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 AUTH. NAME      AUTHOR AFFILIATION  
 BELLES, T.D.      Pennsylvania Power & Light Co.  
 RECIP. NAME      RECIPIENT AFFILIATION

SUBJECT: "Generator's Residual Waste Biennial Rept for 1994." W/  
 950227 ltr.

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February 27, 1995

PA Department of Environmental Resources  
Bureau of Waste Management  
P.O. Box 8550  
Harrisburg, PA 17105-8550

SUSQUEHANNA STEAM ELECTRIC STATION  
1994 RESIDUAL WASTE BIENNIAL REPORT  
PLES-5707 FILE R9-6

Attached is Pennsylvania Power and Light Company's (PP&L's)  
"Generator's Residual Waste Biennial Report" for Susquehanna  
Steam Electric Station, Berwick, PA (EPA ID# PAD000765883) for  
1994.

Respectfully,

Timothy D. Belles  
Environmental Scientist - Nuclear  
Effluents Management

TDB/raa

cc: EPA Region III  
~~NRC Document Control Desk~~  
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EM File	Trlr#1
WAA File	Waste Accumulation Area

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COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF ENVIRONMENTAL RESOURCES  
BUREAU OF WASTE MANAGEMENT  
P.O. BOX 8550  
HARRISBURG, PA 17105-8550

GENERATOR'S RESIDUAL WASTE BIENNIAL REPORT FOR 1994  
Report Due By March 1, 1995

A.  This site DID NOT generate more than 2,200 pounds of residual waste in any month of 1994.

1. Your I.D. No. 

P	A	D	0	0	0	7	6	5	8	8	3
---	---	---	---	---	---	---	---	---	---	---	---

 (If you do not have an EPA I.D. No., see instructions.)

2. Generator's Name Pennsylvania Power & Light Co., Susquehanna S.E.S.

3. Mailing Address Pennsylvania Power & Light Co., Susquehanna S.E.S.  
P. O. Box 467, Berwick, PA 18603

4. Location Address 5 miles north of Berwick on U.S. Route 11

5. Salem  
(Name of Municipality)

6.  City  
 Borough  
 Township  
(Check one)

7. County Luzerne

8. Contact Name Timothy D. Belles

Contact Title Environmental Scientist

9. Contact Phone No. ( 

7	1	7
---	---	---

 ) 

5	4	2
---	---	---

 - 

3	8	0	0
---	---	---	---

Area Code

Phone Number

10. Enter up to four Standard Industrial Classification (SIC) codes which best reflect the principal products or services provided by the facility.

4	9	1	1
---	---	---	---

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11.  Y  N Does your site generate any co-products?

Certification

I certify pursuant to the penalties of 18 Pa. C.S.A. Section 4904 that to the best of my knowledge, information and belief, the information contained in the biennial report is true and correct and is in conformance with Chapter 287 of the rules and regulations of the Department of Environmental Resources.

H. G. Stanley  
Print or Type Name

*H. G. Stanley for HGS*  
Signature

M M D D Y Y  

0	2	2	8	9	5
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Date

WASTE GENERATION AND MANAGEMENT FORM

(Attach to Form 330)

I. Your I.D. No. P A D 0 0 0 7 6 5 8 8 3 (If you do not have an EPA I.D., see instructions)

II. Generator's Name. Pennsylvania Power & Light Co., Susquehanna S.E.S.

III. Waste Information

Residual Waste Code	Primary SIC Code	TRI	Waste Description
R 9 9 9	4 9 1 . 1		Incidental maintenance waste, municipal waste like residual waste

IV. Offsite Shipments

BLOCK 1	A. Facility I.D.	<u>S W M 1 0 1 2 4 7</u>	C. Check if Captive	D. Waste Quantity Shipped in Tons	E. Physical State	F. Unit Type
	B. Facility Name	<u>Keystone Sanitary Landfill</u>				
	Facility Address	<u>Box 249, Durham Drive Dunmore, PA. 18512</u>			<u>S</u>	<u>0 5</u>

BLOCK 2	A. Facility I.D.		C. Check if Captive	D. Waste Quantity Shipped in Tons	E. Physical State	F. Unit Type
	B. Facility Name					
	Facility Address					

BLOCK 3	A. Facility I.D.		C. Check if Captive	D. Waste Quantity Shipped in Tons	E. Physical State	F. Unit Type
	B. Facility Name					
	Facility Address					

BLOCK 4	A. Facility I.D.		C. Check if Captive	D. Waste Quantity Shipped in Tons	E. Physical State	F. Unit Type
	B. Facility Name					
	Facility Address					

V. Onsite (Local Captive) Disposal or Processing

SYSTEM 1	D. Waste Quantity in Tons	E. Physical State	F. Unit Type
	<u>1 1</u>		

SYSTEM 2	D. Waste Quantity in Tons	E. Physical State	F. Unit Type

VI. Waste Specific Source Reduction Activity

A. Source Reduction Activity Codes			B. Source Reduction Achievements - Toxicity		
<u>W</u>	<u>1 1</u>	<u>W</u>	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Has a reduction in <u>toxicity</u> been accomplished for this waste stream?
C. Source Reduction Achievements - Quantities			Describe if yes _____		
Year	Total Waste - Tons	Activity/Production Index	Adjusted Waste Quantity		
1993	<u>6 4 6</u>	<u>1 . 0</u>	<u>6 4 6</u>		
1994	<u>7 7 9</u>	<u>1 . 0</u>	<u>7 7 9</u>		

WASTE GENERATION AND MANAGEMENT FORM  
(Attach to Form 330)

I. Your I.D. No. **P A D 0 0 0 7 6 5 8 8 3** (If you do not have an EPA I.D., see instructions)

II. Generator's Name Pennsylvania Power & Light Co., Susquehanna Steam Electric Station

III. Waste Information

Residual Waste Code	Primary SIC Code	TRI	Waste Description
R 4 2 0	4 9 1 1		Incidental Waste Water * Permitted by NPDES Permit PA #0047325

IV. Offsite Shipments

B L O C K	A. Facility I.D.	C. Check if Captive	D. Waste Quantity Shipped in Tons	E. Physical State	F. Unit Type
1	P A D 9 8 7 2 6 6 7 4 9 Lancaster Oil Manheim Pike Lancaster, PA 17601		1 6	L	1 1
2	  *		3 3 5	L	*
3	  				
4	  				

V. Onsite (Local Captive) Disposal or Processing

S Y S T E M	D. Waste Quantity in Tons	E. Physical State	F. Unit Type				
				S Y S T E M	D. Waste Quantity in Tons	E. Physical State	F. Unit Type
1				2			

VI. Waste Specific Source Reduction Activity

A. Source Reduction Activity Codes				B. Source Reduction Achievements - Toxicity					
W	5	2	W	W	W	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Has a reduction in toxicity been accomplished for this waste stream?			
C. Source Reduction Achievements - Quantities				Describe if yes _____					
Year	Total Waste - Tons			Activity/Production Index			Adjusted Waste Quantity		
1993			4 0 7	<del>X</del>	<del>X</del>	1 . 0	<del>X</del>		4 0 7
1994			3 5 1	<del>X</del>	<del>X</del>	0 . 9	<del>X</del>		3 9 0

WASTE GENERATION AND MANAGEMENT FORM  
(Attach to Form 330)

I. Your I.D. No. 

P	A	D	0	0	0	7	6	3	8	8	3
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 (If you do not have an EPA I.D., see instructions)

II. Generator's Name Pennsylvania Power & Light Co., Susquehanna S.E.S.

III. Waste Information

Residual Waste Code	Primary SIC Code	TRI	Waste Description
R 2 0 1	4 9 1 1		Inorganic (reactivator) sludge

IV. Offsite Shipments

B L O C K	A. Facility I.D.	C. Check if Captive	D. Waste Quantity Shipped in Tons	E. Physical State	F. Unit Type
	P A D 0 8 5 6 9 0 5 9 2		2 1 3	SL	0 5
B. Facility Name <u>Republic Environmental Systems, Inc., 2869 Sandstone Drive Hatfield, PA. 19440</u>					

B L O C K	A. Facility I.D.	C. Check if Captive	D. Waste Quantity Shipped in Tons	E. Physical State	F. Unit Type
B. Facility Name _____ Facility Address _____					

B L O C K	A. Facility I.D.	C. Check if Captive	D. Waste Quantity Shipped in Tons	E. Physical State	F. Unit Type
B. Facility Name _____ Facility Address _____					

B L O C K	A. Facility I.D.	C. Check if Captive	D. Waste Quantity Shipped in Tons	E. Physical State	F. Unit Type
B. Facility Name _____ Facility Address _____					

V. Onsite (Local Captive) Disposal or Processing

S Y S T E M	D. Waste Quantity in Tons	E. Physical State	F. Unit Type
1			

S Y S T E M	D. Waste Quantity in Tons	E. Physical State	F. Unit Type
2			

VI. Waste Specific Source Reduction Activity

A. Source Reduction Activity Codes										B. Source Reduction Achievements - Toxicity									
W	5	2	W		W		W			Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Has a reduction in toxicity been accomplished for this waste stream?									
C. Source Reduction Achievements - Quantities										Describe if yes _____									
Year		Total Waste - Tons					Activity/Production Index					Adjusted Waste Quantity							
1993							X	X	1	0									
1994							X	X	1	1									



WASTE GENERATION AND MANAGEMENT FORM  
(Attach to Form 330)

I. Your I.D. No. **P A D 0 0 0 7 6 5 8 8 3** (If you do not have an EPA I.D., see instructions)

II. Generator's Name Pennsylvania Power & light CO., Susquehanna S.E.S.

III. Waste Information

Residual Waste Code	Primary SIC Code	TRI	Waste Description
R 2 1 4	4 9 1 1		Cooling Tower sediment/sludge

IV. Offsite Shipments

B L O C K  1	A. Facility I.D.	S 7 1 1 0 1 2 4 7	C. Check if Captive	D. Waste Quantity Shipped in Tons	E. Physical State	F. Unit Type
	B. Facility Name	Keystone Sanitary Landfill				
Facility Address		Box 249 Durham Drive Dunmore, PA 18512				

B L O C K  2	A. Facility I.D.		C. Check if Captive	D. Waste Quantity Shipped in Tons	E. Physical State	F. Unit Type
	B. Facility Name					
Facility Address						

B L O C K  3	A. Facility I.D.		C. Check if Captive	D. Waste Quantity Shipped in Tons	E. Physical State	F. Unit Type
	B. Facility Name					
Facility Address						

B L O C K  4	A. Facility I.D.		C. Check if Captive	D. Waste Quantity Shipped in Tons	E. Physical State	F. Unit Type
	B. Facility Name					
Facility Address						

V. Onsite (Local Captive) Disposal or Processing

S Y S T E M  1	D. Waste Quantity in Tons	E. Physical State	F. Unit Type

S Y S T E M  2	D. Waste Quantity in Tons	E. Physical State	F. Unit Type

VI. Waste Specific Source Reduction Activity

A. Source Reduction Activity Codes				B. Source Reduction Achievements - Toxicity			
W	5	4	W 4 2 W	W	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	Has a reduction in toxicity been accomplished for this waste stream?
C. Source Reduction Achievements - Quantities				Describe if yes: <u>Elimination of zinc in water treatment has reduced the TCLP value for zinc in the sludge.</u>			
Year	Total Waste - Tons			Activity/Production Index		Adjusted Waste Quantity	
1993			2 9 4		1 . 0		2 9 4
1994			1 8 0		1 . 1		1 6 4



WASTE GENERATION AND MANAGEMENT FORM  
(Attach to Form 330)

I. Your I.D. No. 

P	A	D	0	0	0	7	6	5	8	8	3
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 (If you do not have an EPA I.D., see instructions)

II. Generator's Name Pennsylvania Power & Light Co, Susquehanna S.E.S.

III. Waste Information

Residual Waste Code	Primary SIC Code	TRI	Waste Description
R 5 0 1	4 9 1 1		Cooling tower fill, asbestos containing cement baffles

IV. Offsite Shipments

B L O C K	A. Facility I.D.	C. Check if Captive	D. Waste Quantity Shipped in Tons	E. Physical State	F. Unit Type
	S U M 1 0 1 2 4 7			S	0 5
1	B. Facility Name <u>Leystone Sanitary Landfill</u> Facility Address <u>Bx 249, Durham Drive</u> <u>Dunmore PA 18512</u>				

B L O C K	A. Facility I.D.	C. Check if Captive	D. Waste Quantity Shipped in Tons	E. Physical State	F. Unit Type
2	B. Facility Name _____ Facility Address _____				

B L O C K	A. Facility I.D.	C. Check if Captive	D. Waste Quantity Shipped in Tons	E. Physical State	F. Unit Type
3	B. Facility Name _____ Facility Address _____				

B L O C K	A. Facility I.D.	C. Check if Captive	D. Waste Quantity Shipped in Tons	E. Physical State	F. Unit Type
4	B. Facility Name _____ Facility Address _____				

V. Onsite (Local Captive) Disposal or Processing

S Y S T E M	D. Waste Quantity in Tons	E. Physical State	F. Unit Type
1			

S Y S T E M	D. Waste Quantity in Tons	E. Physical State	F. Unit Type
2			

VI. Waste Specific Source Reduction Activity

A. Source Reduction Activity Codes					B. Source Reduction Achievements - Toxicity													
W	0	1	W	W	Yes <input type="checkbox"/> ... No <input checked="" type="checkbox"/> - Has a reduction in toxicity been accomplished for this waste stream?													
C. Source Reduction Achievements - Quantities					Describe if yes _____													
Year	Total Waste - Tons					Activity/Production Index					Adjusted Waste Quantity							
1993					3	5	<del>X</del>	<del>X</del>	1	.	0						3	5
1994					4	7	<del>X</del>	<del>X</del>	1	.	0						4	7

WASTE GENERATION AND MANAGEMENT FORM

(Attach to Form 330)

I. Your I.D. No. 

P	A	D	0	0	7	6	5	8	8	3
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 (If you do not have an EPA I.D., see instructions)

II. Generator's Name Pennsylvania Power & Light Co., Susquehanna S.E.S.

III. Waste Information

Residual Waste Code	Primary SIC Code	TRI	Waste Description
R 3 0 5	4 9 1 1		Spent activated carbon (charcoal)

IV. Offsite Shipments

BLOCK	A. Facility I.D.	C. Check if Captive	D. Waste Quantity Shipped in Tons	E. Physical State	F. Unit Type
	1	P A D 9 8 7 3 9 3 2 2 0 Subury Steam Electric Station Old Susquehanna Trail Shardon Dam, PA 17876	<input type="checkbox"/>	2 7	S
2		<input type="checkbox"/>			
3		<input type="checkbox"/>			
4		<input type="checkbox"/>			

V. Onsite (Local Captive) Disposal or Processing

SYSTEM	D. Waste Quantity in Tons	E. Physical State	F. Unit Type
	1		
2			

VI. Waste Specific Source Reduction Activity

A. Source Reduction Activity Codes				B. Source Reduction Achievements - Toxicity											
W	5	2	W	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Has a reduction in toxicity been accomplished for this waste stream?											
C. Source Reduction Achievements - Quantities				Describe if yes _____											
Year	Total Waste - Tons				Activity/Production Index				Adjusted Waste Quantity						
1993				1 5	X							1 5			
1994				2 7	X							2 4			

WASTE GENERATION AND MANAGEMENT FORM

(Attach to Form 330)

I. Your I.D. No. P A D 0 0 0 7 5 5 8 8 3 (If you do not have an EPA I.D., see instructions)

II. Generator's Name Pennsylvania Power & Light Co., Susquehanna S.E.S.

III. Waste Information

Residual Waste Code	Primary SIC Code	TRI	Waste Description
R 5 0 9	4 9 1 1		Waste Oil

IV. Offsite Shipments

BLOCK	A. Facility I.D.	C. Check if Captive	D. Waste Quantity Shipped in Tons	E. Physical State	F. Unit Type
	<u>P A D 9 8 1 7 3 7 1 0 9</u>			L	0 9
1	B. Facility Name <u>Safety Klean</u> Facility Address <u>Vanover Industrial Park</u> <u>600 Stewart Road, Wilkes-Barre, PA. 18706</u>				

BLOCK	A. Facility I.D.	C. Check if Captive	D. Waste Quantity Shipped in Tons	E. Physical State	F. Unit Type
2	B. Facility Name _____ Facility Address _____				

BLOCK	A. Facility I.D.	C. Check if Captive	D. Waste Quantity Shipped in Tons	E. Physical State	F. Unit Type
3	B. Facility Name _____ Facility Address _____				

BLOCK	A. Facility I.D.	C. Check if Captive	D. Waste Quantity Shipped in Tons	E. Physical State	F. Unit Type
4	B. Facility Name _____ Facility Address _____				

V. Onsite (Local Captive) Disposal or Processing

SYSTEM	D. Waste Quantity in Tons	E. Physical State	F. Unit Type
1			

SYSTEM	D. Waste Quantity in Tons	E. Physical State	F. Unit Type
2			

VI. Waste Specific Source Reduction Activity

A. Source Reduction Activity Codes		B. Source Reduction Achievements - Toxicity	
W 1 1 W 1 4 W		Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Has a reduction in <u>toxicity</u> been accomplished for this waste stream?
C. Source Reduction Achievements - Quantities		Describe if yes _____	
Year	Total Waste Tons	Activity/Production Index	Adjusted Waste Quantity
1993		<del>0</del>	7
1994	27	1.1	27



WASTE GENERATION AND MANAGEMENT FORM  
(Attach to Form 330)

I. Your I.D. No. P A D 0 0 0 7 6 3 8 8 3 (If you do not have an EPA I.D., see instructions)

II. Generator's Name Pennsylvania Power & Light Co., Susquehanna S.E.S.

III. Waste Information

Residual Waste Code	Primary SIC Code	TRI	Waste Description
R 5 0 3	4 9 1 1		Oily Waste debris

IV. Offsite Shipments

BLOCK	A. Facility I.D.	C. Check if Captive	D. Waste Quantity Shipped in Tons	E. Physical State	F. Unit Type
	4 0 0 5 9 2			S	0 2
1	B. Facility Name <u>Lancaster County Solid Waste Mngt. Authority, 1299 Harrisburg Pike, P.O. Box 4425, Lancaster, PA. 17604</u>				

BLOCK	A. Facility I.D.	C. Check if Captive	D. Waste Quantity Shipped in Tons	E. Physical State	F. Unit Type
2	B. Facility Name _____ Facility Address _____				

BLOCK	A. Facility I.D.	C. Check if Captive	D. Waste Quantity Shipped in Tons	E. Physical State	F. Unit Type
3	B. Facility Name _____ Facility Address _____				

BLOCK	A. Facility I.D.	C. Check if Captive	D. Waste Quantity Shipped in Tons	E. Physical State	F. Unit Type
4	B. Facility Name _____ Facility Address _____				

V. Onsite (Local Captive) Disposal or Processing

SYSTEM	D. Waste Quantity in Tons	E. Physical State	F. Unit Type
1			

SYSTEM	D. Waste Quantity in Tons	E. Physical State	F. Unit Type
2			

VI. Waste Specific Source Reduction Activity

A. Source Reduction Activity Codes				B. Source Reduction Achievements - Toxicity				
W	0	1	W	W	W	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Has a reduction in toxicity been accomplished for this waste stream?		
C. Source Reduction Achievements - Quantities				Describe if yes _____				
Year	Total Waste - Tons				Activity/Production Index		Adjusted Waste Quantity	
1993				9	<del>1</del>	<del>0</del>		9
1994				2 1	<del>1</del>	<del>0</del>		2 1

WASTE GENERATION AND MANAGEMENT FORM

(Attach to Form 330)

I. Your I.D. No. **P A D 0 0 0 7 6 5 8 8 3** (if you do not have an EPA I.D., see instructions)

II. Generator's Name: Pennsylvania Power & Light Co., Susquehanna, S.E.S.

III. Waste Information

Residual Waste Code				Primary SIC Code		TRI	Waste Description										
R	4	4	0	4	9	1	1	Resins									

IV. Offsite Shipments

B L O C K  1	A. Facility I.D.	<b>9 0 - 2 4 - 2 1 0 6 B</b>	C. Check if Captive	D. Waste Quantity Shipped in Tons							E. Physical State	F. Unit Type	
	B. Facility Name	<u>Baltimore RESCO</u>										S	0
Facility Address		<u>1801 Annapolis Road Baltimore, Md., 21230</u>											

B L O C K  2	A. Facility I.D.		C. Check if Captive	D. Waste Quantity Shipped in Tons							E. Physical State	F. Unit Type	
	B. Facility Name												
Facility Address													

B L O C K  3	A. Facility I.D.		C. Check if Captive	D. Waste Quantity Shipped in Tons							E. Physical State	F. Unit Type	
	B. Facility Name												
Facility Address													

B L O C K  4	A. Facility I.D.		C. Check if Captive	D. Waste Quantity Shipped in Tons							E. Physical State	F. Unit Type	
	B. Facility Name												
Facility Address													

V. Onsite (Local Captive) Disposal or Processing

S Y S T E M  1	D. Waste Quantity in Tons	E. Physical State	F. Unit Type

S Y S T E M  2	D. Waste Quantity in Tons	E. Physical State	F. Unit Type

VI. Waste Specific Source Reduction Activity

A. Source Reduction Activity Codes										B. Source Reduction Achievements - Toxicity											
W	5	2	W		W		W			Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Has a reduction in toxicity been accomplished for this waste stream?									
C. Source Reduction Achievements - Quantities										Describe if yes _____											
Year	Total Waste - Tons							Activity/Production Index			Adjusted Waste Quantity										
1993								0											0		
1994								7											6		



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