspect above ground piping for leaks.
- Inspect tank systems for leaks, leaking pumps, leaking piping, equipment operation, indications of leaks or spills, and secondary containment integrity.
- Visually inspect incinerator-monitoring instrumentation for out of tolerance and/or recorded operational data.
- Inspect Continuous Emissions Monitoring System.
- Inspect temperature settings of refrigerated trailers when in use.
- Inspect mobile equipment (i.e., forklifts, yard dog etc.)

2.2 Weekly

- Perform a system walk down, including but not limited to, check operation of the carbon injection system, check operation of the sodium hydroxide and liquor circulation system, and check operation of the air pollution control system.
- Inspect air compressor and condensation traps.
- Inspect emergency generator.
- Inspect emergency eyewash and showers.
- Inspect containers and containment systems.

2.3 Monthly

- Inspect and clean all thermocouples.
- Inspect carbon feeder, blower, belts, bearings, and discharge pipes.
- Inspect carbon level indicators.
- Inspect sodium hydroxide pumping system.
- Inspect absorber liquor circulation system.
- Inspect gas cooler spray nozzles.
- Inspect gas cooler and wet gas absorber water pumps.
- Inspect electric static precipitator system.
- Inspect air pollution control system.
- Inspect operation of the emergency bypass stack.
- Clean and lubricate all limit switches.
- Check radiation-monitoring system.
- Inspect Fire Extinguishers.

2.4 Quarterly

- Inspect perimeter lights, notice signs, and security fence.
- Inspect spill kits.
- Check calibration and operation of the HMIWI chart recorder.
- Check calibration and operation of the secondary chamber temperature thermocouple.
- Check calibration and operation of the reactor inlet temperature thermocouple.
- Check calibration and operation of the carbon feed and DAS.
- Check calibration and operation of the absorber liquor circulation feed and DAS.
- Check calibration and operation of the absorber pH meter and DAS.
- Check emergency by pass stack cap DAS signal.
- Check calibration and operation of the scale system.

2.5 Annual

- Check calibration and operation of the secondary chamber temperature controller and DAS.
- Check calibration and operation of the reactor inlet controller and DAS.
- Inspect wet gas absorber spray nozzles.

- Check calibration and operation of the radiation-monitoring system.
- Check facility emergency signals by conducting an evacuation drill.

3.0 Areas of Inspection

The personnel conducting the inspections will be trained on the proper operation of the equipment they will be observing. Written instructions describing what should be inspected, the acceptable criteria, and the proper notation to be placed on the log for each item will be used by the inspectors. These instructions may be specified on the form itself, or may be specified in instructions, which will accompany the applicable log.

The following outlines some of the items that will be checked during the inspections.

3.1 Containers

Drums and containers are inspected for the following:

- Proper labeling.
- Closures.
- Cracks, tears and/or leaks.
- Stack stability.
- Spills.

3.2 Tank

The tank used to store sodium hydroxide is inspected once per day to detect corrosion or erosion and leaking of fixtures or seams. Should the tank be found defective, it will be taken out of service and repaired and/or replaced. Defective is defined as a leak, bulge, or a split seam.

3.3 Incinerator

The inspection schedules for the incinerator are included in this section. The waste feed flow is recorded continuously as are the combustion parameters that are required for compliance with the Title V air permit.

Daily inspections at the incinerator will be conducted for all equipment associated with the incinerator train; material feed systems, process and residue handling systems. The inspector is to check for leaks, spills, fugitive emissions, or any irregularity.

3.4 Instruments

A certified Incinerator Operator signs the instrument checklist daily. All of the instruments critical to the monitoring of the incinerator and the air pollution control equipment are included on the checklist.

Inspectors will check the following instrument indicators:

- Thermocouple signals
- Flame sensors
- Magnetic flow meter signals
- pH probe signal
- Electrostatic precipitator (ESP) indicator

Troubleshooting, when necessary, will be based on the instruments indicator.

3.5 Sumps and Secondary Containment Areas

Sumps are inspected daily to determine if they contain liquids or other material. The sumps are located under the incinerator, under the ash quench tank and in the storage area.

If a sump contains any material, it will be cleaned within 24 hours of discovering the contents. This means that all material, liquid and/or solid, will be removed. However, solid material that accumulates in the sump located in the storage area from the routine handling of containers will be noted on the daily inspection forms but may be removed weekly.

3.6 Other Areas

Safety and security inspections are made of the fence, locks, fire extinguishers, alarms, emergency eyewashes and showers. The emergency generator is also inspected and periodically manually operated.

There are three spill kits located throughout the plant. A spill kit to manage potentially infectious spills is located in the incinerator process area. A spill kit to manage sodium hydroxide solution spills is located in the air pollution control area. A spill kit to manage the spill of “fly ash”, which is a hazardous waste, is located in the storage area. Each kit is inspected for complete inventory.

4.0 Corrective Action

All items on the inspection logs will have a notation, regarding their status (i.e. a blank will not be used to indicate an acceptable or unchanged status). Immediate corrective actions performed in the field will be documented on the inspection log. A work order number will be referenced if additional work needs to be done. All work orders will clearly indicate the work that was performed, who performed the work, and the date of completion.

All corrective actions will be completed in a timely manner. Until a problem is corrected, the equipment will be taken out-of-service. This will be noted on the inspection logs.

5.0 Inspection Matrix

The matrix contained in this section outlines items to be inspected, frequency of inspection, and an abridged description of outcomes to be indicated.

INSPECTION

MINIMUM FREQUENCY - DAILY	
Inspection Item	Suggested Inspection Outcomes to be Indicated
Loaded refrigerated trailers	Operable, correct temperature
North loading/unloading area	Leaks, spills, visually free of cracks, gaps, damage
South loading/unloading area	Leaks, spills, visually free of cracks, gaps, damage
Sump under incinerator	Clean and free of material, visually free of cracks, gaps, damage
Sump under bottom ash quench tank	Clean and free of material, visually free of cracks, gaps, damage
Evaporative Cooler - piping	Leaks, spills, damage
Absorber Pump	Leaks, spills, damage
Absorber piping	Leaks, spills, damage
Caustic storage tank	Leaks, spills, visually free of cracks, gaps, damage
Caustic storage tank containment	Clean and free of material, visually free of cracks, gaps, damage
Sump in storage area	Clean and free of material, visually free of cracks, gaps, damage
Incinerator Monitoring Instrumentation	
Secondary Combustion Chamber Temperature	Good working order, out of tolerance, recording properly
Primary Combustion Chamber Temperature	Good working order, out of tolerance, recording properly
Boiler Outlet Temperature	Good working order, out of tolerance, recording properly
Evaporative Cooler Outlet Temperature	Good working order, out of tolerance, recording properly
Electrostatic Precipitator Outlet Temperature	Good working order, out of tolerance, recording properly
Absorber Temperature	Good working order, out of tolerance, recording properly
Absorber Flow Rate	Good working order, out of tolerance, recording properly
Absorber pH	Good working order, out of tolerance, recording properly
Carbon Injection Screw Speed	Good working order, out of tolerance, recording properly
Boiler Steam Pressure	Good working order, out of tolerance, recording properly
Condenser Return Temperature	Good working order, out of tolerance, recording properly
Stack Cap Position Indicator (Open/Closed)	Good working order, out of tolerance, recording properly
Incinerator Temperature Chart Recorder	Good working order, out of tolerance, recording properly
Electrostatic Precipitator Power	Good working order, out of tolerance, recording properly
Continuous Emissions Monitoring System	
Secondary Combustion Chamber Temperature	Good working order, out of tolerance, recording properly
Reactor Inlet Temperature	Good working order, out of tolerance, recording properly
Carbon Injection Feed Rate (lb/HR)	Good working order, out of tolerance, recording properly
Absorber Flow Rate (gpm)	Good working order, out of tolerance, recording properly
Absorber pH	Good working order, out of tolerance, recording properly
Charge Rate (lb/HR)	Good working order, out of tolerance, recording properly
Bypass Stack Position	Good working order, out of tolerance, recording properly

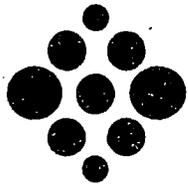
MINIMUM FREQUENCY - WEEKLY	
Inspection Item	Suggested Inspection Outcomes to be Indicated
System Walkdown	
Process Area - Containers	Closed, bulging, leaking, proper placement, labels
Waste Feed Hydraulic System	Pump, hoses, cylinders, and reservoir - no leaks, spills, or damage
Primary Combustion Chamber Burner #1	Operable, proper ignition
Primary Combustion Chamber Burner #2	Operable, proper ignition
Secondary Combustion Chamber Burner	Operable, proper ignition
Ash Hoe Hydraulic System	Pump, hoses, cylinders, and reservoir - no leaks, spills, or damage
Boiler Water Feed Pump #1	Operable, leaks, spills, damage
Boiler Water Feed Pump #2	Operable, leaks, spills, damage
Boiler Water Feed Regulator	Operable
Evaporative Cooler Water Feed Regulator	Operable
Evaporative Cooler Air Regulator	Operable
Carbon Injection Auger Feed	Operable
Carbon Injection Blower	Operable
Electric Static Precipitator Vibrators and Rappers	Operable
ID Fan	Check for Vibration
Sodium Hydroxide Feed Pump	Operable, leaks, spills, damage
Absorber Circulation System	Operable, leaks, spills, damage
Storage Area - Containers	Closed, bulging, leaking, proper placement, labels
Air Compressor	
Check and Drain all Condensate Traps	Operable, drain moisture
Check and Drain Air Dryer and Tank	Operable, drain moisture
Inspect Radiator	Operable - No debris, correct temperature
Oil	Check level and cleanliness
Emergency Equipment	
Emergency Generator	Start generator, operable, check oil & gas
Eyewashes	Operable
Showers	Operable

MINIMUM FREQUENCY - MONTHLY	
Inspection Item	Suggested Inspection Outcomes to be Indicated
Thermocouples	
Primary Combustion Chamber	Operable, clean
Secondary Combustion Chamber	Operable, clean
Boiler Outlet	Operable, clean
Condenser Return	Operable, clean
Reactor Inlet	Operable, clean
Precipitator Outlet	Operable, clean
Wet Gas Absorber	Operable, clean
Carbon Feed System	
Blower	Operable
Belts	Operable, visually free of cracks, damage
Bearings	Operable, visually free of cracks, damage
Discharge Pipe	Operable, No debris or blockage, damage
Level Indicator	Operable
Absorber Liquor Circulation System	
Sodium Hydroxide Feed Pump	Operable, inspect and clean
Absorber Feed pump	Operable, inspect and clean
Absorber pH Probe	Operable, inspect and clean
Electric Static Precipitator (ESP)	
Transformer / Rectifier	Inspect and clean
Limit Switches	
Waste Feed System	Clean and Lubricate
Charge Door	Clean and Lubricate
Emergency Bypass Stack	Clean and Lubricate
Ash Hoe System	Clean and Lubricate
Other	
Emergency Bypass Stack	Operable
Evaporative Cooler Spray Nozzle	Operable, inspect and clean
Radiation Monitoring System	Operable
Fire Extinguishers	Tagged, charged, in-place, damage

MINIMUM FREQUENCY - QUARTERLY	
Inspection Item	Suggested Inspection Outcomes to be Indicated
Safety and Security	
Wall	All gates closed and locked, no breach in exterior wall that would allow unauthorized entry
Warning Signs	Legible, visible and secured
Perimeter Lighting	All lights working
Spill Kits	Inspect and restore if necessary
Instrumentation	
HMI/VI Chart Recorder	Operable, calibrate
Secondary Combustion Chamber Thermocouple	Operable, calibrate
Reactor Inlet Thermocouple	Operable, calibrate
Carbon Feed System	Operable, calibrate
Absorber Liquor Circulation System	Operable, calibrate
Absorber pH	Operable, calibrate
Emergency Bypass Stack	Check Data Acquisition System (DAS) Signal
Weight Scale System	Check Data Acquisition System (DAS) Signal

MINIMUM FREQUENCY - ANNUAL	
Inspection Item	Suggested Inspection Outcomes to be Indicated
Secondary Chamber Temperature Controller	Operable, calibrate
Reactor Inlet Controller	Operable, calibrate
Wet Gas Absorber Spray Nozzles	Inspect and clean
Radiation Monitoring System	Operable, calibrate
Evacuation Drill	Check for proper response

V



Stericycle®

STERICYCLE, INC. – NORTH SALT LAKE, UTAH

**PERSONELL TRAINING
SECTION V**

Revision Date: May 12, 2004

**SECTION V: PERSONELL TRAINING
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PERSONNEL TRAINING

1.0 Introduction

Training is provided for all employees in four programs: Orientation, Core Operations, Job Specific Training, and ongoing Staff Development. Each program covers topics such as safety, personal protective equipment, environmental awareness, operations, regulatory issues, etc. Both classroom and on-the-job training are provided.

Until an employee is a qualified duty area operator, he/she must work under the supervision of a qualified area operator. All employees must successfully complete the courses in Table 1 prior to working unsupervised in the job title indicated. Each shift lead is responsible for the training and qualification of the individuals reporting to him/her. Overall coordination of the training program is the responsibility of the Area Manager of Environmental Safety and Health.

2.0 Outline of Training Program

2.0.1 Stericycle Personnel

All Stericycle, Inc. of Utah personnel will receive training as noted in Table 1. Non-Stericycle, personnel assigned to a Stericycle manager to work under his/her direct supervision (temporary employees), will receive the same training as for Stericycle personnel. The required training will be conducted in the timeframes indicated in Table 1.

2.0.2 Non-Stericycle Personnel

Non-Stericycle personnel (contractors, vendors) will be required to receive training consistent with their purpose at the site. The minimum training required for each person will be determined on a case-by-case basis. At a minimum, all contractors, visitors, and other non-Stericycle personnel will be required to receive basic orientation on the site, potential hazards and safety precautions, and evacuation procedures, prior to entering the site. This will be accomplished with a brief orientation. The Environmental, Safety, and Health Office will maintain documentation of the orientation.

2.1 Refresher Training

Some courses require an annual or triennial refresher course as described in Table 1. Annual refresher courses must be taken in the same quarter of the following year of the initial training. That is, if the initial training was January 15, then the refresher training must be taken no later than the end of the first quarter.

2.2 Personnel Training Records

Training records will be maintained at the facility and with Stericycle's centralized data management system.

Individual employee training records may include:

- Attendance records of training sessions
- Qualification examinations
- Training received (Summary with title of course and date)
- Previous training (education and/or certifications)

2.3 Training Coordinator

The training coordinator for the Stericycle, Inc. of Utah facility is the Area Manager of Environmental, Safety, and Health, who reports to the Area Vice President and District Manager.

2.4 Training for Emergency Response

The contingency plan is the basis for emergency response training and is coordinated by the Area Manager of Environmental, Safety, and Health.

2.5 Training Documentation

Training of Stericycle personnel will primarily be documented on an acknowledgement form. Other forms of documentation may be used (e.g., certificates of completion, examinations, etc.) Each employee has a training file maintained by the Environmental, Safety, and Health Department, and by Stericycle's centralized data management system. Either source can be used for evidence of training. Training records of current personnel must be kept until closure of the facility; training records on former employees must be kept for at least three years from the date the employee last worked at the facility.

To ensure an effective training program, exams or other measures of competency may be used. If a person fails the exams or otherwise does not meet the minimum requirements of the training course, additional training will be required before the person is considered to have completed the course.

Training for non-Stericycle personnel will be documented on an acknowledgement form and maintained in the Environmental, Safety, and Health Office.

3.0 Job Titles and Duties

The job titles are listed in Table 1. These job titles correlate to job descriptions which are maintained at the facility. A current organization chart is also maintained at the facility.

Duty areas such as, material handlers, incinerator operators, and sanitizers further classify plant personnel. The plant shift lead determines the daily duty roster in his/her area.

Incinerator operators will receive 24 hours of initial training and 8 hours of refresher training as required for Hospital/Medical/Infectious Waste Incinerators.

3.1 Relevance of Training to Job Position

All employees receive general employee training designed to focus on the overall purpose of the Stericycle, Inc. of Utah facility and collection practices. Employees with specific assignments receive training unique to their area of responsibility. No person may work unsupervised without having completed the associated required training. Cross training is available to enhance career advancement and understanding of the entire incineration system.

Courses described in this section are related to safety and waste handling and are offered to promote compliance with regulations and to aid in loss-time prevention. Annually, the training program will be reviewed to determine their relevancy and quality. Adjustments will be made as warranted.

TABLE 1 – LIST OF COURSES

(Unless noted, all topics are completed prior to an employee beginning work and annually thereafter.)

TRAINING TOPIC	Driver	Trans Manager	Plant/ Operator/ Lead	Plant Manager	Maintenance Technician
Access to Exposure and Medical Records	X	X	X	X	X
Accident and Injury Reporting	X	X	X	X	X
Backing Procedures	X	X			
Bloodborne Pathogens	X	X	X	X	X
DOT Alcohol/Controlled Substance Abuse	X	X			
DOT Hazardous Materials**	X	X	X	X	X
Emergency Action Plan	X	X	X	X	X
Eye Wash and Emergency Shower			X	X	X
Fire Extinguishers	X	X	X	X	X
Forklift Training and Certification*	1	1	1	1	1
Hand and Power Tools*					X
Hazard Communication	X	X	X	X	X
Hazardous Waste Management			4	4	4
Hours of Service	X	X			
Incinerator Operator			4	4	4
Ladder Use and Inspection			X	X	X
Lockout / Tagout – Affected	X	X	X	X	2
Machine Guarding*					X
Permit Required Confined Spaces – Affected	X	X	X	X	3
Personal Protective Equipment – PPE	X	X	X	X	X
Proper Lifting	X	X	X	X	X
Radiation Training	X	X	X	X	X
Respiratory Protection	4	4	4	4	4
Slip, Trip and Fall	X	X	X	X	X
Spill Response	X	X	X	X	X
Tub Wash Water Training			X	X	X
Vehicle Condition Reports	X	X			
Waste Acceptance Protocol	X	X	X	X	

* Complete Training Within 30 Days of Date of Hire

** Complete Training Within 90 Days of Date of Hire

1 Forklift Training must be completed within 30 Days of Date of Hire for required personnel and prior to driving, Refresher Training will be conducted triennially

2 Lockout / Tagout – Authorized is required within 10 days of Date of Hire for required personnel

3 Permit Required Confined Space – Authorized is required 10 Days of Date of Hire for required personnel

4 Where applicable

V I



STERICYCLE, INC. – NORTH SALT LAKE, UTAH

**FACILITY SECURITY
SECTION VI**

Revision Date: May 12, 2004

**SECTION VI: FACILITY SECURITY
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STERICYCLE, INC. NORTH SALT LAKE

FACILITY SECURITY

1.0 24-Hour Surveillance System

The Stericycle, Inc of Utah facility is occupied 24 hours per day. The facility is monitored using twelve security cameras that log digital data 24 hours per day 7 days per week.

2.0 Barrier

The Stericycle, Inc. of Utah facility is surrounded on the perimeter with a ten-foot pre-cast cement wall. The main gate is electrically controlled and can be opened/closed from the front office or by code. All visitors and trucks are logged by name, and date of entrance.

During non-business hours, the main gate and front door will be locked. Visitors arriving during non-business hours will be able to communicate with the Shift Lead by telephone or radio.

3.0 Means to Control Entry

The plant entrance is on the south side of the property. All Non-Stericycle vehicles must stop at the gate to sign in and obtain docking or contact information. Trucks will be checked to determine if they are scheduled and then routed to the appropriate area.

Stericycle, Inc. of Utah personnel will be issued code access to the facility. The code will be changed periodically as necessary.

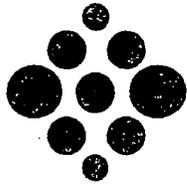
Local law enforcement will be called for any trespassing.

4.0 Warning Signs

On either side of the entry point to the facility will be a sign: **UNAUTHORIZED PERSONNEL KEEP OUT. VISITORS MUST SIGN IN AT THE FRONT DESK.**

A sign will also appear on the northern, southern, eastern, and western property fence lines which reads **UNAUTHORIZED PERSONNEL KEEP OUT.** Other signs will be posted as required.

WILL



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STERICYCLE, INC. – NORTH SALT LAKE, UTAH

**PREPAREDNESS AND PREVENTION PLAN
SECTION VII**

Revision Date: May 12, 2004

**SECTION VII: PREPAREDNESS AND PREVENTION PLAN
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STERICYCLE, INC. NORTH SALT LAKE

PREPAREDNESS AND PREVENTION PLAN

1.0 Introduction

This Preparedness and Prevention Plan outlines the equipment and procedures in place at the Stericycle, Inc. of Utah facility to prevent and respond to emergencies at the facility. These include fires, explosions, or any unplanned sudden or non-sudden release of hazardous waste or hazardous waste constituents.

2.0 Equipment

2.1 Internal Communications

The communications system at the plant includes telephone, two-way radios, and a system of audible alarms that can be heard plant-wide. Plant operations personnel have access to radios. Telephones are in the buildings, with the greatest concentration in the office building. Whenever waste material is being handled, all personnel involved will have immediate access to a radio, phone, or the internal alarm system.

2.2 External Communications

The plant is equipped with a standard telecommunications system that is connected to the public phone system by standard lines. All of the waste operations areas are equipped with phones. Outside emergency calls can be made by dialing the emergency number 911 using any phone.

2.3 Emergency Equipment

A list of emergency equipment on the plant site is as follows. All facility communications or alarm systems, fire protection equipment, spill control equipment, and decontamination equipment, where required, will be tested and maintained as necessary to assure its proper operation in time of emergency.

EMERGENCY EQUIPMENT INFORMATION

Equipment Type	Brief Description	Outline of Capabilities
Fire extinguishers	Red cylinder, 2½ lb to 20 lb H ₂ O, CO ₂ , and dry chemicals	Wide range of extinguishing capabilities
Respirator cabinet	White 3' x 3'	Provide emergency breathing – not to be used in oxygen deficient environments
Fire alarm boxes	Red	Part of plant fire protection system

EMERGENCY EQUIPMENT INFORMATION CONTINUED

Equipment Type	Brief Description	Outline of Capabilities
Protective suits	Tyvek TM or Equivalent	Provide skin and body protection
Emergency Showers and Eyewash Stations	Green Piping, green caps	Provide emergency wash-out.
Sprinkler System	Automatic	Water deluge
Hydrants	Red	Provide water
Water hoses	Yellow	Provide water
Spill Kits	Absorbent/Disinfectant	Provide Spill Response

2.4 Spill Control Equipment

Spill kits are located in the dry storage area, incinerator area, and in the Air Pollution Control Room. Spill Kits vary in content based on storage location.

Spill kits consist of:

- Two (2), two-pound shakers of Powder Bleach Absorbent;
- One can of Cleaner/Disinfectant Aerosol;
- One (1) 4-ounce bottle of Instant Hand Sanitizer;
- Two (2) 1-quart Sharps Containers;
- One (1) Exposure Control Packets *containing*: a disposable gown with knit cuffs, non-skid shoe covers, surgical latex gloves, surgeons mask, face shield, disposable broom and dustpan, tan trash bag, red biohazard bag, disposable wipe and twist ties;
- One shovel;
- One push broom;
- Absorbent;
- One roll of paper towels;
- One drip cloth;
- One can of disinfectant (EPA approved);
- Leak control material;

Respirators along with HEPA filters are available in the Plant Supervisor Office adjacent to the plant floor.

Medical supplies are available on the west wall near Biotrack or in the Front Office.

The spill control equipment includes sumps under the incinerator and in dry storage.

Sumps are manually emptied by use of a vacuum pump.

2.5 Personal Protective Equipment (PPE)

Personal Protective Equipment is kept in the spill kits so personnel have immediate access to it. Gloves, boot covers, and Tyvek™ suits are kept at the spill kit locations for immediate use. These materials are also kept in the supply room.

Personnel undergo initial training along with annual refreshers as it relates to spill response, personal protective equipment, and emergency procedures. All personnel have appropriate PPE available dependent on the specific job functions. This may include some or all of the following items: steel-toed boots, safety glasses, goggles gloves, Tyvek™ suits, full face shields, ear plugs, and respirators.

Stericycle has performed hazard analyses for waste handling areas which specifies the minimum PPE for specific job functions. The PPE which has been designated for a particular task can be found on the hazard assessment sheet. Additionally, required PPE is posted at the entrance to the waste management area. Signs indicate areas of the plant where employees are required to wear hearing protection.

2.6 Water for Fire Control

A water system is available for fire control within the facility. Water is supplied by mains belonging to North Salt Lake City. The fire water pump system is in full compliance with the requirements of NFPA 20.

3.0 Testing and Maintenance of Equipment

The fire hydrants are tested annually for water flow and pressure. All hydrants are inspected to ensure they are available for emergency use and are not covered by dirt or other foreign material. All hoses and equipment are inspected for integrity and readiness. Emergency eyewashes, showers, fire extinguishers, sumps, spill kits, alarms, and other emergency equipment are inspected regularly. If problems are found, the equipment is tagged out of service and a requisition is placed with maintenance for immediate repair. All equipment will be maintained as necessary to assure its proper operation in time of emergency.

4.0 Aisle Space Requirements

All areas of the plant are accessible by fire protection equipment around the perimeter plant area. Container placement and aisle space in the hazardous waste management area (dry storage area) will be maintained at two feet.

5.0 Preventive Procedures, Structures, and Equipment

5.1 Unloading Operations

The unloading areas for trailers of containers are provided with dock levelers to minimize the potential for mishandling containers due to uneven surfaces or trailer movement. Spotlights are provided to illuminate the inside of trailers during unloading. Container trailers are off-loaded by handcarts.

5.2 Runoff

Wastes are stored in the buildings with secondary containment; no runoff from the waste holding areas is expected. The site drainage is to the southwest.

5.3 Water Supplies

Stericycle has all waste within contained structures with appropriately designed drainage and sumps. No waste is expected to migrate beyond these engineered solutions. No water supplies (i.e., wells) exist immediately onsite. Backflow preventions are utilized on the appropriate supply lines.

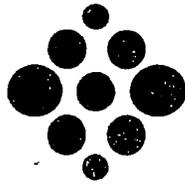
5.4 Equipment and Power Failure

Equipment failure is monitored by instrumentation. Detection of an abnormal operating condition or process parameter initiates a controlled shutdown of the equipment which sustains the process in a standby mode until power is restored or until the emergency generator can be started.

6.0 Prevention of Reaction of Ignitable, Reactive and Incompatible Wastes

Stericycle utilizes a strict waste acceptance policy which prohibits the receipt of ignitable, reactive, or incompatible wastes as defined by 40CRF 261.4. There are no ignitable, reactive or incompatible wastes managed or stored on-site. If an ignitable, reactive, or incompatible waste is generated incident to operations, it will be isolated and labeled as required under 40CFR 262.34(a)(3) until transport to a Treatment, Storage, and Disposal Facility. Isolated with respect to this provision, refers to separation of materials when incompatible or reactive (i.e., strong acids and bases), and safeguarded from flame, spark, or other ignition sources when ignitable.

VIII I



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STERICYCLE, INC. – NORTH SALT LAKE, UTAH

**SPILL PREVENTION COUNTERMEASURE AND CONTROL PLAN
SECTION VIII**

Revision Date: December 16, 2005

**SECTION VIII: SPILL PREVENTION CONTROL AND
COUNTERMEASURE PLAN**

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SPILL PREVENTION CONTROL AND COUNTERMEASURE PLAN

1.0 PURPOSE

- 1.1 To establish procedures for the support of federal, state, and POTW polices regarding spills and measures of remediation in the event of accidental or intentional spills or discharges of hazardous materials.

2.0 SCOPE

- 2.1 This standard shall apply to the North Salt Lake, Utah site. The basic supporting document is the Stericycle Contingency/Emergency Plan.
- 2.2 This standard also contains components for compliance with the Toxic Organics Management (TOM) Plan as required by 40 CFR 433.12 and municipal regulations.

3.0 PROCEDURE

- 3.1 In the event of an emergency created by a chemical spill, fire, explosion or sudden unplanned or planned release, the Emergency Response Coordinator should be notified by the telephone number shown below. The Emergency Coordinator will notify those individuals assigned for emergency response. The individuals assigned for emergency response will support containment efforts. In the case where fire or bodily injury has occurred, the Emergency Response Coordinator will notify the appropriate emergency support group.

3.1.1 Emergency Response Coordinator North Salt Lake:

Shawn Woodley 801-330-1751

- 3.2 All hazardous materials received by STERICYCLE shall be received through a dedicated truck dock.
- 3.3 Drums and container storage:
 - 3.3.1 Hazardous and regulated wastes will be stored in the Waste Management Area.
 - 3.3.2 Secondary containment structures for drum and small container storage areas shall be capable of holding 150% of the volume of the largest single container or 2% of the total volume of materials stored in the containment structure, whichever is larger.
 - 3.3.3 Spill controls including secondary containment skids shall be

provided for storage of process chemicals such as disinfectant, neutralizer, and oil.

3.3.4 Incompatible materials shall be stored so that container leakage will not cause co-mingling of contents. Storage shall also follow applicable regulations governing separation distance or barriers.

3.3.5 Operating areas, where spill controls have not been provided, or storage/handling of biohazardous or hazardous materials occurs outside of the provided facilities, will maintain a supply of adsorbent and neutralization materials of sufficient amounts to deal with a spill from the largest container within the area. Types of absorbent materials on hand will depend upon chemicals contained within the area.

3.3.6 Drums or small containers of hazardous waste which are accumulated at satellite areas shall be immediately transferred to the hazardous waste storage area.

3.4 At no time are any hazardous or regulated materials to be stored on a sewer or storm drain.

4.0 RESPONSE

4.1 Spills and/or sudden or non-sudden chemical or compressed gas releases shall be reported to area supervision. If necessary, the Emergency Response Coordinator shall be notified by dialing the appropriate telephone number. The Emergency Response Coordinator will verify the incident, and both the Emergency Response Coordinator and area supervision will determine the need for evacuation. The area involved and the potential severity of the situation will govern speed of response.

4.2 In the event of a chemical spill over 1 gallon or compressed gas release, the Emergency Response Coordinator shall be notified and alternates called as appropriate. Call numbers and personnel are shown in Attachment 1.

5.0 AREAS of CONCERN

5.1 Procedures regarding areas of concern relative to biological/chemical spills or compressed gas releases are listed below and specifically in Attachments 2-8.

5.1.1 Attachment 2

Spills of Untreated Infectious or "OSHA Biohazardous" Wastes

5.1.2 Attachment 3

Spills of Chemotherapy Wastes

- 5.1.3 Attachment 4
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Compressed Gas Tanks – North Salt Lake
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Waste Chemical Handling Procedures for Waste Management
Area
- 5.1.8 Attachment 9
Facility Layout

Attachment 1

STERICYCLE, INC.

**EMERGENCY PROCEDURE – SCCPP
LISTING of EMERGENCY RESPONSE COORDINATORS/NORTH SALT LAKE SITE**

1.0 PRIMARY EMERGENCY RESPONSE COORDINATOR (PERC):

Kirk Christenson 801-330-1758
Plant Manager/Emergency Response Coordinator
(Home) 801-553-2292
(Mobile) 801-330-1758

2.0 ALTERNATE EMERGENCY RESPONSE COORDINATORS:

Miles Hansen 801-330-8575
AMESH/HAZMAT Coordinator

(Home) 801-296-8575
(Mobile) 801-330-8575

Shawn Woodley 801-330-1751
Plant Supervisor

(Home) 801-957-0652
(Mobile) 801-330-1751

3.0 PUBLIC INFORMATION OFFICER:

RHONDA TOTH 847-607-2074
Public Relations

4.0 PRETREATMENT COORDINATOR:

LYNDON TAN
South Davis County Sewer Improvement District 801-555-5555

5.0 HAZMAT EMERGENCY RESPONSE:

Emergency Response Telephone Number 1-800-234-0051

Attachment 2

STERICYCLE, INC.

EMERGENCY PROCEDURE – SCCPP North Salt Lake

SPILLS OF INFECTIOUS OR “OSHA BIOHAZARDOUS” WASTES

1. **Cause:** Spills would be caused by either container leakage or container damage.
2. **Response Procedure:** Notify area supervision immediately. Area supervision shall notify the Emergency Response Coordinator as appropriate.
3. **Personal Protective Equipment:**
 - * Approved safety glasses and face shield;
 - * Rubber apron, latex gloves, and boots;
 - * Air Purifying Respirator (APR) or Self-Contained Breathing Apparatus (SCBA) shall be used if an over exposure potentially exists.
4. **Procedure:**
 - Assess the extent of the incident and/or spill;
 - Inspect and don all required PPE;
 - Contain the spill from unauthorized discharges to the POTW;
 - Stop continual leakage from container(s);
 - If necessary call the Emergency Response Telephone Number 1-800-234-0051;
 - Initially, shovel the solid portion of the spilled material into the previously prepared fiberboard box or plastic re-useable container;
 - Spray the contaminated area with a US EPA approved tuberculocidal disinfectant (a 10:1 mixture of water and household bleach);
 - Spread absorbent on the contaminated area and wait at least 10 minutes;

5. **Cleanup:**

- Shovel the absorbent and any other contaminated items into the container;
- Remove and place all disposable PPE in the fiberboard box or reusable plastic container used during the clean up;
- Dispose of the fiberboard box or reusable tub contents into the incinerator after the container has been scanned;
- Once again, spray the area formally covered by the spill with a US EPA approved tuberculocidal disinfectant;
- Spray any tools that may have come in contact with the biohazardous waste during the clean up process;
- If there is direct contact with untreated biohazardous waste; first remove any contaminated clothing and shower thoroughly or wash area with a germicidal soap;
- Complete the Incident Report Questionnaire (if applicable); and
- Return the questionnaire to the supervisor who will review it and turn in with the plant paperwork.

Attachment 3

STERICYCLE, INC.

EMERGENCY PROCEDURE – SCCPP North Salt Lake

SPILLS OF CHEMOTHERAPY WASTES

1. **Cause:** Spills would be caused by either container leakage or container damage.
2. **Response Procedure:** Notify area supervision immediately. Area supervision shall notify the Emergency Response Coordinator as appropriate.
3. **Personal Protective Equipment:**
 - * Approved safety glasses and face shield;
 - * Rubber apron along with disposable coveralls, nitrile gloves that extend over shirt or gown cuffs, and boots;
 - * Air Purifying Respirator (APR) or Self-Contained Breathing Apparatus (SCBA) shall be used if an over exposure potentially exists.
4. **Procedure:**
 - Follow the proceeding spill response procedures for a biohazardous waste spill above with the following additions;
 - Clean up small amounts of liquids using gauze pads or other absorbent materials. Clean up small amounts of solids using wet absorbent pads;
 - Contain large spills with absorbent pads, damp cloths or towels. Place absorbent materials in a proper red poly bag and place the red poly bag in a container;
 - Clean the spill area 3 times using a detergent (infectious waste disinfectant may be used) followed by clean water.
5. **Cleanup:**
 - Gather and place broken glassware into a leak-resistant packaging unit. Label "trace chemotherapy" and send the container for incineration only;

- Remove PPE; wash hands after placing all items in an approved container; and
- Any tools should be washed thoroughly with water and disinfectant and rinsed with water after use.

Attachment 4

STERICYCLE, INC.

EMERGENCY PROCEDURE – SCCPP North Salt Lake

SPILLS IN THE WASTE MANAGEMENT AREA

1. **Cause:** Spills in this area would be caused by either container leakage or container damage.
2. **Response Procedure:** Notify area supervision immediately. Area supervision shall notify the Emergency Response Coordinator as appropriate.
3. **Personal Protective Equipment:**
 - * Approved safety glasses and face shield
 - * Rubber apron, gloves, and boots
 - * Air Purifying Respirator (APR) or Self-Contained Breathing Apparatus (SCBA) shall be used if an over exposure potentially exists.
4. **Containment:** Dike the area to prevent liquid from entering the drainage systems. Diking materials such as absorbent can be obtained through the maintenance department. Spill abatement kits are placed in the Waste Management Area. To prevent leakage, elevate leak opening or place wooden wedges/plugs into the opening. All tools shall be of non-sparking material. Area shall be secured to prevent employee exposure.
5. **Cleanup:** All materials shall be placed in approved containers, properly labeled and disposed of per state and federal regulations. Cleanup of dust material shall be done in a way that minimizes fugitive dust (to include wet methods if necessary). Tools and safety equipment must be cleaned and decontaminated prior to storage.

Attachment 5

STERICYCLE, INC.

EMERGENCY PROCEDURE - SCCPP

SPILLS IN THE AIR POLLUTION CONTROL AREA

1. **Cause:** Container damage, leaks, ruptured lines, overfilling or broken equipment. This procedure applies to fixed tanks used for air pollution control or process supply purposes.
2. **Response Procedure:** Notify area supervision **immediately**. Area supervision shall notify the Emergency Response Coordinator.
3. **Personal Protective Equipment:**
 - * Safety glasses and face shield;
 - * Rubber apron, boots, and gloves approved for use with caustic chemical;
 - * Ventilation fan;
 - * Air Purifying Respirator (APR) or Self-Contained Breathing Apparatus (SCBA) shall be used if an over exposure potentially exists.
4. **Containment:** Dike the area to prevent liquid from entering the drainage systems. Diking materials such as absorbent can be obtained through the maintenance department. Spill abatement kits are placed in the Waste Management Area. To prevent leakage, elevate leak opening or place wooden wedges/plugs into the opening. All tools shall be of non-sparking material. Area shall be secured to prevent employee exposure.

To stop or restrict spill, turn container upright if over-turned, repair broken or damaged hose or fittings, reposition container to prevent further leakage. Keep sources of heat/flame away from leak area. All tools shall be of non-sparking material. Area shall be secured to prevent employee exposure.
5. **Cleanup:** All materials shall be placed into approved containers, properly labeled and disposed of per state and federal regulations. Cleanup of dust material shall be done in a way that minimizes fugitive dust (to include wet methods if necessary). All tools and safety equipment must be cleaned and decontaminated prior to storage.

Attachment 6

STERICYCLE, INC.

EMERGENCY PROCEDURE – SCCPP North Salt Lake

SPILLS IN THE TUB WASH AREA

1. **Cause:** Spills in this area would be caused by either container leakage or container damage.
2. **Response Procedure:** Notify area supervision immediately. Area supervision shall notify the Emergency Response Coordinator as appropriate.
3. **Personal Protective Equipment:**
 - * Approved safety glasses and face shield;
 - * Rubber apron, gloves, and boots;
 - * Air Purifying Respirator (APR) or Self-Contained Breathing Apparatus (SCBA) shall be used if an over exposure potentially exists.
4. **Containment:** Dike the area to prevent liquid from entering the drainage systems. Diking materials such absorbent can be obtained through the maintenance department. Spill abatement kits are placed in the Waste Management Area. To prevent leakage, elevate leak opening or place wooden wedges/plugs into the opening. All tools shall be of non-sparking material. Area shall be secured to prevent employee exposure.
5. **Cleanup:** All materials shall be placed in approved containers, properly labeled and disposed of per state and federal regulations. Cleanup of dust material shall be done in a way that minimizes fugitive dust (to include wet methods if necessary). Tools and safety equipment must be cleaned and decontaminated prior to storage.

Attachment 7

STERICYCLE, INC.

EMERGENCY PROCEDURE - SCCPP

COMPRESSED GAS TANKS

1. **Cause:** Container damage, leaks, ruptured lines, overfilling or broken equipment. This procedure applies to fixed tanks used for refuel or process supply purposes.
2. **Response Procedure:** Notify area supervision **immediately**. Area supervision shall notify the Emergency Response Coordinator.
3. **Personal Protective Equipment:**
 - * Safety glasses and face shield
 - * Rubber apron, boots, and gloves approved for cryogenic use
 - * Ventilation fan
 - * Air Purifying Respirator (APR) or Self-Contained Breathing Apparatus (SCBA) shall be used if an over exposure potentially exists.
4. **Containment:** To stop or restrict spill, turn container upright if overturned, repair broken or damaged hose or fittings, reposition container to prevent further leakage. Keep sources of heat/flame away from leak area. All tools shall be of non-sparking material. Area shall be secured to prevent employee exposure.
5. **Cleanup:** All materials shall be placed into approved containers, properly labeled and disposed of per state and federal regulations. All tools and safety equipment must be cleaned and decontaminated prior to storage.

Attachment 8

STERICYCLE, INC.

EMERGENCY PROCEDURE - SCCPP

WASTE CHEMICAL HANDLING PROCEDURES

The procedures listed below need to be followed to keep STERICYCLE within state and federal regulatory guidelines for handling and storage of hazardous and non-hazardous chemical waste products.

1. Pick-up and removal of hazardous or non-hazardous chemical drums or containers, such as spent lubricating oils, paints, and other bulk chemicals shall be coordinated through either the Plant Supervisor, Joshua Moore, or the Maintenance Manager, Vaughn Reilly.
2. Under no conditions should drums or containers be unlabeled. Unlabeled containers or containers with unreadable labels will not be removed until properly labeled. Labels applied to shrink-wrapping around containers do not qualify as proper labeling. Previously applied labels on drums that do not state the actual contents of a container shall be obliterated and a label declaring actual contents placed on the container. Labels may be obtained from the Environmental Safety and Health Office during day shift, or in the label cabinet (near absorber) at any time. If there is doubt about actual contents of a container, contact site Management.
3. Chemical drums or containers shall not be placed outside buildings without notification per #1 and shall not be placed over or near storm sewers, bare ground, or drains/drainage gratings. There shall be no accumulation of containers other than in the approved waste holding area at that site.
 - a. All containers shall be cleaned of obvious contaminants prior to disposal or pick up for disposal. Drums shall be wiped down, not rinsed because contaminants may go to the drains. Rags used for cleaning should be properly disposed of.
4. Waste chemical containers shall be in good repair, not leaking and have a lid or top tightly in place to prevent spillage. If containers need to be repackaged for disposal, the responsible department will be assessed the cost of the repackaging drum.
 - a. Barrel lids and bung plugs are required on all drums used for any chemical containment.
5. Filters with the potential to contain a hazardous waste shall not be discarded in trash containers but shall be placed in collection drums. Employees removing filters shall wear dust masks/respirators for filters that generate dusts and fibers above acceptable exposure guidelines for potentially hazardous ingredients from

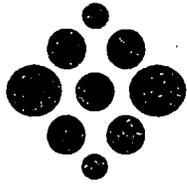
dried material. Such masks shall be worn in accordance with STERICYCLE Safety Policy entitled, "Respiratory Protection".

6. Site Management or Safety shall be notified immediately in the event that waste containers are discovered leaking.
7. Barrels are considered empty when there is 1/2-inch or less liquid or material in the bottom of the drum. Lids and bung plugs shall accompany any empty drum. Empty drums shall be labeled as empty or with a "M/T" logo.

Note: Departments/personnel found in non-compliance to the above rules may face disciplinary measures at the discretion of management.

Attachment 9
STERICYCLE, INC.
EMERGENCY PROCEDURE - SCCPP
FACILITY LAYOUT

IX



Stericycle®

STERICYCLE, INC. – NORTH SALT LAKE, UTAH

**CONTINGENCY PLAN
SECTION IX**

Revision Date: May 12, 2004

**SECTION IX: CONTINGENCY PLAN
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STERICYCLE, INC NORTH SALT LAKE

CONTINGENCY PLAN

1.0 Facility Information

Facility Name: Stericycle, Inc.
North Salt Lake, Davis County, Utah Facility

Facility Owner: Stericycle Inc.
28161 North Keith Drive
Lake Forest, IL 60045

Site Plan: See site plan, drawing STERICYCLE MEDICAL WASTE FACILITY, in Appendix II

Location: 90 North 1100 West
North Salt Lake, UT 84054

Stericycle's North Salt Lake Medical Facility is located just off of Interstate 215 in North Salt Lake, Utah. This facility was established in 1993, and is fully permitted by the State of Utah Division of Air Quality and Division of Solid and Hazardous Waste as a Hospital/Medical/Infectious Waste Incinerator.

The facility operates a dual chamber controlled air incinerator, equipped with automatic waste feed and ash removal systems. The flue gas generated from the incineration process is first cooled by means of a waste heat boiler, which has the capacity to generate over 11,000 lb/hr of steam. An evaporative gas cooler prior to the air pollution control scrubbing system further cools the flue gas. The first stage of the air pollution control system is a multi-pass dry reactor, where carbon is injected to control potential emissions of dioxin, furan and mercury. The next stage consists of an electrostatic precipitator which removes particulate matter from the gas stream. The final stage is a wet absorber tower to remove any acid vapors.

2.0 Purpose

This Contingency Plan outlines the emergency procedures that will be employed to minimize risks to human health and the environment should an emergency situation occur at the facility. The provisions of this plan will be carried out as specified in Section 5.0.

3.0 Emergency Coordinators

Attachment I contain the names of the persons qualified to act as Emergency Coordinators. This list will be updated, as necessary. All Emergency Coordinators have the authority to call on outside assistance or call upon Stericycle, Inc resources to respond to the emergency and to commit requisite resources to implement this plan.

The on-site Shift Lead, also identified as the Incinerator Lead, is normally the Emergency Coordinator. When no Shift Lead is on site, another qualified individual will be designated as the Emergency Coordinator. At least one of the individuals qualified to act as Emergency Coordinator will be on-site at all times.

The duties of the Emergency Coordinator are to assess the situation and take steps necessary to protect human health and the environment. The Emergency Coordinator is responsible for the coordination of containment and recovery operations following an emergency or a major emergency. The responding Emergency Coordinator is responsible for the complete written report of the incident. The Environmental Manager will be responsible for forwarding the report to the appropriate regulatory agencies, if necessary.

4.0 Definitions

Major Emergency: Any explosion, fire, spill, discharge, or natural disaster which has damaged or destroyed, or threatens to damage or destroy, plant property, or impair plant operations, or results in a discharge of waste material into the environment and is beyond the capability of on-site personnel and equipment to control. A major emergency may originate from an on-plant event, such as spills, fires, explosions, etc., or an off-plant incident, such as an aircraft crash on plant property, fire from neighboring property, or natural disasters.

Emergency: Similar to a major emergency except that no outside assistance is needed or summoned to deal with the situation. This includes minor spills or discharges, explosions, or fires in areas where waste management occurs (i.e., containable to the facility with little threat to human health or the environment.).

Spill or Discharge: A spill is defined as any release which includes any spilling, leaking, pumping, pouring, emitting, emptying, discharging, injecting, escaping, leaching, dumping or disposing into the environment. This definition applies to all materials that are released (i.e., hazardous and non-hazardous waste, raw materials, by-products, residues, etc.). Specifically excluded from the definition of "release" is any release which does not enter the environment or any federally permitted release (e.g., permitted air emissions).

Contained Spill or Discharge: A spill or discharge which is contained means that the spill is contained within an area which provides a barrier to prevent a release from contacting the ground or surface waters. This includes paved areas where no runoff occurs, secondary containment structures and the inside of buildings.

Emergency Signal: An audible alarm initiated by the Emergency Coordinator, alerting all personnel on site that an emergency or a major emergency exists.

Shutdown of Operations: Curtailing of incinerator operations, with the exception of the air pollution control system, by stopping all waste feed to the incinerator. Buildings are closed to prevent wind or rain from entering, and all unloading operations are ceased, as needed. Maintenance and contractor's machinery will be shut down, as needed.

Southwest Assembly Point: The parking area to the west of the administrative building near the Stericycle, Inc sign.

Northwest Assembly Point: The area northwest of the plant near the property boundary corner.

Authorized Fire: An approved (authorized) fire/open flame within any portion of the facility, such as fire set for fire response training, designated smoking areas, or in the incinerator.

5.0 Implementation of the Contingency Plan

The Contingency Plan will be implemented whenever there is a major emergency, emergency, whenever there is a contained spill or discharge which threatens human health (i.e., a spill or discharge resulting in one or more individuals requiring medical treatment or evaluation), or any other time the Emergency Coordinator feels it is appropriate.

The purpose of this Contingency Plan is to outline the actions which operating personnel will take in response to emergencies, such as fires, explosions, leaks, spills, natural disasters, or discharges of hazardous substances. It establishes guidelines for the orderly handling and reporting of emergency situations, which occur or could foreseeably develop at the Stericycle facility.

5.1 Assessment/Notification

Any person discovering a situation that may require implementation of the Contingency Plan (e.g., fires, spills, etc.) shall immediately warn others working nearby and notify the Emergency Coordinator. The Emergency Coordinator will appraise the situation and determine whether to initiate the Contingency Plan. The Emergency Coordinator will initiate the appropriate alarm(s) and notify personnel on site of the situation through the plant PA system and radios. Incineration operation shall be shut down if, in the opinion of the Emergency Coordinator, the threat to human health or the environment warrants this action. The Emergency Coordinator can determine if the fuel to the afterburners should also be cut off.

Should the situation result in the spill or discharge of infectious waste, the spill prevention control and countermeasures procedure shall be followed. If there is a spill or discharge, the worker(s) discovering it will immediately notify the Emergency Coordinator and assess the characteristics of the spill or discharge and promptly initiate a plan to stop the source of the leak. The Emergency Coordinator will initiate measures so as to protect human health and the environment.

Information about waste stored on-site or in-process is tracked in the waste tracking database. All wastes, either stored or in process, on-site are tracked by facility personnel.

5.2 Evacuation Plan

In the event that an evacuation is necessary, an evacuation signal will be sounded. The evacuation routes should be upwind or crosswind of the emergency and culminate at the designated assembly point(s). The Emergency Coordinator will announce the appropriate assembly point(s) over the plant PA system and radios. All personnel, visitors, and contract personnel shall evacuate the area and assemble at the appropriate assembly point(s). A copy of egress routes is included in Attachment III

The facility has a system for identifying everyone within the facility. The designated person at the assembly point(s) will notify the Emergency Coordinator of any personnel that are known to be missing. Visitors shall be the responsibility of their Stericycle contact for accountability.

5.3 Control Procedures

5.3.1 Spills or Discharges

5.3.1.1 Liquids and Solids

Spilled material will normally be contained in the area where the spill occurs. All spills will be collected and subsequently transferred to approved storage. Spills may also occur outside of the containment berms, such as where the containment area has been damaged, or the spill occurred when the waste was not in a containment area. All material will be kept from entering storm drains, watercourses, wells, water systems, and navigable waterways, if possible.

Incompatible wastes are segregated. Thus, the probability of incompatible wastes commingling is not high, and, if possible, spills will be segregated and will be cleaned up immediately to prohibit commingling of wastes.

The following steps are taken to contain and clean up spills and discharges:

- Dress in appropriate protective equipment.
- Prevent further leaking by repositioning the container, overpacking, applying a temporary seal to the leak, or closing master valves or pet cocks on any tanks that might be leaking. Simple overpacking for containers is the preferred method.

- Prevent the spill from spreading by trenching or encircling the area with a dike of sand, absorbent material, or, as a last resort, dirt or rags, or other suitable material. If the spill is in an outside area and it is raining or rain is imminent, cover the spill with plastic sheeting, if feasible.
- The spill area is cleaned up and tested for contamination, as appropriate. If the spill area is not in a containment area (i.e. on dirt) the contaminated material will be removed.

5.3.1.2 Gases

Compressed gas cylinders determined to be leaking upon arrival or during storage will be transferred to a remote area of the facility and allowed to leak until empty.

5.3.2 Explosions

In the event of an explosion, the Emergency Coordinator will immediately shut down all equipment that may be affected and initiate waste feed cut-offs as necessary. If the explosion occurs where liquids are stored and a spill occurs, procedures for spill containment will commence.

Explosions involving other plant areas will require evacuation, possible first aid for injured personnel, securing the area to prevent unauthorized entry, and assessment of damages.

In all cases, the Emergency Coordinator must be notified as soon as equipment and waste storage areas are secured.

5.3.3 Fires

In the event of a fire, the automatic sprinkling system and water cannons may be activated. Fire extinguishers are located in all buildings and on the perimeter of the process equipment. In the event a fire cannot be extinguished using the stationary equipment, fire hoses may be used. The water used for extinguishing a fire would primarily be contained through the containment berm systems.

6.0 Prevention of Recurrence or Spread of Fires, Explosions, or Releases

During an emergency, the Emergency Coordinator must take all reasonable measures necessary to ensure that additional fires, explosions, and releases do not occur, recur, or spread to other areas of the facility. These measures must include, where applicable, stopping processes and operations, collecting and containing release waste, and removing or isolating containers.

If the facility stops operations in response to a fire, explosion, or release, the Emergency Coordinator must monitor for leaks, pressure buildup, gas generation, or ruptures in valves, pipes, or other equipment, wherever this is appropriate.

At least once a year, plant personnel will have a practice drill on an emergency situation. In order to protect the facility from the possibility of range fires, a firebreak surrounds the entire facility.

7.0 Storage and Treatment of Spilled or Discharged Liquid and Solid Material

Post event sampling and analyses will be performed after containment, clean-up, and decontamination procedures have been completed. All spilled or released material will be managed as analyses of the waste dictates. If the spill or released material contains or was mingled in any way with infectious waste, all the material will be considered infectious (except hazardous and radioactive wastes).

8.0 Post-Emergency Equipment Maintenance

All equipment used during an emergency, major emergency, or contained spill or discharge will be cleaned and/or replaced, when necessary, for any future occurrence. The emergency equipment will be checked as necessary for completeness and operability.

9.0 Emergency Equipment

The equipment available at the facility to respond to an emergency includes but is not limited to:

- First aid kit
- Eye wash station
- Emergency Showers
- Spill kit
- Fire extinguishers
- Fire Hoses
- Fire Suppression System

For locations of emergency equipment see Attachment III.

10.0 Coordination Agreements

Stericycle, Inc of Utah has negotiated a written agreement with the South Davis Fire District. Representatives of the South Davis Fire District were contacted, received a copy of this Contingency Plan, and received a plant walk-through to familiarize them with the plant layout and function. Annual re-orientation is offered at the plant site for South Davis Fire District representatives. By the terms of the written agreement, the South Davis Fire District has agreed to provide the following services:

- Fire response,
- Emergency Medical Response,
- Hazardous Waste/Chemical Release Response,
- Confined Space Response,

- Telecommunications,
- South Davis also has several auto aid agreements with neighboring departments if the need arises for further assistance.

Concentra is the acute care facility, which would provide emergency services to our employees in the event of exposure or occupational injury during normal business hours. The address and phone number are:

Concentra
 1735 S. Redwood Rd.
 Suite 115
 Salt Lake City, UT 84104
 801-973-4434

Lakeview Hospital is the closest acute care facility which would provide emergency services to our employees in the event of exposure or occupational injury, after normal business hours. The address and phone are:

Lakeview Hospital
 630 Medical Drive
 Bountiful, Utah 84010
 (801) 299-2140

Stericycle, Inc. reserves the right to use other approved care facilities if circumstances warrant.

State and local emergency authorities:

AGENCY	TELEPHONE NUMBER
Fire Department North Salt Lake Station	Dispatch: 911
Fire Department/Hazardous Materials Response Team West Bountiful Station	Dispatch: 911
Police Department	Dispatch: 911
Davis County Health Department, Environmental Health Bureau	(801) 451-3296
State of Utah, Division of Solid and Hazardous Waste	(801) 538-6170

Arrangements with Emergency Response Contractors:

The emergency response contractor below is able to provide clean-up services for medical waste, ash, hazardous material, or chemicals:

E.T. Technologies
3656 W. 2100 S.
West Valley City, Utah 84120
(801) 977-0731

(Special equipment and capabilities include 7 days/week, 24 hours/day; availability of decontamination equipment, etc.)

Stericycle, Inc of Utah has designated, and obtained agreements with, the below Treatment, Storage, and Disposal Facility as the primary location for disposal of any hazardous waste streams generated at the facility:

Clean Harbors Environmental Services, Inc.
Grassy Mountain
3 Miles East 7 Miles North of Knolls
Clive, UT 84029
(801) 323-8900

As a backup Treatment, Storage, and Disposal Facility, Stericycle, Inc of Utah has designated, and obtained agreements with, the below secondary location for disposal of any hazardous waste streams generated at the facility:

Onyx Environmental Services
US Ecology of Idaho, Inc.
10.5 Miles NW on HWY 78
Lemley Road
Grand View, ID 83624
(800) 274-1516

This plan will be reviewed annually, updated as necessary, and forwarded the South Davis Fire District.

11.0 Required Reports

As required by Utah Administrative Code R315-302-2(2)(d) for major emergencies, Stericycle shall immediately notify the Utah State Department of Environmental Quality (Department of Solid and Hazardous Waste).

The report will include:

- Name and telephone number of reporter;
- Name and address of facility;

- Time and type of incident, e.g., discharge, fire;
- Name and quantity of material(s) involved, to the extent available;
- The extent of injuries, if any; and
- The possible hazards to human health or the environment, outside the facility.

Stericycle will record in the operating record any incident that requires implementing this Contingency Plan.

In addition, Stericycle will submit a written report to the Executive Secretary within 15 days after an incident that required implementation of the Contingency Plan.

The report will include:

- Name, address, and telephone number of the owner or operator;
- Name, address, and telephone number of the facility;
- Date, time, and type of incident;
- Name and quantity of material(s) involved;
- The extent of injuries, if any;
- An assessment of actual or potential hazard to health or the environment, and
- Estimated quantity and disposition of recovered material that resulted from the incident.

For spills which require reporting Stericycle shall immediately notify the Utah State Department of Environmental Quality.

- The report will include:
- Name, telephone number, and address of person responsible for the spill;
- Name, title, and telephone number of individual reporting;
- Time and date of spill;
- Location of spill;
- Description contained on the manifest and the amount of material spilled;
- Cause of spill; and
- Emergency action taken to minimize the threat to human health and the environment.

As required Stericycle will submit a written report to the Executive Secretary within 15 days for spills which require reporting under R315-9.

This report will include:

- The person's name, address, and telephone number;
- Date, time, location, and nature of incident;
- Name and quantity of material(s) involved;
- The extent of injuries, if any;
- An assessment of actual or potential hazards to human health or the environment, where this s applicable; and
- The estimated quantity and disposition of recovered material that resulted from the incident.

Contained spills or discharges that do not threaten human health need not be reported. However, they will be recorded in the operating record.

As required by 40 CFR §302.6, spills on site involving reportable quantities (RQ) will be reported to the National Response Center. They will also be reported to the Utah Division of Solid and Hazardous Waste, Davis County Health Department, and the U.S. EPA, Region VIII.

If plant operations were suspended due to Contingency Plan implementation, operations will resume after plant management has determined that all safety-related questions have been satisfactorily addressed. EPA/State officials will be notified that the facility is in compliance with the permit.

Reports to the Executive Secretary will be sent to:
Executive Secretary
Utah Solid and Hazardous Waste Control Board
Utah Department of Environmental Quality
Division of Solid and Hazardous Waste
P.O. Box 144880
Salt Lake City, Utah 84114-4880

Reports to EPA Region VIII will be submitted to:
Regional Administrator
U.S. EPA - Region VIII
999 18th Street / Suite 500
Denver, Colorado 80202

Reports to Davis County Health Department will be submitted to:
Davis County Health Department
99 South Main, PO Box 618
Farmington, UT 84025

Immediate reporting of certain events to the Utah Department of Environmental Quality, as outlined in this section, shall be made to the following:
Utah Division of Solid and Hazardous Waste
(801) 538-6170 (during office hours); or
Utah Department of Environmental Quality
(801) 536-4123 (24-hour answering service)

12.0 Alternative Storage Plan

The facility maintains an adequate supply of spare parts to prevent downtime for the operation. There is also redundancy built into the system to assist in continuous uninterrupted operation. However, should a condition exist where the facility does not operate for 72 continuous hours, all product shipments will be

rerouted until the facility is on-line. Any inbound product would be diverted to other operating locations to include but not limited to:

STERICYCLE, INC. Colorado District (Autoclave)
5355 Colorado Boulevard, Dacono, Colorado 80514

STERICYCLE, INC. Los Angeles District (Autoclave)
2775 East 26TH Street, Vernon, CA 90023

STERICYCLE, INC. San Diego District (Autoclave)
7737 Formula Place, San Diego, CA 92121

STERICYCLE, INC. San Leandro District (Autoclave)
1345 Doolittle Dr. Suite C, San Leandro, CA 94577

STERICYCLE, INC. Kansas City District (Incineration)
3150 North 7th, Kansas City, Kansas 66115

STERICYCLE, INC. Terrel District (Autoclave)
410 Industrial Blvd. Terrel, TX 75160

ATTACHEMENT I
EMERGENCY CALL SHEET

STERICYCLE, INC.
NORTH SALT LAKE MEDICAL WASTE
EMERGENCY CONTINGENCY CONTACT LIST

Facility:	North Salt Lake City, UT
District:	# 5040
Address:	90 North 1100 West, North Salt Lake, UT. 84054
Phone:	801-936-1171, 800-321-9993, Fax 801-936-5891

FACILITY EMERGENCY CONTACTS

PRIMARY EMERGENCY COORDINATOR

Maintenance Manager: Vaughn Reilly.....Home Phone (801) 446-5562
Cell Phone (801) 330-1751

BACKUP EMERGENCY COORDINATORS

Operations Supervisor: Kirk Christenson..... Home Phone (801)553-2292
Cell Phone (801)330-1758

Transportation Manager: Jason Kumelski.....Home Phone (801)568-2559
Cell Phone (801)330-1738

INFORMATION SOURCES ONLY

District Manager: Pat Altenberger.....Cell Phone (480)688-0436

AMESH: Miles Hansen Home Phone (801) 296-0840
Cell Phone (801) 330-8575

STATE AND LOCAL EMERGENCY CONTACTS

POLICE: North Salt Lake Police Department.....Dispatch **911**
Office: (801)451-4150

FIRE: North Salt Lake Station.....Dispatch **911**
Office: (801)677-2422

FIRE/HAZMAT RESPONSE: West Bountiful Station.....Dispatch **911**
Office: (801)295-6622

DAVIS COUNTY HEALTH DEPARTMENT..... Office: (801)451-3296

STATE OF UT DIV. OF SOLID & HAZARDOUS WASTE:.....Office: (801)538-6170

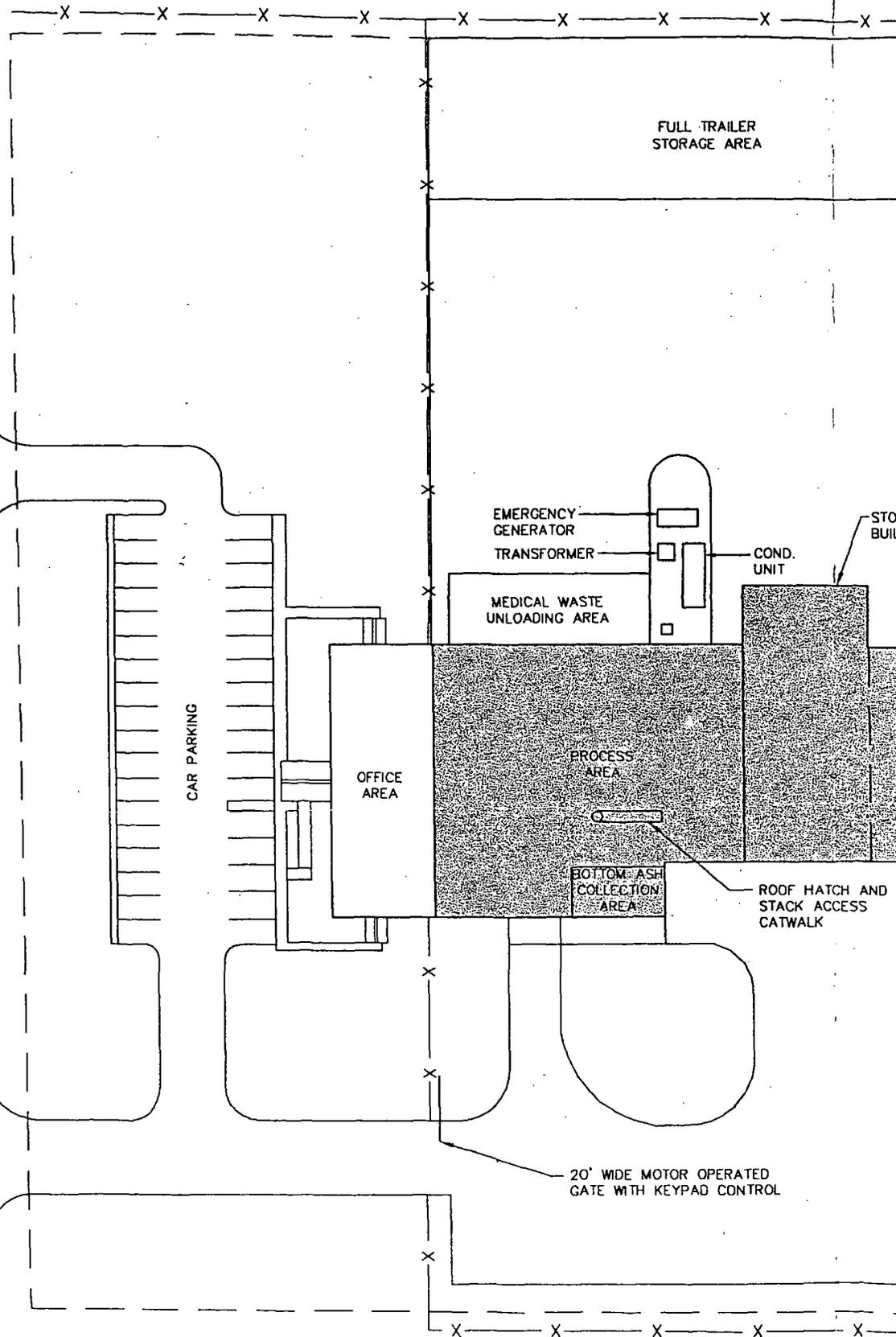
ER RESPONSE CONTRACTOR: E.T. TECHNOLOGIES.....Office: (801)977-0731

ATTACHMENT II

SITE PLAN

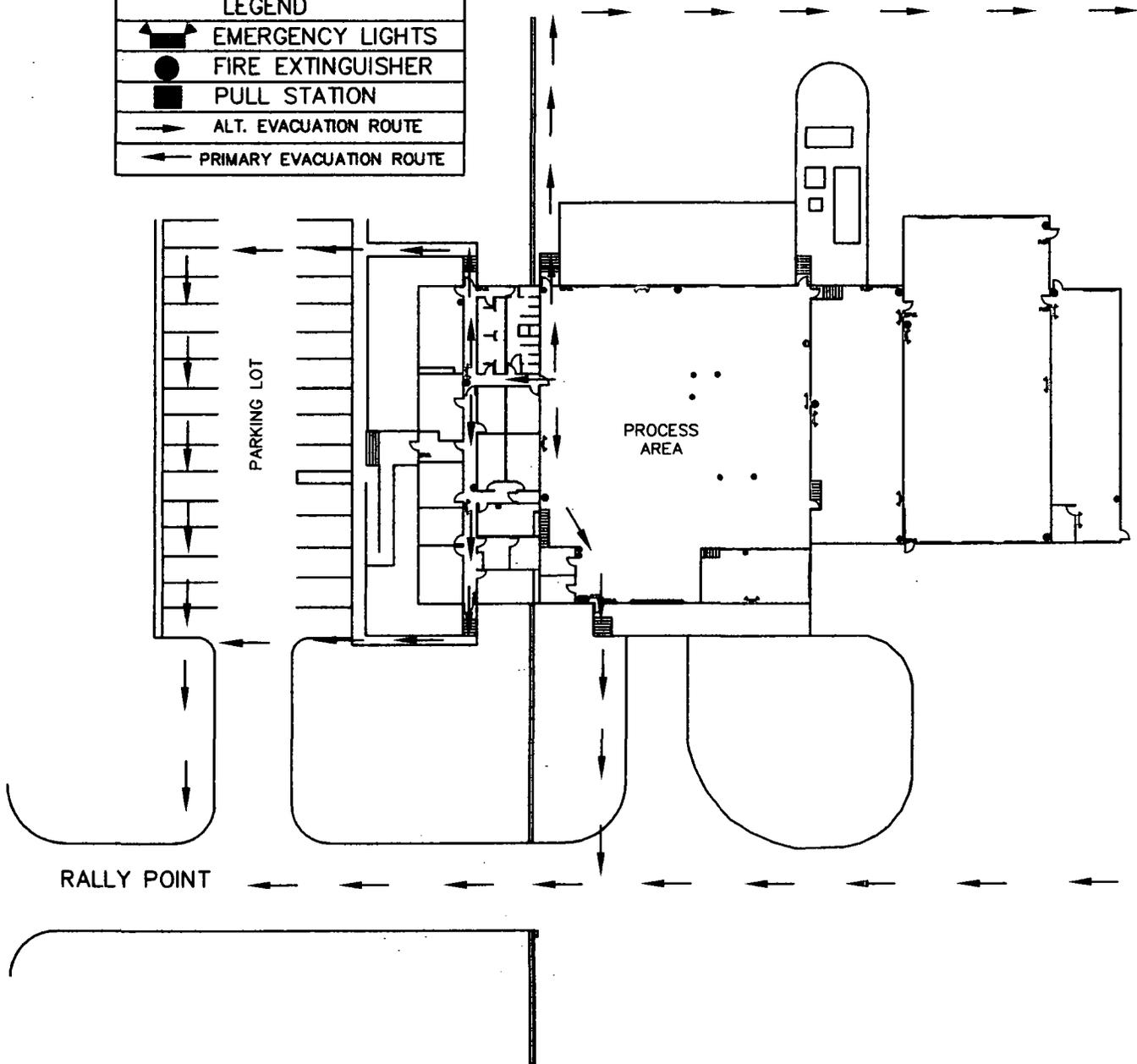


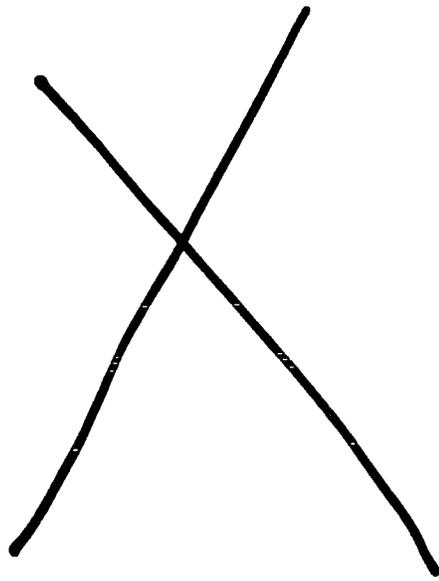
1100 WEST STREET

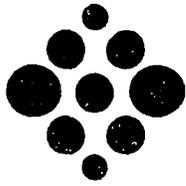


ATTACHMENT III
EMERGENCY EXIT ROUTES

LEGEND	
	EMERGENCY LIGHTS
	FIRE EXTINGUISHER
	PULL STATION
	ALT. EVACUATION ROUTE
	PRIMARY EVACUATION ROUTE







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STERICYCLE, INC. – NORTH SALT LAKE, UTAH

**FUGITIVE DUST CONTROL PLAN
SECTION X**

Revision Date: December 16, 2005



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1. INTRODUCTION

Stericycle, Inc. (Stericycle) has prepared this document including the procedures and systems detailed herein for the North Salt Lake facility in order to satisfy specific requirements contained in Utah Administrative Code in Rule R307-309-4. "Fugitive Dust Control Plan". Under R307-309-4., any person owning or operating sources of fugitive dust, including storage, hauling, or handling operations shall submit and maintain a plan to control fugitive dust to the Executive Secretary. The intent is to address fugitive dust control strategies for sources of fugitive dust. This document is the North Salt Lake facility's Fugitive Dust Control Plan. The facility will adhere to the procedures and systems detailed in this Plan, and the Plan will be routinely updated consistent with substantive changes in facility equipment and practices.

2. FACILITY OPERATIONS

The facility is situated on a 5.23-acre parcel of land in North Salt Lake. The address is 90 North 1100 West. The site is fully developed as an incineration facility. The total improvements include a 4,000-sq. ft. office to the west, attached to a 11,250-sq. ft. fully enclosed processing area and an attached 6,830 sq. ft. fully-enclosed trailer storage and truck wash bay to the east. The perimeter is paved and landscaped with a secured, fenced enclosure surrounding the waste receiving areas.

The facility is located within the Light Industrial and Manufacturing District and all land within a 0.25-mile radius of the facility is zoned as CG, MD and PD (Planned Development). The Planned Development is partially complete as of December 16, 2005. The South Davis County Sewer Plant is located approximately 0.36 miles west of the site.

The facility is equipped with a Joy Energy Systems, Inc. Model 2500-TES incinerator designed to handle 2,500 lb/hr of waste and permitted to burn 1850 lb/hr of waste. The unit is equipped with an automated waste feed system and ash removal system. The primary chamber is equipped with two

natural gas fired burners and the secondary chamber with one natural gas fired burner. The air pollution control system consists of the following components:

- a waste heat boiler to cool the incinerator flue gas;
- A gas cooler used to enhance the removal of HCl in the reactor and minimize the formation of dioxin/furans in downstream equipment (reactor and precipitator);
- A carbon injection system designed to adsorb the dioxin/furans in the reactor, which provides gas/solids contact via mixing;
- A reactor (or dry scrubber system) with sodium bicarbonate addition to maintain system integrity;
- A three-chamber electrostatic precipitator for particulate removal; and
- A wet gas absorber with sodium hydroxide addition for enhanced HCl removal.

In addition to the air pollution control system, a data monitoring and acquisition system has been installed to monitor key process parameters. These process parameters required to be monitored are listed in 40 CFR Part 60, Subpart Ce and in the Utah State Plan for Implementation of Emission Controls for Existing Designated Facilities (Section II, Plan for Hospital, Medical, Infectious Waste Incinerators [the Plan]).

3. FUGITIVE DUST SOURCES AND CONTROL STRATEGIES

Stericycle's North Salt Lake facility has been designed to minimize the sources of fugitive dust. In addition, Stericycle takes all reasonable measure to minimize the potential of fugitive dust. The potential fugitive dust sources at the facility include:

- Parking lot and access roadway
- Bottom Ash System
- Fly Ash System

Provided below is a summary of the fugitive dust sources and their respective control strategies.

3.1 PARKING LOT AND ACCESS ROADWAY

The parking lot and the access roadway are the primary potential source of fugitive dust at the facility. Dust may be generated on-site or carried on-site with the delivery trucks. Stericycle employees utilize the following preventive and mitigative procedures to minimize the potential for fugitive dust generation from the parking lot and access roadway:

- Daily “Basic Care” rounds that include a survey of the parking lot and access roadway looking for a buildup of dust, debris, and/or trash that could become airborne.
- Periodic sweeping and/or vacuuming, as needed, to minimize the buildup of dust, debris, road salt, sand, crushed slag, and/or trash.
- Loading and off-loading of vehicles in fully enclosed processing area and/or trailer storage and truck wash bay area.

3.2 BOTTOM ASH SYSTEM

The bottom ash system is a potential source of fugitive dust at the facility. Ash from the primary chamber drops into a pit where it is quenched and loaded into a roll-off. The ash is periodically tested and sent to a landfill. The chance for fugitive dust generation is minimal due to the water content of the ash; however, Stericycle employees utilize the following preventive and mitigative procedures to minimize the potential for fugitive dust generation from the bottom ash system:

- Daily “Basic Care” rounds that include a survey of ash pit, quench system, and roll-off storage for proper operation and to ensure that there are no fugitive emissions that could escape the fully enclosed processing area.
- Periodic sweeping of the processing area, as needed, to minimize the buildup of ash, dust, debris, and/or trash.
- Standard operating procedures that ensure that the processing area remains fully enclosed during normal operation.

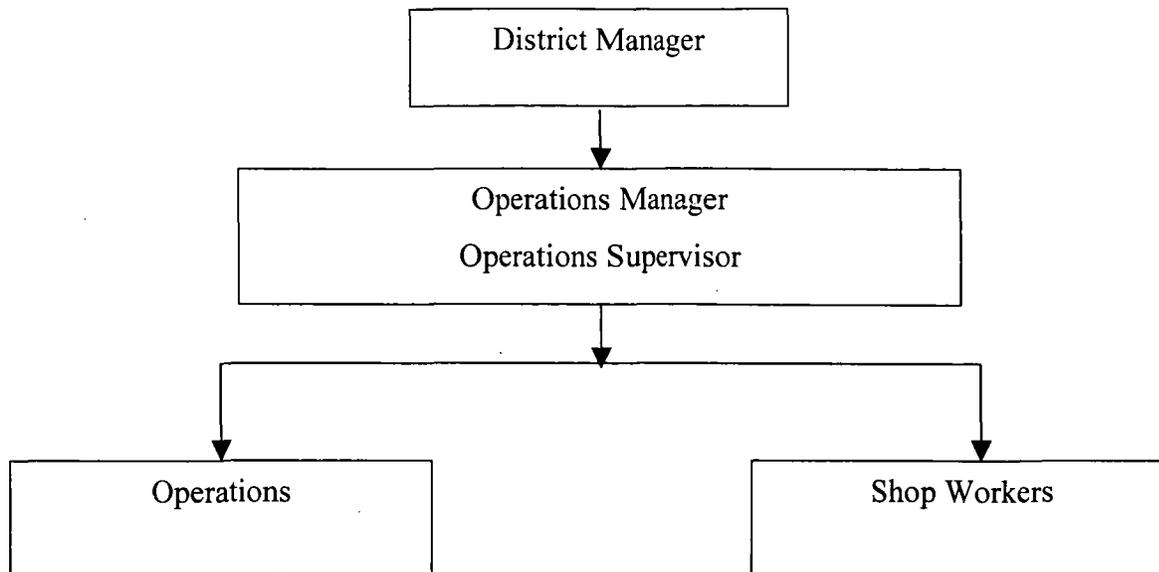
3.3 FLY ASH SYSTEM

The fly ash system is a potential source of fugitive dust at the facility. Ash from the electrostatic precipitator drops into a ~1-ton Heilos bag where it is stored. The ash is treated as hazardous and is sent to an approved landfill. The chance for fugitive dust generation is minimal; however, Stericycle employees utilize the following preventive and mitigative procedures to minimize the potential for fugitive dust generation from the fly ash system:

- Daily “Basic Care” rounds that include a survey of ash collection system for proper connection and to ensure that there are no fugitive emissions that could escape the fully enclosed processing area.
- Periodic sweeping of the processing area, as needed, to minimize the buildup of ash, dust, debris, and/or trash.
- Standard operating procedures that ensure that the processing area remains fully enclosed during normal operation.

4. RESPONSIBLE PARTIES

Overall responsibility for the Fugitive Dust Control Plan lies with the North Salt Lake District Manager (or designated signee) who is the Responsible Official. The North Salt Lake Facility has identified two coordinators who have been charged by the District Manager with overseeing all aspects of the facility’s Fugitive Dust Control Plan requirements: the Operations Manager, and the Operations Supervisor. The underlying responsibilities for implementing the Plan, however, lie within the operations and shop worker personnel. Identified personnel are charged with implementing the plan, documenting the required information, updating the plan as required, and developing the appropriate reports. The following organization chart specifies the responsible parties at the North Salt Lake Facility who are charged with the designated related activities:



Roles and Responsibilities

Responsible Party	Responsibility
District Manager	Ultimate Fugitive Dust Control Plan Authority.
Operations Manager/Operations Supervisor	Coordination of all fugitive dust control activities, responsible for recordkeeping and reporting, and modifying the Plan as necessary. Overview and oversight of Plan.
Operations/Shop Workers	Implement the Plan, complete all documentation, maintain records/update data as necessary, communicate/notify Operations Manager/Supervisor of all fugitive dust events, changes to equipment, and events not addressed in the Plan.

5. RECORDKEEPING AND REPORTING

The Utah Administrative Code has identified recordkeeping and potential reporting requirements for all persons/facilities that apply salt, crushed slag, or sand to roads in Salt Lake County. There are additional requirements for applied materials that are less than 92% sodium chloride (NaCl). The recordkeeping requirements for applied materials that are at least 92% NaCl are summarized below.

Salt Application

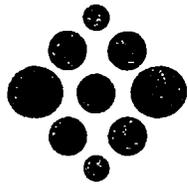
- Record the quantity of salt applied.
- Record the weight of insoluble solids in the salt.
- Record the percentage of the material that is NaCl.

Sand or Crushed Slag Application

- Record the quantity of sand or crushed slag applied.
- Record the percent by weight of fine material that passes the number 200 sieve in a standard gradation analysis.

All records must be maintained for a period of at least two (2) years and the records shall be available to the Executive Secretary or his designated representative upon request. There are no other reporting requirements.

XI



Stericycle®

STERICYCLE, INC. – NORTH SALT LAKE, UTAH

**INDUSTRIAL SAFETY PROGRAM
SECTION XI**

Revision Date: May 12, 2004

**SECTION XI: INDUSTRIAL SAFETY PROGRAM
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INDUSTRIAL SAFETY PROGRAM

1.0 INTRODUCTION

It is the intent of Stericycle, Inc of Utah to adopt and voluntarily comply with all pertinent OSHA regulations, as well as all Federal, State, and Local agency regulations pertaining to Industrial Safety. These Agencies include, but are not limited to:

- 1.1.1 UOSH (Utah Department of Occupational Safety and Health)
- 1.1.2 NEC (National Electrical Code)
- 1.1.3 ANSI (American National Standard Institute)
- 1.1.4 NFPA (National Fire Protection Association)
- 1.1.5 UBC (Uniform Building Code)
- 1.1.6 UFC (Uniform Fire Code)

2.0 PURPOSE

2.1 Stericycle is committed to providing a safe and healthful work environment for all employees. Stericycle recognizes that an appropriate Industrial Safety Program is an intregal part of a healthy company. With the implementation of an aggressive Industrial Safety Program, Stericycle expects to realize several goals:

- 2.1.1 **Zero Injuries and Illnesses.** While injuries and illnesses are often unforeseeable and most always unexpected, they are also preventable in most instances. Most injuries and illnesses are the result of an unsafe act. The method in which each employee accomplishes his/her task will be governed by the safety training provided to each employee. By this mechanism, Stericycle hopes to eliminate injuries due to unsafe acts and realize it's goal of zero injuries.
- 2.1.2 **Increased Quality and Productivity.** When employees work in an environment free from accidents and injury, it affects quality and productivity in a positive manner through:
 - 2.1.2.1 Decreased lost time due to injury/illness
 - 2.1.2.2 Decreased limitations due to medical restrictions

- 2.1.2.3 Decreased employee turnover rates due to a more positive atmosphere
- 2.1.3 Provide a structured program for implementation of safety policies for the purpose of ensuring uniformity of the industrial safety program.
- 2.1.4 Establish lines of communication for safety issues.
- 2.1.5 Establish lines of responsibility and accountability for safety issues.
- 2.1.6 Reduce monetary losses through:
 - 2.1.6.1 Reduced medical and worker's compensation costs.
 - 2.1.6.2 Increased quality.
 - 2.1.6.3 Elimination of personal injury and property damage.
- 2.2 The ultimate objective of this program is to eliminate workplace accidents, injuries, and illnesses by conducting facility processes in a safe, effective, and efficient manner. To realize these objectives, it will require a concerted effort from management, supervision, and employees.
- 2.3 The success of this industrial safety program depends on a high degree of commitment from all levels of Stericycle personnel. All managers, supervisors, and employees shall make every effort to provide a work environment which is free from hazards which may cause death, serious injury or result in property damage.
- 2.4 All levels of management and supervision must accept responsibility for eliminating unsafe acts.
- 2.5 As previously stated, our success as a company in developing a successful industrial safety program is the responsibility of each and every employee and requires a commitment from all personnel.

3.0 RESPONSIBILITIES

- 3.1 For risk management to be effective, primary responsibility for implementation and enforcement of this program must be assigned to specific individuals. By assigning responsibility to individuals, implementation and integration of these safety policies will be more effective. However this does not diminish the responsibility of every employee to work safely and follow the program policies.
- 3.2 The following definitions of responsibilities will provide insight into the requirements for the positions within the Stericycle organization, to effectively promote and implement this Industrial Safety Program and it's

safety policies and procedures.

- 3.2.1 **General Responsibilities** - Supervisors and leads are responsible for making every reasonable effort to maintain a safe and healthful work environment that is free from all recognized hazards that cause or may cause death or serious injury to employees or cause damage to facilities or equipment . Supervisors and leads shall never require an employee to perform an unsafe act or work in an area that has been recognized as unsafe. The only time an employee will be allowed in an unsafe area is when he is making efforts to render that area safe, and only after procedures have been implemented to control the unsafe conditions.
- 3.2.2 **Area Manager Environmental Safety and Health (AMESH)** - The AMESH shall:
 - 3.2.2.1 Direct the Stericycle Health and Safety Program.
 - 3.2.2.2 Develop new policies and procedures for approval.
 - 3.2.2.3 Communicate issues with management to promote their involvement.
 - 3.2.2.4 Provide leadership and direction for Stericycle Safety Program implementation.
 - 3.2.2.5 Monitor programs and activities through monthly safety surveys.
 - 3.2.2.6 Provide initial review and implementation of the Stericycle Health and Safety Program.
 - 3.2.2.7 Provide yearly review/audit of the Stericycle Health and Safety Program to determine effectiveness, and implement upgrades.
 - 3.2.2.8 Monitor regulatory developments.
 - 3.2.2.9 With the Facility and Transportation Manager, establish a clear understanding of each employee's responsibilities on specific duties.
 - 3.2.2.10 Review all accident investigation reports thoroughly and initiate corrective action.
 - 3.2.2.11 Review facility safety performance and take any necessary corrective action.
 - 3.2.2.12 Assign responsibility, authority, and accountability for implementing the safety policies and procedures.
 - 3.2.2.13 Maintain first-aid station and supplies.
 - 3.2.2.14 Provide daily report of all injuries.

- 3.2.2.15 Maintain the OSHA 300 Log.
- 3.2.2.16 Maintain the physicians'/hospitals'/therapists' notes on all medical cases.
- 3.2.2.17 Interact with the Worker's Comp. Insurance companies.
- 3.2.2.18 Maintain the employer's First Report of Injury forms.
- 3.2.2.19 Ensure that the supervisor of injured employees fills out accident reports.
- 3.2.2.20 Monitor compliance of first aid, medical services, health care, and medical procedures.
- 3.2.2.21 Communicate all claims and injuries to the Facility Manager for review.
- 3.2.2.22 Work with Supervisors and Leads to find and eliminate workplace hazards.
- 3.2.2.23 Oversee and conduct First Responder Programs and training.
- 3.2.2.24 Provide aggressive case management to aid employees in a quick and full recovery.
- 3.2.2.25 Provide first-aid for injured employees.
- 3.2.2.26 Manage worker's compensation claims.
- 3.2.2.27 Provide record-keeping for injured employees medical records.
- 3.2.2.28 Oversee drug screening for new employees, injured employees, employees involved in accidents, random checks, and probable cause incidents.
- 3.2.2.29 Provide record-keeping and documentation of safety training programs.
- 3.2.2.30 Prepare and update emergency preparedness program.
- 3.2.2.31 Oversee safety engineering and special projects that may affect employee safety.
- 3.2.2.32 Perform Industrial Hygiene monitoring of workplace environment.
- 3.2.2.33 Promote and maintain chemical safety.
- 3.2.2.34 Instruct employees in the use of personal protective equipment.
- 3.2.2.35 Provide training and/or assist in the creation of training classes for regulatory compliance.

3.2.3 Facility and Transportation Managers – Facility and Transportation

Managers shall:

- 3.2.3.1 Require supervisors and leads to be sufficiently trained to carry out their responsibilities in implementing safety policies and procedures.
- 3.2.3.2 Provide leadership and direction for the safety policies and procedures.
- 3.2.3.3 Authorize adequate resources for implementation of safety policies and procedures.
- 3.2.3.4 With the assistance of the AMESH determine safety code requirements from federal, state, local, or other agencies and provide a means to meet those requirements.

3.2.4 Supervisors and Leads - Supervisors and Leads shall:

- 3.2.4.1 Become sufficiently trained to carry out their responsibilities to implement the safety policies and procedures.
- 3.2.4.2 Provide leadership and direction for the safety policies and procedures.
- 3.2.4.3 Assure that daily safety inspections are conducted in their areas.
- 3.2.4.4 Assure that safety violations in their areas are corrected.
- 3.2.4.5 Inform employees of the nature and hazards of materials with which they are working.
- 3.2.4.6 Report accidents and near misses to the AMESH and aid the in accident investigations.
- 3.2.4.7 Assure that safety and health instructions and training are documented.
- 3.2.4.8 Enforce safety rules and regulations.
- 3.2.4.9 Monitor safe work practices.
- 3.2.4.10 Review safety issues, policies, and procedures with his/her employees.
- 3.2.4.11 Through action, example, and training, instill a sincere attitude toward safety in all his/her employees.
- 3.2.4.12 Ensure that adequate and suitable safety equipment is furnished, used, and maintained.

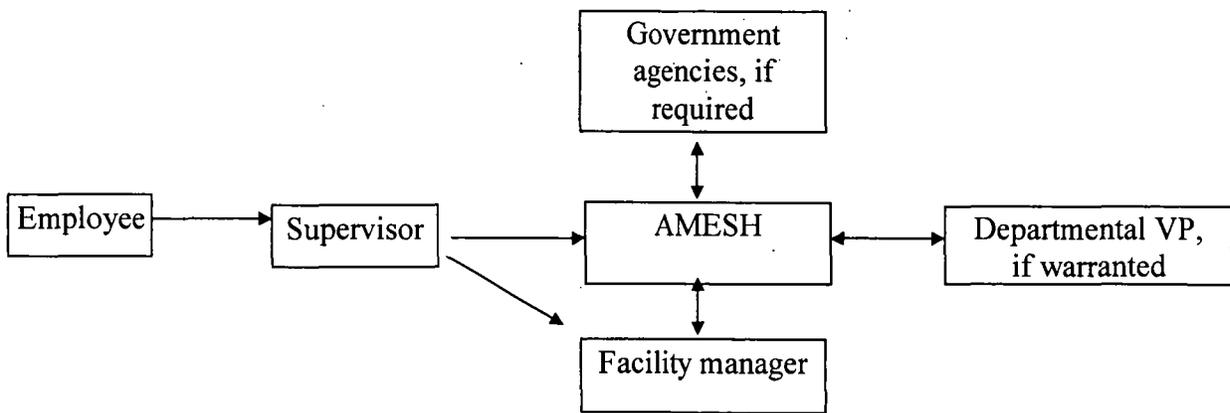
3.2.5 Employee responsibilities - The safety policies of Stericycle are for the benefit of all employees.

- 3.2.5.1 All Stericycle employees shall be required to comply with the Industrial Safety Program, as well as all applicable Federal, State, and Local agency regulations that pertain to Industrial Safety.
- 3.2.5.2 All employees are responsible for the safety of others as well as him/herself.
- 3.2.5.3 Any employee who chooses to violate these policies will be subject to disciplinary action which can include termination.
- 3.2.5.4 An employee may be terminated on a first warning for violating a policy or committing an unsafe act which could have resulted in a serious injury to himself or others, or may have caused serious property damage.

4.0 ACCIDENT REPORTING AND INVESTIGATION PROCEDURES

4.1 An effective means of injury/illness prevention is through accident investigation. Stericycle is committed to thoroughly investigating all injuries, property damage and other incidents including near-miss. Any accident that results in an injury to a Stericycle employee or in damage to Stericycle equipment or property will be investigated and a detailed report prepared. When such accidents occur the supervisor and the facility safety coordinator must be notified as soon as possible so that an accident investigation can be initiated.

4.2 Flow Chart for Incident/Accident Notification:



4.3 If during the process of investigation a policy violation is found, the AMESH shall be notified immediately. If a situation of eminent danger exists due to the violation, the process will be terminated immediately. If the process is terminated, the Safety Director will immediately notify applicable managers and supervisors so that an alternative to the process may be found.

5.0 HEALTH AND SAFETY PROCEDURES

5.1 Safety

- 5.1.1 Employee training is a key element of the safety program. The procedures taught include the standards for accident, injury, and disease prevention.
- 5.1.2 Regular safety meetings are held with employees covering various topics related to waste handling, OSHA, DOT, safe work practices, and other federal and local regulations as described in Personnel Training Section V.

5.2 Occupational Health

5.2.1 Physical Examinations:

- 5.2.1.1 All employees will be drug tested and receive a physical exam at the time of hire. Transportation employees will be required to have biannual physical examinations. Results from exams are reported to the employee, but only those results, which directly relate to the employee's job performance, are reported internally.

5.2.2 Vaccinations/Exposure Protocol

5.2.2.1 Hepatitis B:

- 5.2.2.1.1 Hepatitis B vaccinations are offered to all employees, free of charge.

5.2.2.2 Tetanus:

- 5.2.2.2.1 Tetanus vaccination boosters are given in accordance with CDC/WHO guidelines.

5.2.2.3 Exposures:

- 5.2.2.3.1 The Stericycle Exposure Protocol is followed for all contaminated needle sticks, puncture wounds, and body fluid exposures, and includes first aid, medical treatment, appropriate vaccinations, and follow-up antibody tests for blood borne pathogens.

5.2.3 Drug Screening Program:

5.2.3.1 All employees are required to pass a urine drug screen prior to an employment offer. All DOT regulated employees receive "Substance Abuse: The Need to Know" instruction as part of their training.

5.2.4 Medical Facilities:

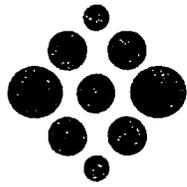
5.2.4.1 The occupational health medical facility (clinic) used for physicals, testing, exposure follow-up, and urgent medical treatment is:

Concentra
1735 S. Redwood Rd.
Suite 115
Salt Lake City, UT 84104
801-973-4434

5.2.4.2 After hours medical care is provided by:

Lakeview Hospital
630 Medical Drive
Bountiful, Utah
(801) 299-1420

XI



Stericycle®

STERICYCLE, INC. – NORTH SALT LAKE, UTAH

**CONTROL OF DISEASE VECTORS
SECTION XII**

Revision Date: May 12, 2004

SECTION XII: CONTROL OF DISEASE VECTORS
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CONTROL OF DISEASE VECTORS

1.0 Purpose

To establish and maintain safe, effective, and an environmentally sound program to prevent or control pests and disease vectors that may adversely impact human health.

2.0 Scope

This section applies to the North Salt Lake Facility and grounds.

3.0 Definitions

Community Available Pest Abatement Programs – Available procedures used to monitor, prevent, and/or control pests and disease vectors in the local community.

Disease Vector - means any rodents, flies, mosquitoes, or other animals, including insects, capable of transmitting disease to humans.

Putrescent Waste – Solid waste that contains organic matter capable of being decomposed by microorganisms.

4.0 Responsibilities

It shall be the responsibility of all Stericycle, Inc. of Utah personnel to follow the monitoring, prevention, and control procedures outlined in this section.

5.0 Procedures

5.1 Sanitation:

5.1.1 Effective sanitation measures and proper policing of grounds are of primary importance in disease vector control. With proper sanitation, less dependence need be placed on other measures. Any fermenting or decaying organic matter is an attraction for disease vectors. Therefore, the elimination of all sources of attraction for disease vectors is essential. Proper disposal of wastes, including all medical waste and such liquids as wash water, reduces the attraction of disease vectors to the facility and grounds.

- 5.2 Waste Received by the Facility:
 - 5.2.1 Medical waste transported to the facility shall be in enclosed vehicles. Waste received by the facility shall be in containers with tight fitting lids and lined with tied bags.
 - 5.2.2 Putrescent waste, or waste generated greater than 7 days prior to arrival at the facility shall be refrigerated to 40 °F or less.
- 5.3 Prevention of Entry:
 - 5.3.1 Medical waste shall be containerized and covered with a tight fitted lid until processed. At no time shall waste container liners be untied or opened at the facility.
- 5.4 Harborage elimination:
 - 5.4.1 As harborage are eliminated, populations of disease vectors are reduced. The reduction of cracks and crevices and general elimination of harborage is extremely important in disease vector control. Typical harborage include the following:
 - 5.4.1.1 Standing water.
 - 5.4.1.2 Holes for plumbing and electrical lines, as well as electrical switches and fuse boxes.
 - 5.4.1.3 Old and torn insulation.
 - 5.4.1.4 Areas between walls.
 - 5.4.1.5 Soiled sumps or basins.
- 5.5 Container and Vehicle Washing:
 - 5.5.1 The reusable containers are disinfected after each use. Reusable containers are disinfected using one of the following methods:
 - 5.5.1.1 Exposing the container to a minimum of 180°F wash water.
 - 5.5.1.2 The use of a commercial cleaning agent. The agent shall be diluted to the manufacturer's specified ratio and the containers washed down and rinsed with clean water. Disposal of all resulting effluent shall comply with local regulations.

5.5.1.3 A list of suggested agents is as follows:

- i. Quaternary Ammonium Compounds
- ii. Chlorine (bleach)

5.5.1.4 Following disinfection, reusable containers are visually inspected for cleanliness.

5.5.2 Trucks and trailer interiors are to be decontaminated as required to maintain sanitary and clean conditions. Prior to any vehicle leaving the disposal site after unloading, it is necessary to decontaminate the cargo body if there are visible signs of soil or leakage.

5.5.2.1 One of the following methods shall be used to disinfect trailer interiors:

5.5.2.2

5.5.2.2.1 Exposing the vehicle cargo compartment to 180°F steam

5.5.2.2.2 The use of a commercial cleaning agent. The agent shall be diluted to the manufacturer's specified ratio and the cargo compartment washed down and rinsed with clean water.

5.5.2.2.3 A list of suggested agents is as follows:

- a. Quaternary Ammonium Compounds
- b. Chlorine (bleach)

5.5.2.3 Procedures:

5.5.2.3.1 Disinfect by washing the inside of the cargo area while wearing the appropriate PPE. If the interior walls have visible material they may need further washing by using a brush and degreaser. A push broom may be used to push standing water out of the truck.

5.5.2.3.2 The exterior of the truck may be washed and the cab cleaned at this time also.

5.5.2.3.3 A push broom should be used to push standing water out of the trailer.

5.6 Chemical Control:

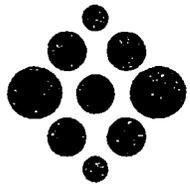
5.6.1 Reliance on chemical control is undesirable even if completely effective because this method is meant to supplement sanitary control measures. Some aspects of chemical control may include:

5.6.1.1 Bait Stations

5.6.1.2 Insect Repellant

5.6.1.3 Use of community available pest abatement programs

XIII



Stericycle®

STERICYCLE, INC. – NORTH SALT LAKE, UTAH

**INFECTION CONTROL
SECTION XIII**

Revision Date: May 12, 2004

**SECTION XIII: INFECTION CONTROL
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INFECTION CONTROL

1.0 Training:

All Stericycle employees are trained initially and updated annually as described in Section V (Personnel Training). Infection control is a central topic of courses such as, Bloodborne Pathogens, Hazardous Materials Management, personal hygiene, and personal protective equipment (PPE).

2.0 Vaccinations:

All Stericycle employees who have a potential risk of exposure to bloodborne pathogens are given the opportunity to receive the Hepatitis B vaccination series free of charge. The Hepatitis B vaccination is also offered after potential exposures to all employees.

3.0 Personal Protective Equipment (PPE):

All Stericycle employees are required to wear a provided work uniform, which consists of a pair of pants, a long-sleeved shirt or coveralls, and steel-toes shoes/boots. Face shields, safety glasses, latex gloves, puncture-resistant gloves, fluid-resistant aprons, leather aprons, and rubber boots are also provided on a task specific basis in order to insure exposure protection. Hooded, and booted tyvek suits are also available for use if conditions require such protection.

4.0 Reusable Containers:

Rigid reusable containers are available to all of our customers as a means of reducing exposure to blood borne pathogens. Reusable containers reduce the risk from leaking, soiled and/or mis-packaged boxes. Reusable containers also reduce the risk of needle stick injuries.

The reusable containers are disinfected after each use. Reusable containers are disinfected using one of the following methods:

1. Exposing the container to a minimum of 180°F wash water.
2. The use of a commercial cleaning agent. The agent shall be diluted to the manufacturer's specified ratio and the containers washed down and rinsed with clean water. Disposal of all resulting effluent shall comply with local regulations.

A list of suggested agents is as follows:

- i. Quaternary Ammonium Compounds
- ii. Chlorine (bleach)

Following disinfection, reusable containers are visually inspected for cleanliness.

5.0 Incineration Process:

To achieve pathogen destruction during the incineration process, all waste material is exposed to approximately 1500 F in the primary chamber of the incinerator. At this temperature all bloodborne pathogens are destroyed.

6.0 Vehicle Decontamination:

Trucks and trailer interiors are to be decontaminated as required to maintain sanitary and clean conditions. Prior to any vehicle leaving the disposal site after unloading, it is necessary to decontaminate the cargo body if there are visible signs of soil or leakage.

A. One of the following methods shall be used to disinfect trailer interiors:

1. Exposing the vehicle cargo compartment to 180°F steam.
2. The use of a commercial cleaning agent. The agent shall be diluted to the manufacturer's specified ratio and the cargo compartment washed down and rinsed with clean water. Disposal of all resulting effluent shall comply with local regulations.

A list of suggested agents is as follows:

- i. Quaternary Ammonium Compounds
- ii. Chlorine (bleach)

B. Procedures:

1. Disinfect by washing the inside of the cargo area while wearing the appropriate PPE. If the interior walls have visible material they may need further washing by using a brush and degreaser. A push broom may be used to push standing water out of the truck.
2. The exterior of the truck may be washed and the cab cleaned at this time also.
3. A push broom should be used to push standing water out of the trailer.

into the reactor, where they are intimately contacted with the flue gas through the multiple passes of the reactor. The carbon injected into the system absorbs the dioxin/furans and mercury that may be present in the flue gas.

7.0 Electrostatic Precipitator (Dry Scrubber System)

The gas stream (with reacted and unreacted Sodium Bicarbonate reagent and spent activated carbon) enters the electrostatic precipitator. The precipitator has three separate chambers each with their own transformer/rectifier controller to enhance particulate removal from the gas stream. The transformer/rectifier controller is manufactured by NWL Transformers and is a model 35699.

In the precipitator, particles in the gas are electrically charged when they pass by high D.C. voltage wires emitting a corona. The charged particles migrate to and are captured by grounded collection plates as "flyash". The collected flyash is periodically removed by a system of rappers and vibrators, so that it falls by gravity into the precipitator hopper. The fly ash collected in the hopper of the precipitator is continuously discharged via a screw conveyor.

8.0 Wet Gas Absorber

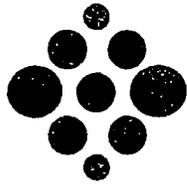
The wet gas absorber removes acid gas from the gas stream by absorbing the gas into a scrubbing solution. This is accomplished with packing material inside the absorber tower, which increases the surface area exposure of the flues gas to the scrubbing liquor. Sodium Hydroxide is used in the scrubbing solution to enhance the removal of HCl. The pH controller for the absorber is a Great Lakes instrument model #672P. In addition, the wet gas absorber tower is equipped with a dry demister to remove excess moisture from the gas stream prior to existing the stack.

9.0 Data Acquisition System (DAS)

To satisfy the requirements of both Part H, Table 6 of Utah's State Plan for Implementation of Emission Controls for Existing Designated Facilities, Section II, Plan for Hospital, Medical, Infectious Waste Incinerators (the Plan) and § 60.57c, the plant is equipped with a Continuous Data Acquisition System (DAS). Stericycle monitors the following process parameters with the DAS system onsite:

1. Maximum Waste Charge Rate
2. Minimum Secondary Chamber Temperature
3. Maximum Reactor Inlet Temperature
4. Minimum Dioxin/Furan and Hg Sorbent Rate (Carbon Injection)
5. Minimum Absorber Liquor Flow Rate
6. Minimum Absorber Liquor pH
7. Bypass Stack Position

XIIV



Stericycle®

STERICYCLE, INC. – NORTH SALT LAKE, UTAH

**ENGINEERING DESIGN AND OPERATION
SECTION XIV**

Revision Date: May 12, 2004

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ENGINEERING DESIGN AND OPERATION

1.0 Introduction

Equipment specifications for the Joy Energy Incinerator and the facility's air pollution control equipment are maintained on-site. Equipment drawings can be found in Section XVI (Design Drawings).

2.0 Incinerator Design

The incinerator is a dual-chamber, controlled-air, modular unit equipped with an automatic feed system and an ash removal system. Wastes fed to the primary combustion chamber are held for approximately 2 hours at temperatures of 1500 to 1800 degrees Fahrenheit (°F). Gases produced in the combustion process are further incinerated in the secondary chamber at a minimum temperature of 1834 °F, and a minimum residence time of three seconds. The design maximum capacity of the unit is 2500 pounds of waste per hour. The average permitted capacity of the unit is 2025 pounds of waste per hour.

The incinerator is a Joy Energy TES 2500. The major components of the system are described.

- 2.1 Control Panel: A weatherproof panel containing controls for complete programming of the burning cycles. The control panel is designed to maintain minimum design temperatures in the primary and secondary chambers by automatically modulating the operation (figuring rate) of the ignition burners as well as the combustion air supply. The panel is equipped with programmable controls, graphic displays, motor starters, circuit breakers, and a two-pen recorder with continuous readout for measured parameters.
- 2.2 Automatic Waste Feed System: The system consists of a hydraulic ram feeder to charge waste into the primary combustion chamber of the incinerator. The system has a waste feed hopper with a volume of 62.5 cubic feet. The waste feed system is controlled such that the capacity of the incinerator is not exceeded.
- 2.3 Primary Combustion Chamber: The primary combustion chamber is 918 cubic feet in volume and is equipped with two 2,300,000 Btu/hour natural gas burners, clean-out door, two ash rams, sealed guillotine damper assembly, combustion air fan, and high-efficiency flame port. The materials of construction consist of steel plate, which is protected on the

interior by an insulated liner that consists of both, thermal insulation, and refractory material. The total hearth area is 144 square feet.

2.4 Secondary Combustion Chamber: The secondary combustion chamber is 622 cubic feet in volume and is equipped with a 6,014,000 Btu/hour natural gas burner, clean-out door, and combustion air fan. The materials of construction consist of steel plate and an interior lining, which consists of thermal insulation and refractory material.

2.5 Automatic Ash Removal System: Ash is discharged from the primary combustion chamber through a sleeved opening in the chamber floor to a water-filled steel quench tank located in a concrete pit below the chamber. A hydraulic hoe is moved in and out of the tank to automatically move the ash up an incline out of the tank to a point above grade, where it is discharged to an ash removal container.

3.0 Waste Heat Boiler

The waste heat boiler is used to reduce the temperature of the gas stream exiting the incinerator's secondary chamber. The boiler is an Apache model # MS8-WH-2904-S200-M manufactured by Superior Boiler Works, Inc. with a maximum design pressure of 200 psig steam. The maximum inlet flue gas temperature is 2400 °F. The boiler is equipped with two Kunkle safety valves set at 200 psig.

4.0 Condenser

An air-cooled condenser condenses the steam generated in the boiler. The condenser is a horizontal model #A135 manufactured by FIN-X, Inc. with a design capacity of 150 psig steam and 300 °F temperature.

Saturated steam is sent from the boiler to the condenser, where it is returned to a liquid state and piped from the condenser outlet to the Boiler Feed Water Tank.

5.0 Evaporative Cooler

The flue gas exiting the boiler is further cooled to less than 400 °F in the evaporative cooler. The tower is lined with refractory material for thermal insulation and equipped with an air atomized spray nozzle. Cooling is accomplished by spraying finely atomized water into the tower, which is sized for the evaporative rate. This minimizes the formation of dioxin/furans further downstream.

6.0 Reactor (Dry Scrubber System)

Exhaust gas from the evaporative cooler enters the multi-pass, dry reactor. Pulverized Sodium Bicarbonate and activated carbon are pneumatically injected

XW



STERICYCLE, INC. – NORTH SALT LAKE, UTAH

**DESIGN DRAWINGS
SECTION XV**

Revision Date: May 12, 2004

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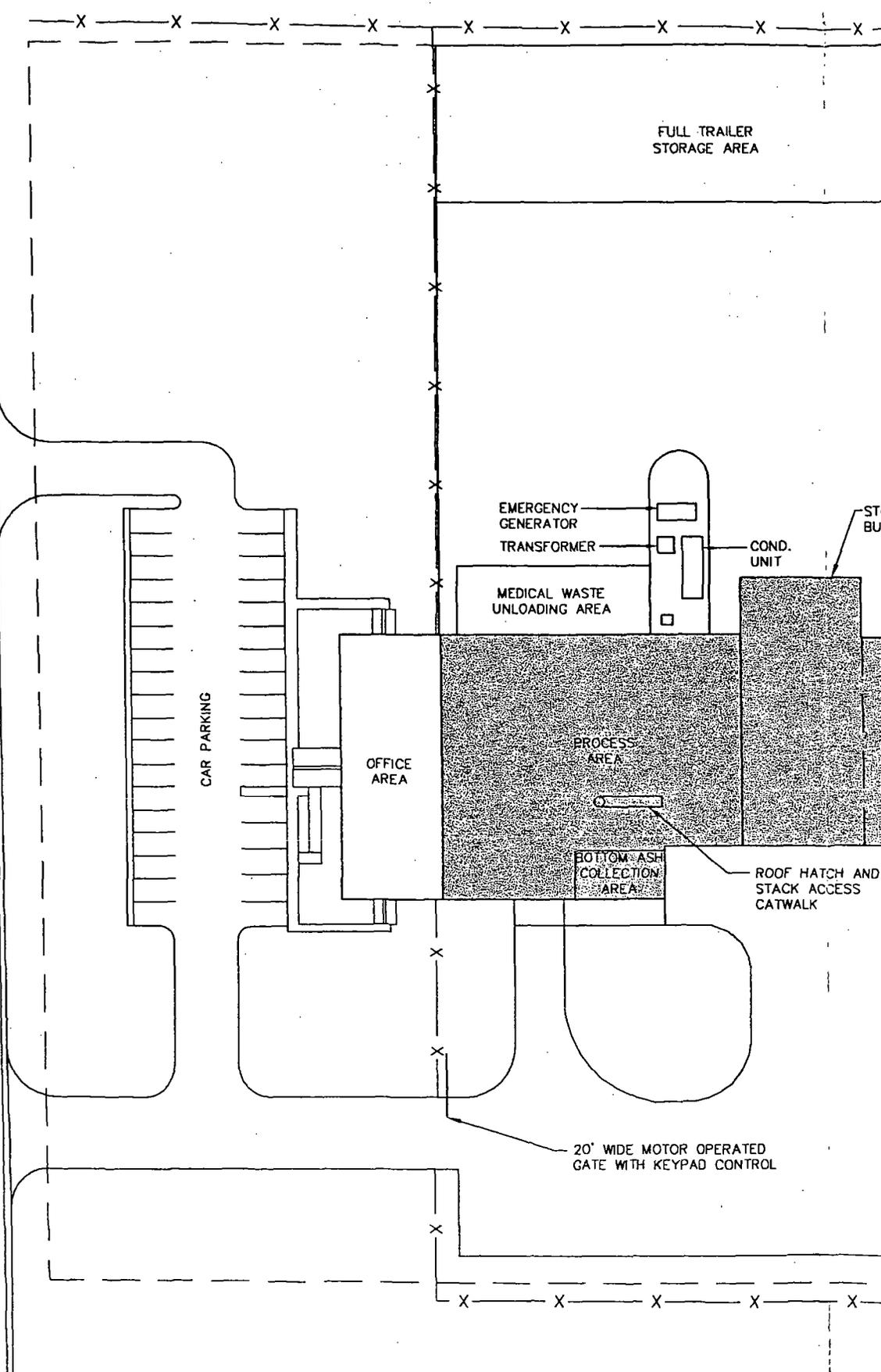
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1100 WEST STREET



FULL TRAILER STORAGE AREA

EMERGENCY GENERATOR
TRANSFORMER

COND. UNIT

MEDICAL WASTE UNLOADING AREA

CAR PARKING

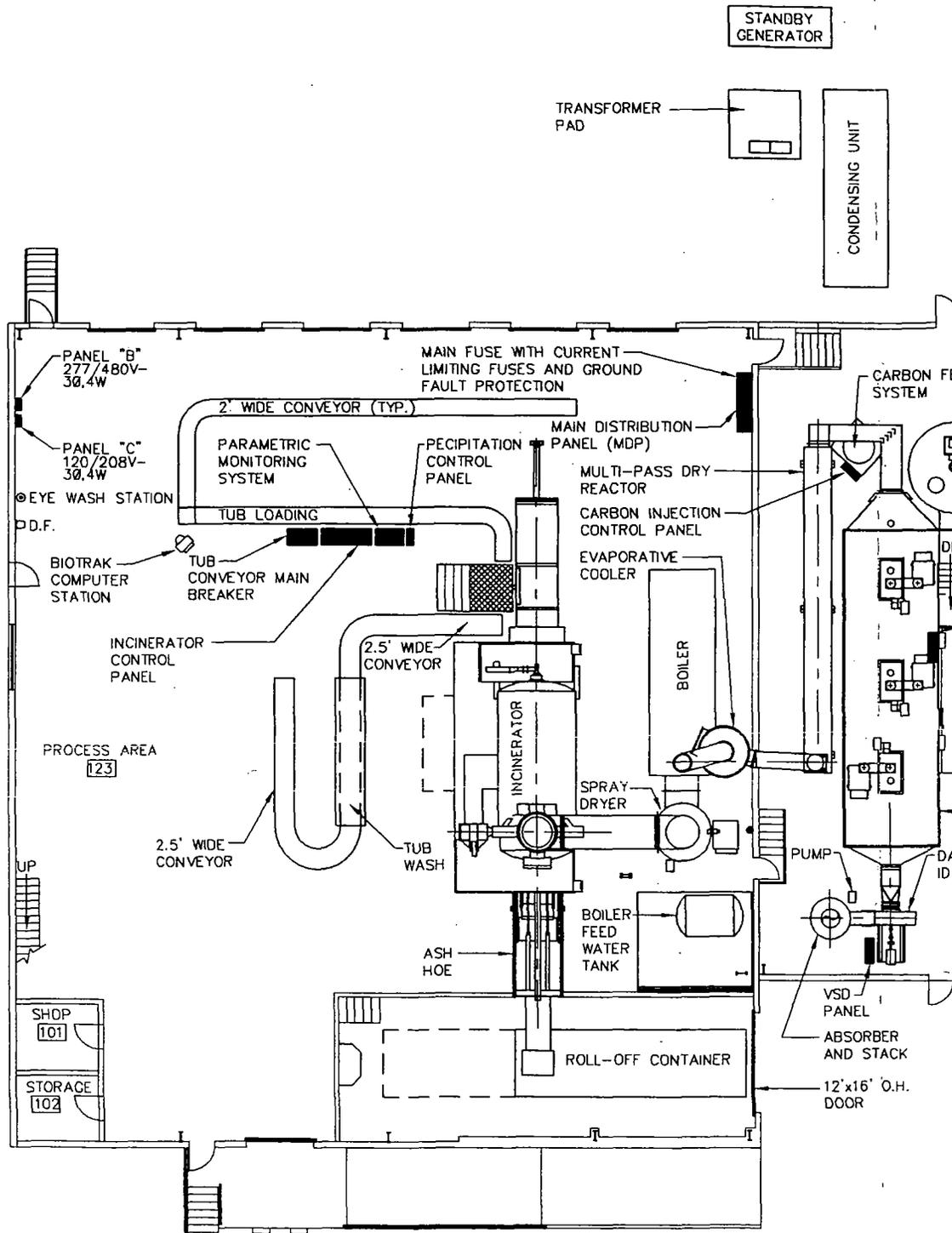
OFFICE AREA

PROCESS AREA

BOTTOM ASH COLLECTION AREA

ROOF HATCH AND STACK ACCESS CATWALK

20' WIDE MOTOR OPERATED GATE WITH KEYPAD CONTROL



INSTRUMENTATION SYMBOLS

 LOCAL CONTROL ELEMENT

 PLC LOCATION

 PLC CONTROL INTERLOCK

'A' LOCATION DESIGNATIONS

F = FLOW

DP = DIFFERENTIAL PRESSURE

H = HAND

L = LEVEL

P = PRESSURE

T = TEMPERATURE

V = VIBRATION

pH = SOLUTION pH

X = POSITION

C = CONDUCTIVITY

Tr = TRANSFORMER/RECTIFIER

'B' LOCATION DESIGNATIONS

A = ALARM

E = CONTROL ELEMENT

G = GAUGE

I = INDICATING

O = OFF

S = SWITCH (SELECTOR AFTER H)

T = TRANSMITTER

'C' LOCATION DESIGNATIONS

A = AUTOMATIC

C = CONTROLLER

H = HIGH ALARM

HH = HIGH INTERLOCK TRIP

L = LOW ALARM

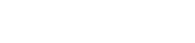
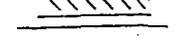
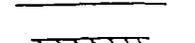
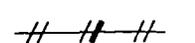
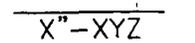
LL = LOW INTERLOCK TRIP

R = RECORDING

VALVE DE



LINE DESIGN

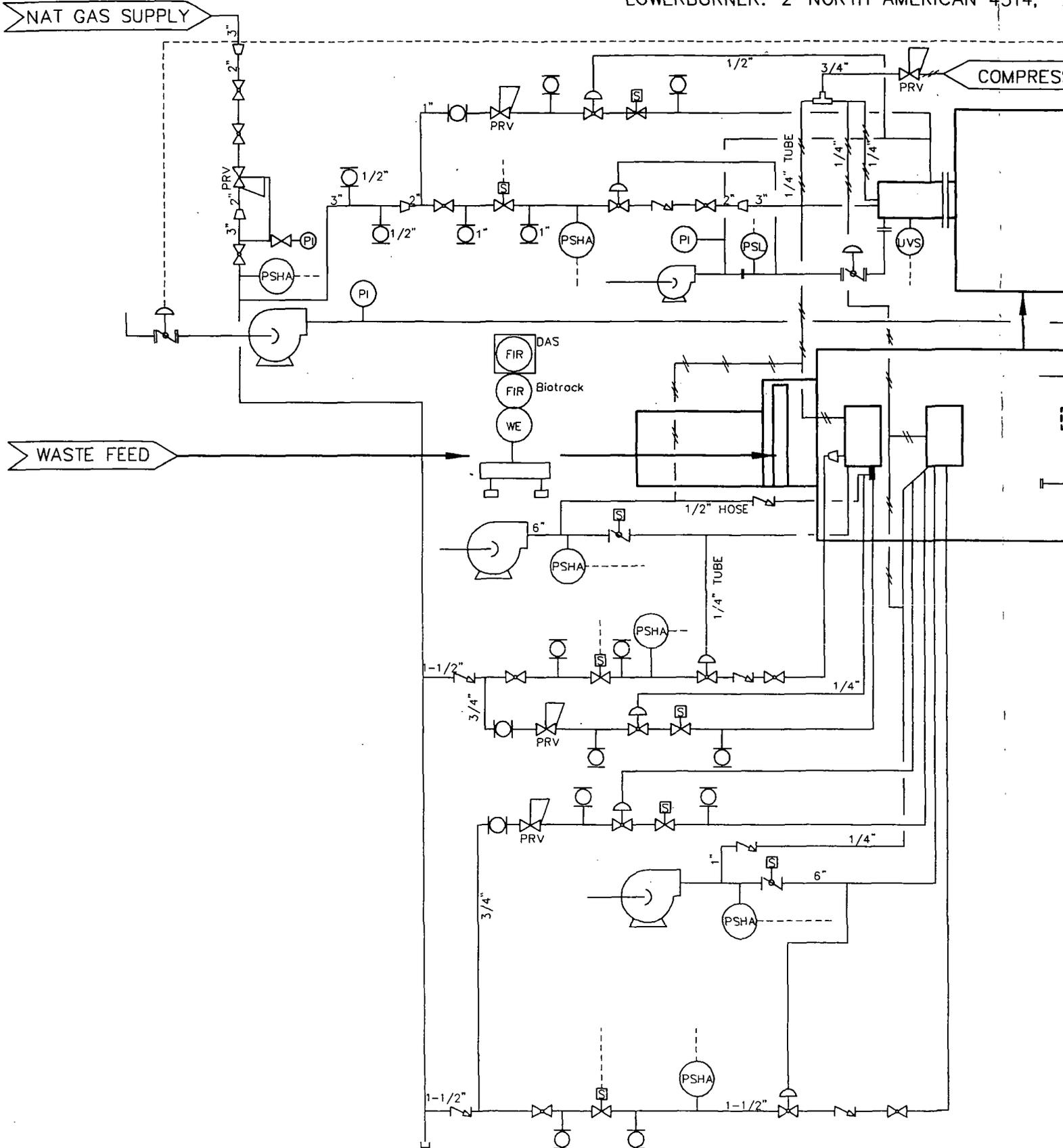


FLAMEPORT BLOWER

CHICAGO BLOWER MODEL SN167468
5000 SCFM @ 7" W.C.

INCINERATOR

MODEL 2500TES W/ SR62.5 FEEDER
UPPER BURNER: NORTH AMERICAN 4425, 6/
LOWERBURNER: 2-NORTH AMERICAN 4514,

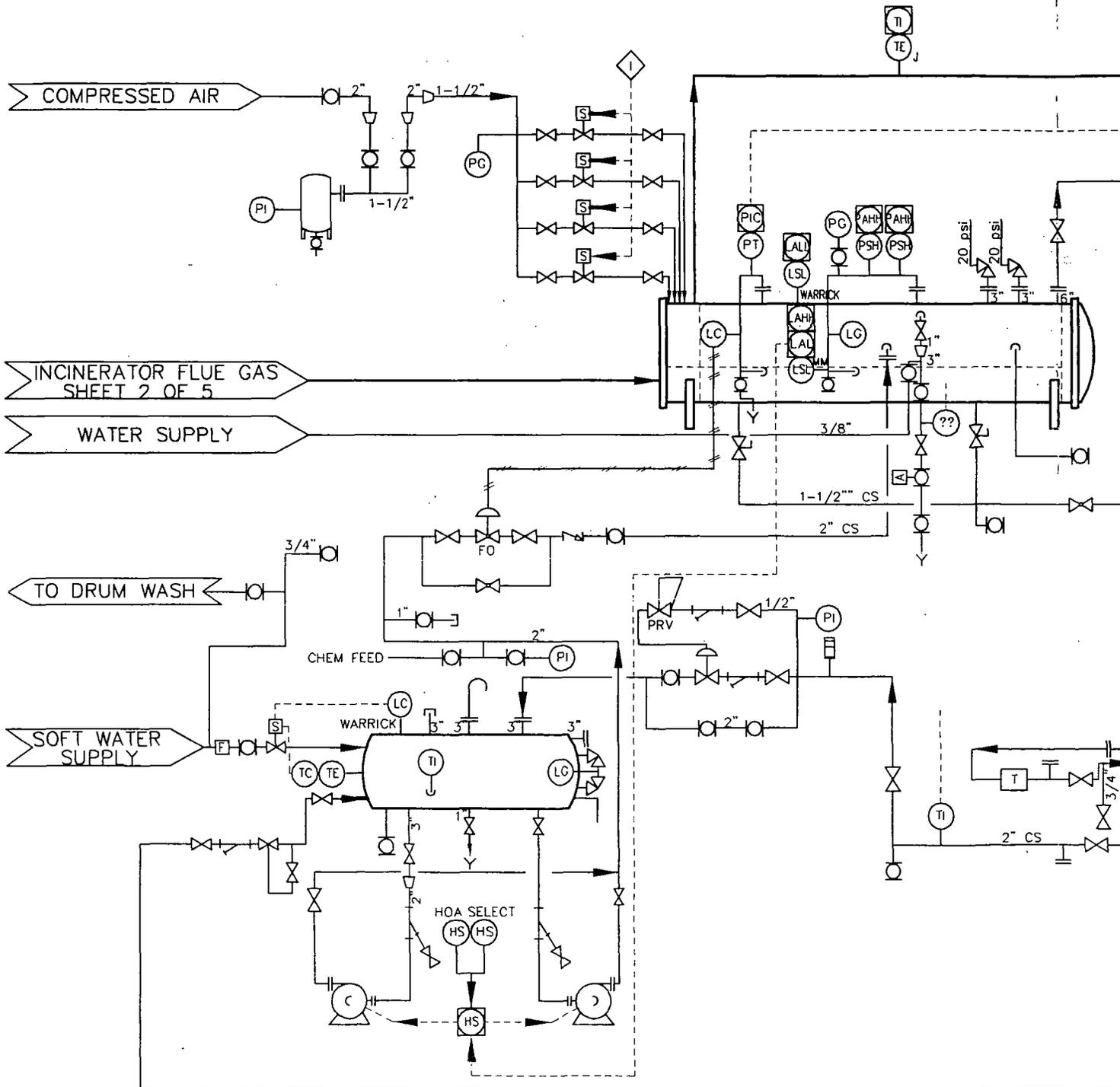


BOILER FEEDWATER SYSTEM

VOLUME: 500 GAL.
BURKES MODEL ED14M, 15 HP
48.4 GPM @ 135 PSIG

WASTE HEAT BOILER

SUPERIOR MS-8-WH-2904-S150-
2904 SQ FT; 150 MAWP
NOM. STM PROD: 11,000 LB/HR
SOOT BLOWERS: FUEL EFFICIENCY



BICARB SILO

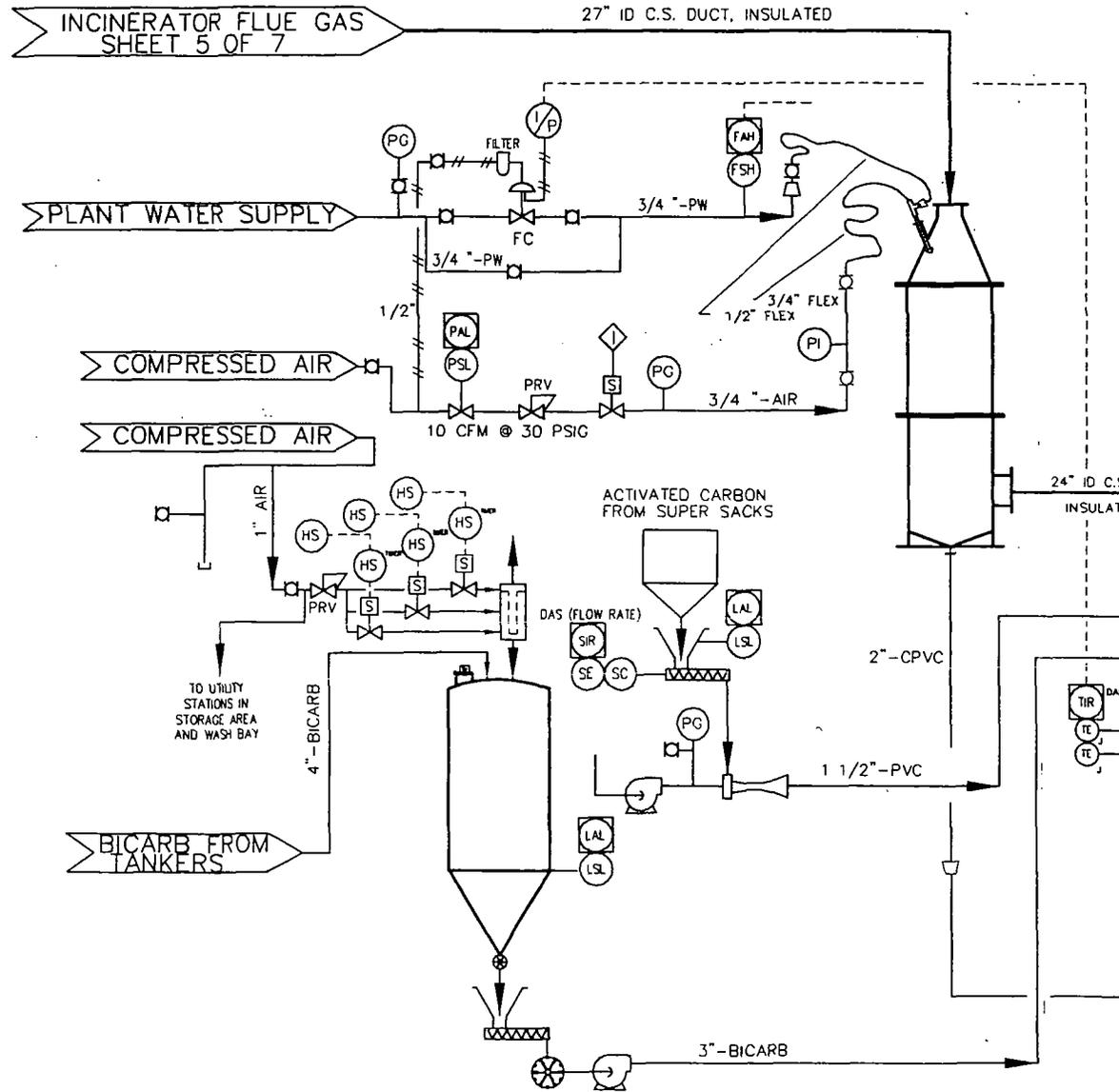
WORKING VOL: 1223 CU.FT.
11' O.D. x 36' HEIGHT
MAT'L: C.S.
W/ BIN VENT FILTER

CARBON FEED SYSTEM

ACRISON MODEL
100" W.C. MAX. PRESSURE
80" W.C. IF PULLING VACUUM

EVAPORATIVE

SHELL: 316 SS
LINING: SAUERISEN
6' O.D. x 21' O
NOZZLE: BETE SA
2 GPM AND 10 CF



PRECIPITATOR

PPC S121212P-3, 3 FIELD

COLLECTING SURFACE AREA: 8217 SQFT.

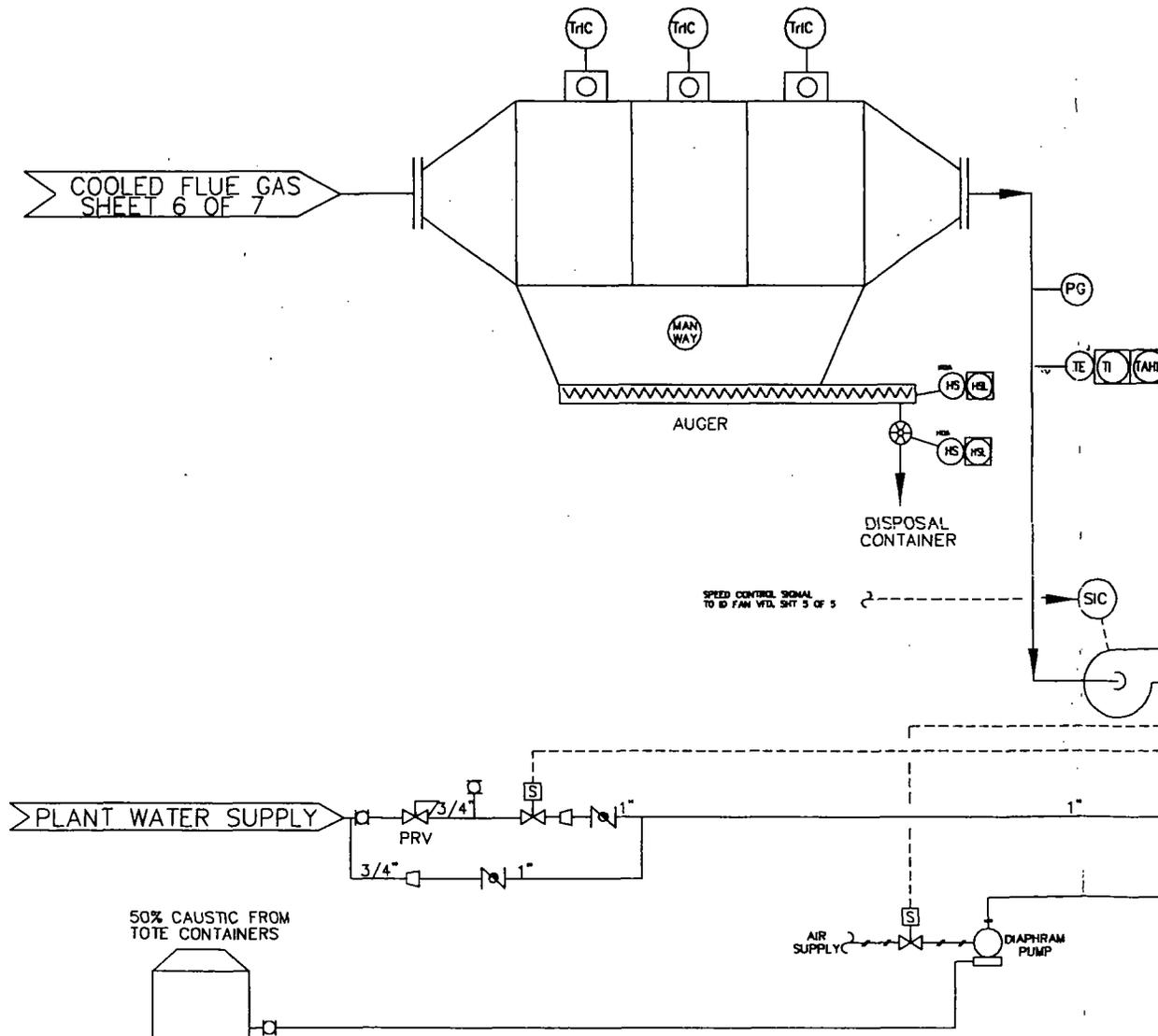
MAT'L: PLATES / PRECIPITATOR
A-513 / A-588(CORTEN)

ID FAN

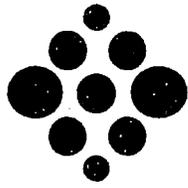
ROBINSON 40x8.375

12" @ 13150 CFM @ 0.

MAT'L: WHEEL / H
316SS / C



XVI



Stericycle®

STERICYCLE, INC. – NORTH SALT LAKE, UTAH

**CLOSURE/FINANCIAL ASSURANCE PLAN
SECTION XVI**

Revision Date: December 16, 2005

**SECTION XVI: CLOSURE/FINANCIAL ASSURANCE PLAN
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STERICYCLE, INC. NORTH SALT LAKE

CLOSURE/FINANCIAL ASSURANCE PLAN

1.0 Closure Introduction

This closure plan applies to the Stericycle, Inc. Incineration Facility in North Salt Lake, Utah. The closure plan was prepared in accordance with the requirements of R315-302. The closure plan assumes a worst-case cost scenario which would occur when the maximum waste inventory is stored on-site and a third party contractor is hired to conduct the closure. The maximum inventory on-site includes all waste items and materials which Stericycle, Inc. of Utah may have stored in the facility. The closure plan addresses the shipment offsite for treatment/disposal of the waste items and materials as well as decontamination of the process area and equipment, and all sample analyses. There is no expected date for the start of closure activities.

This section also contains information required under R315-309 regarding financial assurance for Stericycle, Inc. of Utah.

Decontamination of storage areas, process areas, floors, walls, and internal structures will be performed. Decontamination techniques following removal of waste inventory will utilize a combination of flushing and steam cleaning to effectively remove contaminants. Where necessary, the surface areas will be manually scrubbed or steamed and the liquid generated from this process will be collected by vacuum into tanks or other approved containers. The collected liquids residues will then be characterized, and if necessary, sent for treatment/disposal at state and EPA approved facilities.

Exterior site areas (e.g., waste accumulation and staging areas, runoff accumulation areas, parking lots and loading/unloading areas, etc.) will be visually inspected, and if necessary will be decontaminated.

2.0 Notification of Closure

At least 45 days, before initiation of closure activities, Stericycle, Inc. of Utah will notify the required regulatory agencies (Utah Division of Solid and Hazardous Waste and EPA Region VIII) that Stericycle, Inc. will begin closure activities on a date specified in the notice.

This notice will also include a revised closure plan with necessary changes proposed and a detailed schedule identifying the time frame for closing the individual units at the facility. The proposed decontamination standard and other proposed changes to the closure plan will be submitted as a modification request consistent with the modification request procedures in place at the time of closure.

3.0 Health and Safety

Those involved in closure activities will follow the Stericycle, Inc. of Utah procedures for the protection of worker health and safety. For the purpose of this closure plan, levels of worker protection are defined as follows:

Level B Protection

Self-contained breathing apparatus
Air lines and tanks
Steel-toe, leather boots
Boot covers
Tyvek coveralls
Chemically resistant gloves
Hardhat
Eye protection

Level C Protection

Air purifying respirator and cartridges
Steel-toe, leather boots
Boot covers
Tyvek or cotton coveralls
Chemically resistant gloves
Hardhat
Eye protection

Level D protection includes the standard health and safety equipment for construction activities.

4.0 Cleanup Level

Stericycle, Inc. of Utah intends to decontaminate all the process equipment to non-contaminated levels as required by the State of Utah and EPA Region VIII at the time of facility closure.

All areas of the incineration facility including the incinerator, gas cleaning train and storage areas, concrete floors, and building walls are to be decontaminated to the levels required by the State of Utah and EPA Region VIII at the time of closure.

5.0 Start of Closure

Closure of the facility will begin on the closure date specified in the notification letter to the State of Utah and EPA Region VIII. The first step in closure of the facility will be removal of waste inventory. Before decontamination of a specific unit begins, all waste will be incinerated on-site, and/or sent for to an approved medical waste treatment facility.

6.0 Closure Procedures

The closure/decontamination procedures shall include, but not necessarily be limited to, the following activities for each type of process equipment:

6.1 Clean Out of the Incinerator and APC Equipment

All incoming waste deliveries will be terminated. Waste inventories will be processed and/or sent to an approved medical waste facility. After the final charge of the incinerator, the unit will continue operating until the waste inside the primary chamber has combusted for a minimum of 2 hours. The APC equipment will continue operating until the combustion process has been completed.

When the incinerator has had the opportunity to cool down, the incinerator will be locked out for final cleaning of the primary and secondary chambers.

The Electrostatic Precipitator (ESP) will be pulsed to remove as much fly ash as possible. The ESP hopper will be emptied with the resulting fly ash being treated and disposed of by an EPA approved TSDF. All electrical equipment will be de-energized and locked out.

Any bottom ash in the quench tank will be removed. The bottom ash will be disposed of following sample characterization in an approved disposal facility.

6.2 Preparing the Incinerator for Dismantling

Once the final clean out has occurred, the incinerator will be disconnected from the gas feed system. The hydraulic systems will be cycled to place the equipment in the proper position and the hydraulics will be dismantled. The hydraulic oils will be collected and disposed/recycled appropriately. The air systems will be disconnected. The electrical systems will be disconnected rendering the incinerator and APC equipment inoperable.

6.3 Cleaning and Dismantling of the APC

Due to the nature of the operations, a third party company permitted to perform such operations will clean the APC equipment. The contractor will provide a certification that the equipment has been properly decontaminated and all residual materials have been disposed of in accordance with applicable regulations.

Once the APC equipment has been decontaminated, dismantling and disposal will occur. The system will be dismantled and shipped to a recycler or metal scrap yard.

Refractory lining removed from the ductwork between the incinerator and the APC equipment will be characterized. Following analytical results, the refractory will be disposed of appropriately.

6.4 Dismantling of the Incinerator

- All usable parts such as burners, blowers, control systems, thermocouples, etc. will be removed from the incinerator prior to dismantling the primary and secondary chambers.
- The stacks and associated breeching will be lowered to the ground with a crane.
- Depending upon the final disposal options, the refractory will be removed and characterized. The remaining scrap metal will be sent to a recycler or scrap yard. A crane will remove the secondary chamber from the primary chamber and the refractory will be removed and tested as described above.
- The charging platform, hydraulic cylinders, and charging door will be separated from the primary chamber.
- The ash plows in the primary chamber will be removed and recycled or disposed of.
- The refractory in the primary chamber will be removed and tested as described above.
- The chamber will be cut up and sent to the scrap yard.

- The ash dragon will be removed and recycled or sent to a scrap yard.
- The quench water will be removed, characterized and disposed of accordingly.

6.5 Area Cleaning

Once the incinerator and APC equipment have been dismantled and removed, the concrete pad and surrounding area will be cleaned, all holes, sumps, containment areas will be filled in and capped off.

All gas lines and electrical lines will be removed back to the gas meter and the electrical panel.

All residual materials such as sodium bicarbonate, hydraulic fluids, caustic soda, etc. will be disposed of at an approved facility.

7.0 Sampling and Analysis

The sampling plan and all analytical testing during the closure performance period shall conform to the Stericycle, Inc. of Utah's Hazardous Waste Management Plan/Waste Analysis Plan for the identification of regulated wastes.

8.0 Closure Cost Estimates

The total cost to close the facility using third party cost in 2004 dollars is estimated to be \$316,928.

9.0 Post-Closure Plan

As discussed above, Stericycle, Inc. of Utah will fully decontaminate all waste management units of the facility to non-contaminated status except where noted. Contaminated items that cannot be decontaminated will be disposed of at approved hazardous waste or medical waste facility as appropriate. It is therefore not anticipated that any post-closure monitoring of the site will be required. In addition, this site is not used for disposal, as such, a post-closure plan is not required under Utah Department of Environmental Quality regulation R315-302-3(1).

10.0 Liability Requirements

Current liability insurance for the Stericycle, Inc of Utah facility is afforded coverage by American International Specialty Lines of Insurance Company, policy number PLC 377-70-82. The limits of liability for sudden accidental occurrences are \$5 million per occurrence and an annual aggregate of \$10 million, exclusive of legal costs.

11.0 Financing Closure Cost

To satisfy financial assurance closure cost requirements, Stericycle, Inc of Utah has obtained a closure bond. The current closure bond, Bond No. 1007473, is provided by Lexon Insurance Company.

12.0 Time Line for Closure Activities

A detailed schedule identifying the time frame for closing the individual units at the facility will be approved as part of the modification request submitted at the time of closure notification.

12

FACILITY TECHNICAL INFORMATION

12 Financial Assurance

Liability Requirements

Current liability insurance for the Stericycle, Inc. of Utah facility is afforded coverage by American International Specialty Lines of Insurance Company, policy number PLC 377-70-82. The limits of liability for sudden accidental occurrences are \$5 million per occurrence and an annual aggregate of \$10 million, exclusive of legal costs.

Financing Closure Cost

To satisfy financial assurance closure cost requirements, Stericycle, Inc. of Utah has obtained a closure bond. The current closure bond, Bond No. ESD5297881, is provided by The Insurance Company of the State of Pennsylvania.

Please find attached Stericycle, Inc. of Utah's Closure Bond and Certificate of Insurance.

MARSH

CERTIFICATE OF INSURANCE

CERTIFICATE NUMBER
CHI-001227053-08

PRODUCER

MARSH USA INC.
500 WEST MONROE STREET
CHICAGO, IL 60661
Attn: CERT TEAM (T)(312) 627-6994 (F)(877) 855-7274

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER OTHER THAN THOSE PROVIDED IN THE POLICY. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES DESCRIBED HEREIN.

COMPANIES AFFORDING COVERAGE

350208-STD-wPOLL-05-06

INSURED

STERICYCLE, INC.
ATTN: LIZ BRANDEL
28161 N. KEITH DRIVE
LAKE FOREST, IL 60045

COMPANY

A AMERICAN INT'L SPECIALTY LINES INS. COMPANY

COMPANY

B ZURICH AMERICAN INSURANCE COMPANY

COMPANY

C INSURANCE COMPANY OF THE STATE OF PENNSYLVANIA

COMPANY

D

COVERAGES

This certificate supersedes and replaces any previously issued certificate for the policy period noted below.

THIS IS TO CERTIFY THAT POLICIES OF INSURANCE DESCRIBED HEREIN HAVE BEEN ISSUED TO THE INSURED NAMED HEREIN FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THE CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, CONDITIONS AND EXCLUSIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY	EG 3779036	11/08/05	11/08/06	GENERAL AGGREGATE \$ 2,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				PRODUCTS - COMP/OP AGG \$ 2,000,000
	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				PERSONAL & ADV INJURY \$ 1,000,000
	<input type="checkbox"/> OWNER'S & CONTRACTOR'S PROT				EACH OCCURRENCE \$ 1,000,000
					FIRE DAMAGE (Any one fire) \$ 100,000
					MED EXP (Any one person) \$ 10,000
B	AUTOMOBILE LIABILITY	TRK 9377341-02 (AOS)	11/08/05	11/08/06	COMBINED SINGLE LIMIT \$ 5,000,000
	<input checked="" type="checkbox"/> ANY AUTO	TRK 5344318-02 (PR)	11/08/05	11/08/06	
	<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per person) \$
	<input type="checkbox"/> SCHEDULED AUTOS	4605-2748	11/08/05	11/08/06	BODILY INJURY (Per accident) \$
	<input type="checkbox"/> HIRED AUTOS				PROPERTY DAMAGE \$
	<input type="checkbox"/> NON-OWNED AUTOS				
	<input checked="" type="checkbox"/> PHYS DAM - SELF-INSURED				
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT \$
	<input type="checkbox"/> ANY AUTO				OTHER THAN AUTO ONLY: \$
					EACH ACCIDENT \$
					AGGREGATE \$
A	EXCESS LIABILITY	8854920	11/08/05	11/08/06	EACH OCCURRENCE \$ 5,000,000
	<input checked="" type="checkbox"/> UMBRELLA FORM				AGGREGATE \$ 5,000,000
	<input type="checkbox"/> OTHER THAN UMBRELLA FORM				SIR: \$ 10,000
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	WC 9377344-02 (AOS)	11/08/05	11/08/06	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER \$
		WC 9377345-02 (WI)	11/08/05	11/08/06	EL EACH ACCIDENT \$ 1,000,000
	THE PROPRIETOR/PARTNERS/EXECUTIVE OFFICERS ARE: <input checked="" type="checkbox"/> INCL <input type="checkbox"/> EXCL				EL DISEASE-POLICY LIMIT \$ 1,000,000
	OTHER				EL DISEASE-EACH EMPLOYEE \$ 1,000,000
A	POLLUTION LEGAL LIABILITY	PLC 3777082	11/08/05	11/08/08	EACH OCCURRENCE 5,000,000 AGGREGATE 10,000,000

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

STERICYCLE NORTH SALT LAKE TREATMENT FACILITY 90 NORTH 1100 WEST NORTH SALT LAKE, UT 84054

CERTIFICATE HOLDER

STERICYCLE NORTH SALT LAKE
TREATMENT FACILITY
90 NORTH 1100 WEST
NORTH SALT LAKE, UT 84054

CANCELLATION

SHOULD ANY OF THE POLICIES DESCRIBED HEREIN BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE INSURER AFFORDING COVERAGE WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED HEREIN, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER AFFORDING COVERAGE, ITS AGENTS OR REPRESENTATIVES, OR THE ISSUER OF THIS CERTIFICATE.

MARSH USA INC.

BY: Christy N. Miller

Christy N. Miller

MM1(3/02)

VALID AS OF: 12/16/05

CONTINUATION CERTIFICATE
To be attached to and form a
part of Bond described below.

LEXON Insurance Company
10002 Shelbyville Road
Suite 100
Louisville, KY 40223

Executive Secretary of the Utah Solid & Hazardous
Waste Control Board
288 North 1460 West
P. O. Box 144880
Salt Lake City, UT 84114

Date: 24-Aug-05

Re: BFI Waste Systems of North America
90 North 1100 West
North Salt Lake, UT 84054
Bond #: 1007473

The LEXON Insurance Company, hereinafter called the "Company," as Surety on Bond No.:
1007473 issued on the 16th day of OCTOBER, 2004 on behalf of BFI Waste Systems of North America,
Principal, in favor of Executive Secretary of the Utah Solid Hazardous Waste Control Board, Obligee,
hereby certify that this bond is continued in full force and effect until the 16th day of OCTOBER, 2006,
subject to all covenants and conditions of said bond.

This bond, in the current sum of THREE HUNDRED SIXTEEN THOUSAND NINE HUNDRED
TWENTY-EIGHT AND 00/100 Dollars (\$316,928.00), has been continued in force upon the express
condition that the full extent of the Company's liability under said bond and all continuations thereof
for any loss or series of losses occurring during the entire time the Company remains on said bond
shall in no event exceed the sum of the bond.

In witness whereof the Company has caused this instrument to be duly signed, sealed and dated
as of the 24th day of AUGUST, 2005.

BFI Waste Systems of North America

Principal

Lexon Insurance Company

Surety

Sandra F. Harper

Sandra F. Harper, Attorney-In-Fact

By

POWER OF ATTORNEY

LX - 22584

Lexon Insurance Company

KNOW ALL MEN BY THESE PRESENTS, that LEXON INSURANCE COMPANY, a Texas Corporation, with its principal office in Louisville, Kentucky, does hereby constitute and appoint:

John B. Manus, Mary E. Joseph, Tammy Masterson, Brook T. Smith, Kathy Hobbs,

Raymond M. Hundley, Jason D. Cromwell, James H. Martin, Sandra F. Harper, Myrtie Henry, Julie Radican, Virginia E. Woolridge

its true and lawful Attorney(s)-In-Fact to make, execute, seal and deliver for, and on its behalf as surety, any and all bonds, undertakings or other writings obligatory in nature of a bond.

This authority is made under and by the authority of a resolution which was passed by the Board of Directors of LEXON INSURANCE COMPANY on the 1st day of July, 2003 as follows:

Resolved, that the President of the Company is hereby authorized to appoint and empower any representative of the Company or other person or persons as Attorney-In-Fact to execute on behalf of the Company any bonds, undertakings, policies, contracts of indemnity or other writings obligatory in nature of a bond not to exceed \$2,500,000.00, Two-million five hundred thousand dollars, which the Company might execute through its duly elected officers, and affix the seal of the Company thereto. Any said execution of such documents by an Attorney-In-Fact shall be as binding upon the Company as if they had been duly executed and acknowledged by the regularly elected officers of the Company. Any Attorney-In-Fact, so appointed, may be removed for good cause and the authority so granted may be revoked as specified in the Power of Attorney.

Resolved, that the signature of the President and the seal of the Company may be affixed by facsimile on any power of attorney granted, and the signature of the Vice President, and the seal of the Company may be affixed by facsimile to any certificate of any such power and any such power or certificate bearing such facsimile signature and seal shall be valid and binding on the Company. Any such power so executed and sealed and certificate so executed and sealed shall, with respect to any bond of undertaking to which it is attached, continue to be valid and binding on the Company.

IN WITNESS THEREOF, LEXON INSURANCE COMPANY has caused this instrument to be signed by its President, and its Corporate Seal to be affixed this 2nd day of July, 2003.



LEXON INSURANCE COMPANY

BY [Signature]
David E. Campbell
President

ACKNOWLEDGEMENT

On this 2nd day of July, 2003, before me, personally came David E. Campbell to me known, who being duly sworn, did depose and say that he is the President of LEXON INSURANCE COMPANY, the corporation described in and which executed the above instrument; that he executed said instrument on behalf of the corporation by authority of his office under the By-laws of said corporation.



[Signature]
Lydia J. DeJong
Notary Public

CERTIFICATE

I, the undersigned, Secretary of LEXON INSURANCE COMPANY, A Texas Insurance Company, DO HEREBY CERTIFY that the original Power of Attorney of which the foregoing is a true and correct copy, is in full force and effect and has not been revoked and the resolutions as set forth are now in force.

Signed and Sealed at Lombard, Illinois this 24th Day of August, 2005



[Signature]
Donald D. Buchanan
Secretary

Attachment

ATTACHMENT 1

AIR AND WATER PERMITS

INDUSTRIAL WASTEWATER PERMIT

The South Davis Sewer Improvement District (SDSID) regulates plant drainage effluent. Requirements include semi-annual sampling by the SDSID. Documentation of the permit issued by the SDSID is included as part of this Appendix.

TITLE V AIR OPERATING PERMIT

The Utah Department of Air Quality (DAQ) regulates plant emissions. Requirements include equipment performance testing and continuous parametric monitoring. Documentation of the permit issued by the DAQ is included as part of this Appendix.

South Davis Sewer District
Industrial Wastewater Discharge P

Permit No. 8999
Effective Date 1/1/04
Expiration Date 12/31/04

In accordance with all terms and conditions of the South Davis Sewer District Industrial Wastewater Discharge Program Resolution No.'s 121 and 123,

***** STERICYCLE INC *****

is authorized to discharge wastewater from its facility to the sanitary sewer system of the South Davis Sewer District in accordance with the above mentioned Resolutions and all other requirements and limitations set forth in Permit Conditions.

Signed this 15th day of January 2004

Dee D. Waymunt

This certificate is not transferrable.



Utah!

Where ideas connect

Department of Environmental Quality
Division of Air Quality

Site ID: 10142

Michael O. Leavitt
Governor
150 North 1950 West
P.O. Box 144820

Thomas R. Nelson, Ph.D.
Executive Director
Salt Lake City, Utah 84114-4820
(801) 536-4099 Fax

Richard W. Sprott
Director
(801) 536-4414 TDD
www.deq.utah.gov

Title V Operating Permit

PERMIT NUMBER: 1100055001
DATE OF PERMIT: May 3, 2002
Date of Last Revision: October 23, 2003

This Operating Permit is issued to, and applies to the following:

Name of Permittee:

Stericycle Incorporated
28161 North Keith Drive
Lake Forest, IL 60045

Permitted Location:

BFI Medical Waste Incinerator
90 North 1100 West
North Salt Lake, UT 84054

UTM coordinates: 4,521,849 meters Northing, 420,687 meters Easting
SIC code: 4953

ABSTRACT

BFI Medical Waste, Inc (BFI), a wholly-owned subsidiary of Stericycle, Inc., owns and operates an area source in North Salt Lake, Utah. The primary emission unit at the source is a hospital/medical/infectious waste incinerator (HMIWI) which is subject to R307-220-3 (State Plan for HMIWIs) and R307-222 (State Rule for HMIWIs). Both the State Plan and Rule require all HMIWIs to apply for and obtain a Title V permit. The HMIWI is equipped with a waste heat boiler, carbon injection, electrostatic precipitator (ESP), and wet gas absorber. Support equipment at the source include an emergency generator and sodium bicarbonate silo equipped with a fabric filter.

UTAH AIR QUALITY BOARD

By:

Richard W. Sprott, Executive Secretary

Prepared By:

Robert Grandy