

1.) CORPORATION NAME:

CLEAN HARBORS ENVIRONMENTAL SERVICES, INC.

DUE DATE: **4/30/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM
4701 COX RD STE 301
GLEN ALLEN, VA**

SCC ID NO: **F1044777**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

MA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 42 LONGWATER DRIVE

CITY/ST/ZIP: NORWELL, MA 02061

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME:	ALAN S. MC KIM	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	74 SCHOOL ST		
CITY/ST/ZIP/CO:	HINGHAM, MA 02043		
NAME:	JAMES RUTLEDGE	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	EVP		
ADDRESS:	42 LONGWATER DRIVE		
CITY/ST/ZIP/CO:	NORWELL, MA 02061		
NAME:	GREGORY MALERBI	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SVP/TREAS		
ADDRESS:	42 LONGWATER DR		
CITY/ST/ZIP/CO:	NORWELL, MA 02061		
NAME:	C. MICHAEL MALM	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	CLERK		
ADDRESS:	ONE BOSTON PLACE		
CITY/ST/ZIP/CO:	BOSTON, MA 02108		
NAME:	MICHAEL MCDONALD	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST CLERK		
ADDRESS:	42 LONGWATER DR		
CITY/ST/ZIP/CO:	NORWELL, MA 02061		
NAME:	DAVID MUSSELMAN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	42 LONGWATER DRIVE		
CITY/ST/ZIP/CO:	NORWELL, MA 02061		

NAME: ERIC GERSTENBERG TITLE: PRESIDENT ADDRESS: 42 LONGWATER DRIVE CITY/ST/ZIP/CO: NORWELL, MA 02061	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: DAVID PARRY TITLE: EVP ADDRESS: 42 LONGWATER DRIVE CITY/ST/ZIP/CO: NORWELL, MA 02061	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ DAVID MUSSELMAN SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	DAVID MUSSELMAN, ASST SECRETARY PRINTED NAME AND CORPORATE TITLE	4/3/2013 DATE
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It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.