New York State Department of Environmental Conservation
CHEMICAL BULK STORAGE CERTIFICATE
625 Broadway, 11th Floor, Albany, NY 12233-7020  Phone: 518-402-9553

<table>
<thead>
<tr>
<th>TANK NUMBER</th>
<th>DATE INSTALLED</th>
<th>TANK LOCATION AND TYPE</th>
<th>CAPACITY (GALLONS)</th>
<th>HAZARDOUS SUBSTANCE</th>
<th>% HAZ SUBST</th>
<th>CHEMICAL ABSTRACT #</th>
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<tr>
<td>624-05</td>
<td>04/01/1999</td>
<td>AST - Plastic</td>
<td>200</td>
<td>SODIUM HYPOCHLORITE</td>
<td>15.00</td>
<td>7681-52-9</td>
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<td>12/01/1996</td>
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<td>750</td>
<td>CAUSTIC SODA</td>
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OWNER:
U. S. DEPARTMENT OF ENERGY
53 BELL AVENUE
UPTON, NY 11973

OPERATOR: BROOKHAVEN SCIENCE
(631) 344-3315

EMERGENCY CONTACT:
POLICE HEADQUARTERS
(631) 344-2238

ISSUED BY: Commissioner
Joe Martens

CBS NUMBER: 1-000263
DATE ISSUED: 06/04/2013
EXPIRATION DATE: 07/27/2015
FEE PAID: $ 400.00

SITE:
BROOKHAVEN NATIONAL LABORATORY
53 BELL AVENUE
UPTON, NY 11973

MAILING CORRESPONDENCE:

FRANK CRESCENZO
U. S. DEPARTMENT OF ENERGY
53 BELL AVENUE
BUILDING 464
UPTON, NY 11973

As an authorized representative of the above named facility, I hereby certify that the information on this form is true and correct. Additionally, I recognize that I am responsible for assuring that this facility is in compliance with all sections of ECL Article 40 and 6 NYCRR 595, 596, 597, 598, and 599, not just those cited below:
-- The facility must be re-registered if there is a transfer of ownership.
-- The facility has maintained it's requirements relating to daily, monthly, annual and five year inspections as required by Part 598.7 and has has it's SPR annually updated as required by Part 598.11(c).
-- The Department must be notified within 3 business days prior to adding, replacing, reconditioning, or permanently closing a stationary tank.
-- This certificate must be signed and posted on the premises at all times.
Posting must be at the tank, at the entrance of the facility, or the main office where the storage tanks are located.
-- Any person with knowledge of a spill, leak or discharge must report the incident to DEC within two hours (1-800-457-7362).

Signature of Representative/Owner
Name and Title of Authorized Representative/Owner (Please Print)

THIS REGISTRATION CERTIFICATE IS NON-TRANSFERERABLE

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