FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject	ct
to Section 16. Form 4 or Form 5	
obligations may continue. See	
Instruction 1(h)	

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

INC. 42 LONGWATER DRIVE (Street) NORWELL MA 02061 (City) (State) (Zip) 4. If Amendment, Date of Original Filed (Month/Day/Year) 4. If Amendment, Date of Original Filed (Month/Day/Year) 5. Individual or Joint/Group Line) X Form filed by One Person Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned		Relationship of Reporting Person(s) to Issuer (Check all applicable)		
C/O CLEAN HARBORS ENVIRON. SERVICES INC. 42 LONGWATER DRIVE (Street) NORWELL MA 02061 (City) (State) (Zip) Chief Opera 4. If Amendment, Date of Original Filed (Month/Day/Year) 4. If Amendment, Date of Original Filed (Month/Day/Year) (City) (State) (Zip) Chief Opera 6. Individual or Joint/Group Line) X Form filed by More Person Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned	3. Date of Earliest Transaction (Month/Day/Year) Officer (give title	10% Owner Other (specify below)		
INC. 42 LONGWATER DRIVE (Street) NORWELL MA 02061 (City) (State) (Zip) 4. If Amendment, Date of Original Filed (Month/Day/Year) 4. If Amendment, Date of Original Filed (Month/Day/Year) 5. Individual or Joint/Group Line) X Form filed by One Person Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned	(made)	<i>'</i>		
42 LONGWATER DRIVE 4. If Amendment, Date of Original Filed (Month/Day/Year) 5. Individual or Joint/Group Line) X Form filed by One Person Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned	S ENVIRON. SERVICES Chief Operating O	HICCI		
(Street) NORWELL MA 02061 (City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned	, , , , , , , , , , , , , , , , , , , ,	, , , , , , , , , , , , , , , , , , , ,		
(Street) NORWELL MA 02061 (City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned		ina Domon		
NORWELL MA 02061 (City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned		•		
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned	· · · · · · · · · · · · · · · · · · ·	One Reporting		
	(Zip)			
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned			
Date (Month/Day/Year) Execution Date, if any (Month/Day/Year) Execution Date, if any (Month/Day/Year) S) Disposed Of (D) (Instr. 3, 4 Securities Beneficially Owned	Date Execution Date, (Month/Day/Year) if any Code (Instr. and 5) Disposed Of (D) (Instr. 3, 4 Securities Beneficially (D) or (Month/Day/Year) Gode (Instr. and 5) Owned Indirect	Securities Form: Direct of Indirect Beneficially (D) or Beneficial Owned Indirect (I) Ownership		
Code V Amount (A) or (D) Reported Transaction(s) (Instr. 3 and 4)	Code V Amount (A) or Reported Transaction(s)	, (ear y		
Common Stock ⁽¹⁾ 06/01/2015 F 976 D \$55.99 74,648	06/01/2015 F 976 D \$55.99 74,648 D)		
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)				
Derivative Security (Instr. 3) Instr. 3) Date (Month/Day/Year) Or Exercise (Instr. 3) Derivative Security Security Or Exercise (Month/Day/Year) Derivative Securities Amount of Securities Or Expiration Date (Month/Day/Year) Or Derivative Securities O	tet execution Date, if any (Month/Day/Year) Fixed partial pa	nership m: of Indirect Beneficial oct (D) ndirect Instr.		

Explanation of Responses:

1. Surrender of shares for tax liability upon vesting of restricted stock.

Eric W. Gerstenberg 06/03/2015

** Signature of Reporting Person Date

 $Reminder: \ Report \ on \ a \ separate \ line \ for \ each \ class \ of \ securities \ beneficially \ owned \ directly \ or \ indirectly.$

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.