Massachusetts Department of Environmental Protection Bureau of Waste Site Cleanup	BWSC109
	Release Tracking Number
TIER I MINOR PERMIT MODIFICATION TRANSMITTAL FORM	3 - 518
Pursuant to 310 CMR 40.0725 (Subpart G)	
A. DISPOSAL SITE LOCATION:	
1. Disposal Site Name: GENERAL ELECTRIC CO FMR	
2. Street Address: 50 FORDHAM RD	
3. City/Town: WILMINGTON 4. ZIP Code:	
6. Provide Permit Number of Initial Tier I Permit: 83052	
B. THIS FORM IS BEING USED TO: (check all that apply)	
1. Correct Typographical Errors and/or Include Omissions that do not Materially Affect the Natur Permitted Response Actions, and Make Other Changes of Similiar Scope to the Permit (Section)	
2. Change the LSP-of-Record (Sections C and E are not required).	
3. Change a Permittee Name, Address or Contact Person (the Permittee making the change is Minor Permit Modification; Sections C, D and E are not required).	the person submitting the
4. Change or Designate a Primary Representative (required only for sites having more than one D are not required).	e Permittee; Sections C and
5. Add one or more Responsible Parties, Potentially Responsible Parties or Other Persons as being added is the person submitting the Minor Permit Modification; Sections C, D and E are not	
 6. Submit a Notice that an additional Release Tracking Number(s) is (are) being linked to this (Primary RTN). Future response actions addressing the Release or Threat of Release notificat additional Release Tracking Numbers (RTNs) will be conducted as part of the Response Action Primary Site listed above. If there is a reasonable likelihood that the addition of the new second classification of the site, a Revised Tier Classification Submittal and Major Permit Modification and E are not required). 	ion condition associated with ns planned or ongoing at the lary RTN(s) would change the
Provide Release Tracking Number(s): a. 3 - 28282 b]
All future Response Actions must occur according to the deadlines applicable to the Primary R ⁻ RTN when making future submittals for this site unless specifically relating to response actions occurred.	
(All sections of this transmittal form must be filled out unless otherwise noted above. $6~{ m Tc}$: w (d above.) Tj 3o illed ou0ee0-ed ou0

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TIER I MINOR PERMIT MODIFICATION
TRANSMITTAL FORM

Pursuant to 310 CMR 40.0725 (Subpart G)

E. PRIMARY REPRESENTATIVE:

3 518 Pursuant to 310 CMR 40.0725 (Subpart G)
G. RELATIONSHIP TO SITE OF PERMITTEE SUBMITTING MINOR PERMIT MODIFICATION REQUEST:
✓ 1. RP or PRP
✓ e. Other RP or PRP Specify: MON-SPECIFIED PRP
2. Fiduciary, Secured Lender or Municipality with Exempt Status (as defined by M.G.L. c. 21E, s. 2)
3. Agency or Public Utility on a Right of Way (as defined by M.G.L. c. 21E, s. 5(j))
4. Any Other Person Submitting Minor Modification Specify Relationship:
H. REQUIRED ATTACHMENT AND SUBMITTALS:
 Check here if this minor permit modification affects a multi-party permit. If checked, all Permittees must sign the certification in BWSC109A, Section A. Additional Permittees may copy BWSC109A, sign the certification and provide their mailing address in Questions A.8. through A.14. Note that for a <i>Change in a Permittee Name, Address or Contact Person</i>, only that Permittee needs to fill out BWSC109A
2. Number of additional copies of BWSC109A attached:
3. If this form is being used to submit the addition of a Responsible Party, Potentially Responsible Party or Other Person, the compliance history of the new applicant, as required by 310 CMR 40.0703(9)(b) must be attached.
4. Check here to certify that the LSP Opinion containing the material facts, data, and other information is attached.
YOU MUST LEGIBLY COMPLETE ALL RELEVANT SECTIONS OF THIS FORM OR DEP MAY
RETURN THE DOCUMENT AS INCOMPLETE.
Date Stamp (DEP USE ONLY:)
3/30/2012 7:25:14 AM

Massachusetts Department of Environmental Protection Bureau of Waste Site Cleanup

BWSC109A

TIER I MINOR PERMIT MODIFICATION	
CERTIFICATION OF PERMITTEE	

Α.	CERTIFICATION OF PERMITTEE SUBMITTING MINOR PERMIT MODIFICATION:
<i>.</i>	

1. I,________, attest under the pains and penalties of perjury (i) that I have personally examined and am familiar with the information contained in this submittal, including any and all documents accompanying this transmittal form, (ii) that, based on my inquiry of those individuals immediately responsible for obtaining the information, the material information contained in this submittal is, to the best of my knowledge and belief, true, accurate and complete, and (iii) that I am fully authorized to make this attestation on behalf of the entity legally responsible for this submittal. I/the person or entity on whose behalf this submittal is made am/is aware that there are significant penalties, including, but not limited to, possible fines and imprisonment, for willfully submitting false, inaccurate, or incomplete information.

If I am a new applicant that is joining the Tier I Permit, I also attest under the pains and penalties of perjury that (i) I/the person(s) or entity(ies) on whose behalf this submittal is made has/have personally examined and am/is familiar with the requirements of M.G.L. c. 21E and 310 CMR 40.0000; (ii) based upon my inquiry of the/those Licensed Site Professional(s) employed or engaged to render Professional Services for the disposal site which is the subject of this Transmittal Form and of the person(s) or entity(ies) on whose behalf this submittal is made, and my/that person's(s') or entity's(ies') understanding as to the estimated

For:	. By:	Signature	3.	Title:
(Name of person or entity recorded in BWSC109, Section F, or additional Permittee for a multi-party Tier I Permit). mm/dd/yyyy 7. Check here if recording the address of an additional Permittee for a multi-party Tier I Permit. Street: City/Town: 10. State: 11. ZIP Code:	. For:		5.	Date:
Street:	(Name of person or entity	recorded in BWSC109, Section	n F,	
City/Town: 10. State: 11. ZIP Code:] 7. Check here if recording t	the address of an addtional Perr	nittee for a multi-party	Tier I Permit.
	Street [.]			
2. Telephone: 13. Ext.: 14. FAX:				
				11. ZIP Code:
	City/Town:		— 10. State: ——	
	City/Town:		— 10. State: ——	
	. City/Town:		— 10. State: ——	
	0. City/Town:		— 10. State: ——	
	9. City/Town:		— 10. State: ——	