HAZARDOUS WASTE MANIFEST

US EPA RECORDS CENTER REGION 5

460597

001
MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

Mr. Frank, Inc.
NAME OF CARRIER (SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND005430244	WARSAW CHEMICAL CO., INC. - P.O. Box 858 Warsaw, IN 46580 (219) 267-3251	3-16-81
TRANSPORTER # 1	IND069506160	Mr. Frank, Inc. 201 W. 155th St. S. Holland, IL 60473 (312) 596-3377	3-16-81
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chemical Service P.O. Box 190 Griffith, IN 46319 (219) 924-4370	3/16/81
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
1	X	U239	E Xylene RQ-1000/454 (Flammable Liquid) -UN1993-	1307				03700		

SPECIAL HANDLING INSTRUCTIONS

If an RQ commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED
Yes ☒ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

TOTAL CHARGES $

FREIGHT CHARGES
FREIGHT PREPAID except when box at right is checked ☐ Check box if charges are to be collect

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding
$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

_____ Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

_____ (Signature of Consignor)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency.

3-16-81
GENERATOR'S SIGNATURE DATE
WARSAW CHEMICAL CO., INC.

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

TSDF SIGNATURE DATE
Pumped to #1 Still 3/16/81

5

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TSDF COPY

003211

HAZARDOUS WASTE MANIFEST

65150
MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

MR. FRANK , INC.
NAME OF CARRIER (SCAC)

0079029
CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND005430244	Warsaw Chemical Company,Inc. Argonne Road P. O. Box 858 Warsaw, Indiana 46580 (219) 267-3251	12/16/80
TRANSPORTER # 1	IND069506160	MR. FRANK INC. 201 W. 155 st. So. Holland, Ill. 60473 (312) 596-3377	12/16/80
TRANSPORTER # 2 (if required)	IND016360265	American Cleaning Service,Inc. P. O. Box 190 Griffith, Indiana 46319 (219) 924-4370	12/16/80
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
4500 gal	*	F005	FLAMMABLE LIQUID N.O.I.	UN1993				4500 gal.		

SPECIAL HANDLING INSTRUCTIONS

If an RQ commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED
Yes ☐ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

TOTAL CHARGES: $

FREIGHT CHARGES
FREIGHT PREPAID except when box at right is checked ☐ Check box if charges are to be collect

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding.
$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."
_____ Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.
_____ (Signature of Consignor)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

To 202TR 12/16/80 JTM T-5

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

GENERATOR'S SIGNATURE DATE

TSDF SIGNATURE DATE

5

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TSDF COPY

003811

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: MID074212952
Manifest Document No: 000002
2. Page 1 of 6
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Washtenaw Auto Body Center dba Maaco
2255 S. Industrial Ann Arbor, MI 48104
4. Generator's Phone (313-994-4805

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone

5. Transporter 1 Company Name: A & B Industrial Services
6. US EPA ID Number: MID017167222
7. Transporter 2 Company Name
8. US EPA ID Number
9. Designated Facility Name and Site Address
American Chemical Service
420 S. Colfax Avenue
Griffith, IN 46319
10. US EPA ID Number: IND016360265

	11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a.	X WASTE PAINT RELATED MATERIAL FLAMMABLE LIQUID NA1263	004	DM	00220	G	
b.						
c.						
d.						

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name	Signature	Month	Day	Year
[illegible]		10	06	87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Rodney Brown	[signature]	10	06	87

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name	Signature	Month	Day	Year
Harold F. Schmidt	[signature]	11	14	87

Style F15REV-6 Labelmaster, Div. of American Labelmark Co. Inc. 60646

EPA Form 8700-22 (Rev. 9/86) Previous editions are obsolete.

4-123R-T-63 10/12/87 gm

TSDF COPY

012243

Division of Land Pollution Control - Manifest
Indiana State Board of Health
P.O. Box 7035
Indianapolis, IN 46207-7035

DO NOT WRITE IN THIS SPACE

Please print or type. (Form designed for use on elite (12-pitch) typewriter)

Form Approved OMB No. 2000 0404 Expires 7 31 86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. M I D 0 7 4 2 1 2 9 5 2 — Manifest Document No.

2. Page 1 of — Information in the shaded areas is not required by Federal law

3. Generator's Name
Maaco
2255 S. Industrial Hwy., Ann Arbor, MI 48104
4. Generator's Phone (313) 994-4805

A. State Manifest Document Number IN 091902
B. State Generator's ID

5. Transporter 1 Company Name: A&B Industrial Services, Inc.
6. US EPA ID Number: M I D 0 1 7 1 6 7 2 2 2
C. State Transporter's ID
D. Transporter's Phone

7. Transporter 2 Company Name
8. US EPA ID Number
E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical
420 S. Colfax Ave.
Griffith, IN 46319
10. US EPA ID Number: I N D 0 1 6 3 6 0 2 6 5
G. State Facility's ID
H. Facility's Phone

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. Waste Paint Related Material Flammable Liquid NA1263	18	D M	1410	G	F003
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

Printed/Typed Name: EDWARD E. COOK — Signature: Edward E. Cook — Month 12 Day 17 Year 87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: CHARLES T. ALLMAN — Signature: Charles T. Allman — Date: Month 12 Day 15 Year 87

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: HAROLD F. SCHMIDT — Signature — Date: Month 12 Day 16 Year 87

IN 091902

EPA Form 8700-22A (Rev. 11-85) UHWM 2/LP2

T.S.D. DETACH AND RETAIN THIS COPY

WRK 8-125K TC30

013002

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: MID074212952 | Manifest Document No.:

2. Page 1 of 5 | Information in the shaded areas is not required by Federal law.

GENERATOR

3. Generator's Name and Mailing Address
Maaco
2255 S. Industrial Hwy. Ann Arbor, MI 48104

4. Generator's Phone (313) 994-4805

A. State Manifest Document Number:

B. State Generator's ID:

5. Transporter 1 Company Name: A & B Industrial Services

6. US EPA ID Number: MID017167222

C. State Transporter's ID:

D. Transporter's Phone:

7. Transporter 2 Company Name:

8. US EPA ID Number:

E. State Transporter's ID:

F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Service
420 S. Colfax Avenue
Griffith, IN 46319

10. US EPA ID Number: IND016360265

G. State Facility's ID:

H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	HM	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. Waste Paint Related Material Flammable Liquid NA1263	X	007	DM	00385	1	D001
b.						
c.						
d.						

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above: 1-Callou

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION**: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name	Signature	Month	Day	Year
[illegible]	[signature]			

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Rodney Brown	Rodney Brown	08	06	87

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name	Signature	Month	Day	Year
HAROLD F SCHMIDT	[signature]	08	07	87

Style F15REV-6 Labelmaster, Div. of American Labelmark Co. Inc. 60646

EPA Form 8700-22 (Rev. 9/86) Previous editions are obsolete.

7-126R 703 B 7

TSDF COPY

013003

Division of Land Pollution Control - Manifest
Indiana State Board of Health
P.O. Box 7035
Indianapolis, IN 46207-7035

DO NOT WRITE IN THIS SPACE

Please print or type. (Form designed for use on elite (12-pitch) typewriter)

Form Approved OMB No. 2000 0404 Expires 7 31 86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. / Manifest Document No.: MID074212952 0000 | 2. Page 1 of: 7 | Information in the shaded areas is not required by Federal law

3. Generator's Name
Maaco
2255 S. Industrial Ann Arbor, MI 48106

A. State Manifest Document Number: IN034166

4. Generator's Phone ( ): 313 994-4805

B. State Generator's ID:

5. Transporter 1 Company Name: A & B Industrial Service, Inc. | 6. US EPA ID Number: MID017167222

C. State Transporter's ID:

D. Transporter's Phone: 616-375-9595

7. Transporter 2 Company Name | 8. US EPA ID Number:

E. State Transporter's ID:

F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Service
420 S. Colfax Avenue
Griffith, IN 46319 | 10. US EPA ID Number: IND016360265

G. State Facility's ID:

H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE PAINT RELATED MATERIAL FLAMMABLE LIQUID NA1263	005	DM	166	G	F003
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

GENERATOR

Printed/Typed Name: M.LEE LUND | Signature: M. Lee Lund | Month 12 Day 16 Year 87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: RAYMOND RIAGG | Signature: Raymond Briagg | Month 12 Day 16 Year 87 | Date

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Month Day Year | Date

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.

Printed/Typed Name: HARROLD F. Schmidt | Signature: Harrold F. Schmidt | Month 12 Day 16 Year 87

IN 034166

EPA Form 8700-22A (Rev. 11-85) UHWM 2/LP2

3-1067-T-63 12/16/87 T.S.D. DETACH AND RETAIN THIS COPY

013004

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.
I N D 0 7 4 2 1 2 9 5 2	0007		

3. Generator's Name and Mailing Address
MAACO
2255 S. Industrial, Ann Arbor, MI 48104

A. State Manifest Document Number
INA 0159941

4. Generator's Phone (313) 994-4805

5. Transporter 1 Company Name
A&B Industrial Service, Inc.

6. US EPA ID Number
I N D 0 7 4 2 2 2 2 2 2

C. State Transporter's ID

D. Transporter's Phone

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
420 S.Calfax Avenue
Griffith, IN 46319

10. US EPA ID Number
I N D 0 1 6 3 6 0 2 6 5

G. State Facility's ID

H. Facility's Phone

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt./Vol.	Waste No.
a. RQ WASTE PAINT RELATED MATERIAL (D001) FLAMMABLE LIQUID, UN1263	2	DM	110	G	
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR

Printed/Typed Name	Signature	Month	Day	Year
X		6	07	88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Michael F. Miller		6	07	88

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name	Signature	Month	Day	Year
Harold F. Schmidt		6	07	88

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0159941

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

126TT63

Division of Land Pollution Control - Manifest
Indiana State Board of Health
P.O. Box 7035
Indianapolis, IN 46207-7035

DO NOT WRITE IN THIS SPACE

Please print or type. (Form designed for use on elite (12-pitch) typewriter)

Form Approved OMB No. 2000 0404 Expires 7 31 86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MID074212952 — Manifest Document No.

2. Page 1 of

Information in the sheded areas is not required by Federal law

3. Generator's Name
Maaco
2255 S. Industrial Ann Arbor, MI 48104

4. Generator's Phone ( ) 313 994-4805

A. State Manifest Document Number IN034286

B. State Generator's ID [illegible]

C. State Transporter's ID [illegible]

D. Transporter's Phone [illegible]

E. State Transporter's ID [illegible]0367

F. Transporter's Phone 312-429-3013

G. State Facility's ID [illegible]

H. Facility's Phone [illegible] 219-924-4370

5. Transporter 1 Company Name [illegible]

6. US EPA ID Number [illegible]

7. Transporter 2 Company Name Adcom Express

8. US EPA ID Number ILD047267364

9. Designated Facility Name and Site Address
American Chemocal Service
420 S. Colfax Avenue
Griffith, IN 46319

10. US EPA ID Number IND016360265

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a. RQ WASTE PAINT RELATED MATERIAL (F003) FLAMMABLE LIQUID NA1263	05	DM	250	G	F003
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

Printed/Typed Name [illegible] — Signature [illegible] — Month Day Year [illegible]

17. Transporter 1 Acknowledgement of Receipt of Materials — Date

Printed/Typed Name [illegible] — Signature [illegible] — Month Day Year [illegible]

18. Transporter 2 Acknowledgement of Receipt of Materials — Date

Printed/Typed Name — Signature — Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19

Printed/Typed Name ALVIN WHITAKER — Signature [illegible] — Month Day Year 9 13 88

IN 034286

EPA Form 8700-22A (Rev. 11-85) UHWM 2/LP2

1237763 9/13

T.S.D. DETACH AND RETAIN THIS COPY

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: MID 074 212 952
Manifest Document No.: 11078A
2. Page 1 of 1

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Maaco
2255 Ondustrial, South, Ann Arbor, MI. 48104
4. Generator's Phone (313) 994-4805

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID 0367
D. Transporter's Phone 312-429-1660
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone 219-924-4370

5. Transporter 1 Company Name: ADCOM EXPRESS, INC.
6. US EPA ID Number: ILD047 267 364

7. Transporter 2 Company Name
8. US EPA ID Number

9. Designated Facility Name and Site Address
American Chemical Service
420 So. Colfax Ave.
Griffith, IN. 46319
10. US EPA ID Number: IND 016 360 265

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	X RQ WASTE PAINT RELATED MATERIAL F003 FLAMMABLE LIQUID NA 1263	2	dm	100	G	F003
b.						
c.						
d.						

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above
G - Gallon

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: [illegible]
Signature: [illegible]
Month Day Year: [illegible]

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: LAWRENCE A. GODFOLD
Signature: [illegible]
Month Day Year: 11 09 88

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: FRANK PRICE
Signature: Frank Price
Month Day Year: 11 15 88

Style F15REV-6 Labelmaster, Div. of American Labelmark Co. Inc. 60646

EPA Form 8700-22 (Rev. 9/86) Previous editions are obsolete.

124 TCT 63 11/16

TSDF COPY

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. M I D 0 0 7 4 2 1 2 9 5 2 — Manifest Document No. 1 2 4 9 C

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

GENERATOR

3. Generator's Name and Mailing Address
Maaco
2255 S. Industrial, Ann Arbor, MI 48104
4. Generator's Phone (313) 994-4805

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name
ADCOM EXPRESS
6. US EPA ID Number I L D 0 4 7 2 6 7 3 6 4
C. State Transporter's ID 0367
D. Transporter's Phone 708-429-1660

7. Transporter 2 Company Name
8. US EPA ID Number
E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Service
420 S. Colfax Avenue
Griffith, IN 46319
10. US EPA ID Number I N D 0 1 6 3 6 0 2 6 5
G. State Facility's ID
H. Facility's Phone 219-924-4370

	11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	RQ WASTE PAINT RELATED MATERIAL (F003) FLAMMABLE LIQUID NA 1263	X	001	DM	000.50	G	F003
b.							
c.							
d.							

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above
G = Gallon

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: RICHARD KLEINKI — Signature: [signature] — Month Day Year: 11 4 91

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: LEO WARSINSKI — Signature: [signature] — Month Day Year: 11 2 91 8 19

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: WHITAKER H — Signature: [signature] — Month Day Year: 11 3 91

Style F15REV-6 LABELMASTER, Div. of AMERICAN LABELMARK CO., CHICAGO, IL 60646

EPA Form 8700-22 (Rev. 9-88) Previous editions are obsolete.

123TCT03 14/5

TSDF COPY

0017167

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No: MID 074 212 952
Manifest Document No: 21388R
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

GENERATOR

3. Generator's Name and Mailing Address
Maaco
2255 South Industrial, Ann Arbor, MI 48104
4. Generator's Phone (313) 994-4805

A. State Manifest Document Number:
B. State Generator's ID:
C. State Transporter's ID: 0367
D. Transporter's Phone: 312-429-1660
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID:
H. Facility's Phone: 219-924-4370

5. Transporter 1 Company Name: ADCO Express
6. US EPA ID Number: ILD 047 267 364
7. Transporter 2 Company Name:
8. US EPA ID Number:
9. Designated Facility Name and Site Address: American Chemical Service
420 South Colfax Avenue
Griffith, IN 46319
10. US EPA ID Number: IND 016 360 265

	11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	HM	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	RQ WASTE PAINT RELATED MATERIAL (F003) FLAMMABLE LIQUID NA 1263	X	1	dm	55	G	F003
b.							
c.							
d.							

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above: G = Gallon

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name | Signature | Month | Day | Year

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month | Day | Year

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month | Day | Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name | Signature | Month | Day | Year

Style F15REV-6 Labelmaster, Div. of American Labelmark Co. Inc. 60646

EPA Form 8700-22 (Rev. 9/86) Previous editions are obsolete.

126TC163 2/21

TSDF COPY

0017168

Pl[illegible] type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: MID 074 212 952
Manifest Document No.: 50189D
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Maaco
2255 South Industrial, Ann Arbor, MI 48104

4. Generator's Phone (313) 994-4805

A. State Manifest Document Number:
B. State Generator's ID:

5. Transporter 1 Company Name: ADCO Express
6. US EPA ID Number: ILD 047 267 364
C. State Transporter's ID: 0367
D. Transporter's Phone: 312-429-1660

7. Transporter 2 Company Name:
8. US EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Service
420 South Colfax Avenue
Griffith, IN 46319

10. US EPA ID Number: IND 016 360 265
G. State Facility's ID:
H. Facility's Phone: 219-924-4370

	11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	HM X RQ WASTE PAINT RELATED MATERIAL (F003) FLAMMABLE LIQUID NA 1263	1	dm	53	G	F003
b.						
c.						
d.						

J. Additional Descriptions for Materials Listed Above:

K. Handling Codes for Wastes Listed Above: G - Gallon

15. Special Handling Instructions and Additional Information:

16. **GENERATOR'S CERTIFICATION**: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: [illegible] Signature: [illegible] Month: [illegible] Day: [illegible] Year: [illegible]

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: [illegible] Signature: [illegible] Month: [illegible] Day: [illegible] Year: [illegible]

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: Signature: Month: Day: Year:

19. Discrepancy Indication Space:

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: [illegible] Signature: [illegible] Month: [illegible] Day: [illegible] Year: [illegible]

GENERATOR / TRANSPORTER / FACILITY

Style F15REV-6 Labelmaster, Div. of American Labelmark Co. Inc. 60646

EPA Form 8700-22 (Rev. 9/86) Previous editions are obsolete.

126TCT63 5/3

TSDF COPY

0017166

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

A 1076[illegible]

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co., Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10015
Delivery - Fri 12/17/82 8-9AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	Approx. 44,544#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: G H Jameson / [illegible]
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED: M D Y 12/16/82

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. P. O. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): Wagner
26. Date Accepted: M D Y 12/16/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted: M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S.Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): [illegible]
40. Date Accepted: M / D / 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted: M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO 210 KT-50 GRM 12.17.82

003550

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV, 6-81

MANIFEST NUMBER
A 107663

003643

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10009
Delivery - Mon 12/6/82 8-9 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	Approx. 44,544#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 12 / 5 / 82

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. P. O. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE
25. NAME (Print): Marvin Wagner
26. Date Accepted M / D / Y: 12 / 5 / 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffin, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE
39. NAME (Print): EDWIN FEE
40. Date Accepted M / D / Y: 12 / 6 / 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY To 210 E T-50 GEM 12.6.82

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 104819

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10009
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624
Delivery - Mon 12/13/82 8-9AM

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	FLAMMABLE	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	Approx. 44,544#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene H Jameson
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED (M D Y): 12 12 82

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): Gerald Wagner
26. Date Accepted (M D Y): 12 12 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted (M / D / Y)

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): [illegible]
40. Date Accepted: 12/13/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted (M / D / Y)

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO 211 E T-50
GKM 12-13-82

DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

A 104822

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10009 Delivery - Wed 12/22/82 8-9AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Was$b Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	Approx. 44,544#
					1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M O Y: 12 / 21 / 82

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. P. O. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): Marvin Wagner
26. Date Accepted M / D / Y: 12 / 21 / 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): F DUNFEE
40. Date Accepted: 12/22/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 210 RT-50
GRM 12-22-82

003671

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 108268

003343

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10017; Delivery - Fri 12/10/82 8-9AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	44,544#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: G. H. Jameson / jb
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED: M D Y 12/9/82

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Marvin Wagner
25. NAME (Print): Marvin Wagner
26. Date Accepted: M D Y 12/9/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted: M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffin, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: F D Unfee
39. NAME (Print): FD UNFEE
40. Date Accepted: M D Y 12/10/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted: M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 210 TK T-50
GKM 12-10-82

DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

A 108280

003693

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co., Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10015
Delivery - Tue 12/28/82 8-9AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	Approx. 44,544#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: H.H. Jameson Jr.
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 12 / ~~26~~ 27 / 82

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: 17400

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): [signature]
26. Date Accepted M / D / Y: 12 / 27 / 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FOUNFEE
40. Date Accepted M / D / Y: 12 / 27 / 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

To 210K
T-50 GPM 12.28.82

HAZARDOUS WASTE FACILITY

DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

A 108297

003672

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co., Inc.	2. EPA IDENTIFICATION NO.: WID 990829475
4. P.O. BOX OR STREET ADDRESS: Route 7	
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701	6. TELEPHONE NUMBER: (715) 834-9624

3. COMMENTS/SPECIAL INSTRUCTIONS

Tanker - 10017

Delivery - Mon 12/20/82 8-9AM

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	Approx. 44,544#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE	16. NAME (Print)	17. DATE SHIPPED M D Y
[signature]	Gene H. Jameson	12 / 19 / 82

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.	19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. P. O. Box 855	
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304	22. TELEPHONE NUMBER: (608) 838-3108

23. COMMENTS

In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE	25. NAME (Print)	26. Date Accepted M / D / Y
[signature]	Wagner	12 19 82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME	28. EPA IDENTIFICATION NO.

29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services	33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax	
35. CITY, STATE, ZIP CODE: Griffith, IN 46319	36. TELEPHONE NUMBER: (219) 924-4370

37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE	39. NAME (Print)	40. Date Accepted M / D / Y
[signature]	[signature]	12/20/82

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME	42. EPA IDENTIFICATION NO.

43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 210 RT-50
6PM 12.20.82

DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 107607

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10009 Delivery - Fri 1/14/83 8-9AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture [1] 2. Liquid	F003	Approx. 44,554#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture [ ] 2. Liquid		
					1. Solid 3. Mixture [ ] 2. Liquid		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene Jameson
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED: M 1 D 13 Y 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Marvin Wagner
25. NAME (Print): Marvin Wagner
26. Date Accepted: M 1 D 13 Y 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: 219 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FOUNTEE
40. Date Accepted: M 1 D 14 Y 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 211RT-50 GPM 1.14.83

004530

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER: A 107736

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co., Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10009 Delivery - Thur 1/6/83 8-9AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	Approx. 44,544#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: G. H. Jameson Jr.
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 1 / 5 / 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200C10049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Marvin Wagner
25. NAME (Print): Marvin Wagner
26. Date Accepted M / D / Y: 1 5 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: F Dunfee
39. NAME (Print): F DUNFEE
40. Date Accepted M / D / Y: 1/6/83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
- In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

T021RT-50
GWM 1-6-83

HAZARDOUS WASTE FACILITY

004527

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen -- press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 107749

004531

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co., Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10015
Delivery - Wed 1/12/83 8-9AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	44,544#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 1 / 11 / 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): Gerald Wagner
26. Date Accepted M / D / Y: 1 / 11 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FDUNFEE
40. Date Accepted M / D / Y: 1/12/83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

To 210 RT-50
[illegible] 1.12.83

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen - press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER: A 107792

004418

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 2727 Delivery - Due 11/22/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	45,000#
		(RQ-Toluene.Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 11 / 21 / 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Marvin Wagner
25. NAME (Print): Marvin Wagner
26. Date Accepted: 11 / 21 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: 219 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: D Dunfee
39. NAME (Print): EDWARD DUNFEE
40. Date Accepted: 11/22/83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

To 212 & T-50

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 108026

004328

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co., Inc
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10015
Delivery - Fri 1/28/83 8-9AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 2. Liquid 3. Mixture [2]	F003	Approx. 44,544#
		(RQ-Toluene/Xylene)			1. Solid 2. Liquid 3. Mixture [ ]		
					1. Solid 2. Liquid 3. Mixture [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene Jameson /jh
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 1 /27 / 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Les Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): Wagner
26. Date Accepted M / D / Y: 1 / 27 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FDUNFEE
40. Date Accepted: 1/28/83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

T0210 RT-50 GRM 1-28-82

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 108073

004404

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10017; Delivery - Mon 1/31/83 8Ø9AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	Approx. 44,544#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene Jameson /gl
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED: M D Y 1 30 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838Ø3108
23. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): Marvin Wagner
26. Date Accepted: M / D / Y 1 30 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted: M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FDUNFEE
40. Date Accepted: 1/31/83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted: M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

TO 210 RT-50 GRN
1.31.83

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 108074

004405

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co., Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10015; Delivery Mon - 11/24/83 8-9AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	Approx. 44,544#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 1 / 23 / 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Marvin Wagner
25. NAME (Print): Marvin Wagner
26. Date Accepted M / D / Y: 1 / 23 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

TO 210 RT-50 GRM 1-24-83

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 92404370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: FDunfee
39. NAME (Print): FDUNFEE
40. Date Accepted: 1/24/83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

...E OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 108173

004410

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10017
Delivery - Wed 1/26/83 8-9AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	Approx. 44,544#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene Jameson /gh
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 1 / 25 / 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE:
25. NAME (Print): Wagner
26. Date Accepted M D Y: 1 / 25 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): EDUNFEE
40. Date Accepted M D Y: 1 / 26 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

TO 211 FT-50 GRM 1-26-83

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 108193

0044U7

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10015
Delivery - Tue 1/18/83 8-9AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture [2] 2. Liquid	F003	Approx. 44,544#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture [ ] 2. Liquid		
					1. Solid 3. Mixture [ ] 2. Liquid		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: G. H. Jameson /gh
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 1 / 17/83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE
25. NAME (Print): Gerald Wagner
26. Date Accepted M / D / Y: 1 / 12 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: D Dunfee
39. NAME (Print): DUNFEE
40. Date Accepted M / D / Y: 1 / 18 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

To 211 FT-50

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER: A 108196

004403

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co., Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10009
Delivery - Thurs 1/20/83 8-9AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	Approx. 44,544#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene Jameson
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED: M 1 D 19 Y 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE:
25. NAME (Print): Gerald Wagner
26. Date Accepted: M 1 D 19 Y 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted: M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: D Miller
39. NAME (Print): FDUNFEE
40. Date Accepted: M 1 D 20 Y 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted: M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

TO 211 RT-50

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 108299

004532

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10017 Delivery 1/4/83 Tue 8-9AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	~~5800~~ 3800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	Approx. 44,544#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: G. H. Jameson / [signature]
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 1 / 3 / 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): Gerald Wagner
26. Date Accepted M / D / Y: 1 / 3 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FDUN FEE
40. Date Accepted M / D / Y: 1 / 4 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

TO 210RT-50
[signature] 1.4.83

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER: A 110004

004379

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10017; Delivery - Mon 6/20/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	44,544#
		(RQØToluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene H. Jameson / jh
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED: M D Y 6 / 19 / 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): Gerald Wagner
26. Date Accepted: M D Y 6 / 19 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted: M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FDUNFEE
40. Date Accepted: M D Y 6 / 20 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted: M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO 210 E T-50 GRW

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 110049

00430

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10015
Delivery - Fri 7/1/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715)834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	44,5444
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED: M 6 D 30 Y 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: 608 838-3103
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE:
25. NAME (Print): Gerald Wagner
26. Date Accepted: M 6/30/83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted: M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: ILD 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS: TO 210K 7/1/83 Jim Mingly
T-50

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): F DUNFEE
40. Date Accepted: 7/1/83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted: M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 110086

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co.,Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10009 Delivery - Tue 4/19/83
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS (RQ-Toluene/Xylene)	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	Approx. 44,544#
					1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene H. Jameson
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 4 / 18 / 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: E. Sniegowski
25. NAME (Print): E. SNIEGOWSKI
26. Date Accepted: 4 / 18 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: R. Miller
39. NAME (Print): R. MILLER
40. Date Accepted M D Y: 4 19 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO 210 KT-50
GRM 4.19.83

004379

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard:

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 110166

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10017 Delivery - Wed 3/30/83 before 3:00 PM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture [2] 2. Liquid	F003	44,544#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture [ ] 2. Liquid		
					1. Solid 3. Mixture [ ] 2. Liquid		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED: M D Y 3 / 29 / 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAP 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-4249300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): Marvin Wagner
26. Date Accepted: M 3 D 29 Y 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted: M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FDWFEE
40. Date Accepted: M 3 D 30 Y 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted: M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

To 2116 T-50

DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen -- press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

A 110372

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10009 Delivery - Tue 4/5/83
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture [2] 2. Liquid	F003	Approx. 44,544#
		(RQ-TOluene/Xylene)			1. Solid 3. Mixture [ ] 2. Liquid		
					1. Solid 3. Mixture [ ] 2. Liquid		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene Jameson
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 4 / 4 / 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Trasnport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608)-838-3108
23. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE:
25. NAME (Print): E SNIEGOWSKI
26. Date Accepted M / D 4/ 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219)-924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE:
39. NAME (Print): FD WHITE
40. Date Accepted M / D / Y:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

T021KT-50
GRM 4.5.83

00450

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 110404

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 2727
Delivery - Fri 7/22/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: 715 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene Jameson /jb
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 7/21/83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): Marvin Wagner
26. Date Accepted M D Y: 7/21/83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.D. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: F Dunfee
39. NAME (Print): FDUNFEE
40. Date Accepted: 7/22/83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

T0211RT-50
[illegible] 7-22-83

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER: A 110408

004437

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10017 Delivery - Mon 8/1/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) -834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene Jameson/lh
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 7 / 31 / 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Brian Wagner
25. NAME (Print): ~~P. Sniegowski~~ BRIAN WAGNER
26. Date Accepted M / D / Y: 7 / 31 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [illegible]
39. NAME (Print): FDU [illegible]
40. Date Accepted M / D / Y: 8 / 1 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

T0211KT-50 GRN 8-1-83

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 110409

00463

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 2727 Delivery - Wed 7/27/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715)834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
	(RQ-Toluene/Xylene)				1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene H. Jameson
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED: M D Y 7 / 26 / 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IRT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608)838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE:
25. NAME (Print): Gerald Wagner
26. Date Accepted: M / D / Y 7 / 28 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted: M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219)924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE:
39. NAME (Print):
40. Date Accepted: M / D / Y

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted: M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

To 210 E.T-50 ERM 7-27-83

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 110426

004471

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co., Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10017
Delivery - Mon 7/18/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	WasteFlammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	44,544#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene Jameson Jr.
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED: M D Y 7 / 17 / 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Marvin Wagner
25. NAME (Print): Marvin Wagner
26. Date Accepted: 7 / 17 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted: M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: 219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FDUN FEE
40. Date Accepted: 7/18/83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted: M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

TO 211 KT-50 GRM 7-18-83

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 110427

C0440

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 2727 Delivery - Tue 7/19/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	44,544#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene Jameson Jr
16. NAME (Print): Gene Jameson
17. DATE SHIPPED: M D Y 7/18/83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE:
25. NAME (Print): E. Sniegowski
26. Date Accepted: M 7 D 18 Y 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted: M D Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: FDunfee
39. NAME (Print): FDUNFEE
40. Date Accepted: 7/19/83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted: M D Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR ONR USE ONLY

To 210 KT-50 GRM 7-19-83

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 110463

004467

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co., Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10009
Delivery - Thurs 7/21/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	WasteFlammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene Jameson Jr.
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 7 / 20 / 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave., Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE:
25. NAME (Print): E. Sniegowski
26. Date Accepted: 7 M / 20 D / 83 Y

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted: M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: F Dunfee
39. NAME (Print): F DUNFEE
40. Date Accepted: 7/21/83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted: M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

To 211KT-50 GRM

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 110466

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10017
Delivery - Wed 7/20/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	44,544#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene Jameson /jb
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M O Y: 7 / 19 / 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Marvin Wagner
25. NAME (Print): Marvin Wagner
26. Date Accepted M O Y: 7 / 19 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / O / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: F Dunfee
39. NAME (Print): F DUNFEE
40. Date Accepted M O Y: 7/20/83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

To 210 & T-50 GRM 7.20.83

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 110474

004404

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10015
Delivery - Thur 7/28/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene Jameson /jh
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED: M D Y 7 / 27 / 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): Marvin Wagner
26. Date Accepted: 7 M / 27 D / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted: M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FDV [illegible]
40. Date Accepted: 7/28/83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted: M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

TO 211KT-50 GRM 7.28.83

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 110497

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10015 Delivery - Tue 8/2/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ=Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene Jameson /jk
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 8 / 1 / 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 8383108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE:
25. NAME (Print): Gerald Wagner
26. Date Accepted M / D / Y: 8 / 1 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

To 205 K T-50 GRN
8 2 83

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE:
39. NAME (Print): EDWARDS
40. Date Accepted M / D / Y: 8 / 2 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

(0476)

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 110523

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WIH 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 2727 Delivery - Fri 7/29/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture [2] 2. Liquid	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture [ ] 2. Liquid		
					1. Solid 3. Mixture [ ] 2. Liquid		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene Jameson Jr.
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 7 / 28 / 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE:
25. NAME (Print): Gerald Wagner
26. Date Accepted M / D / Y: 7 / 28 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE:
39. NAME (Print): [illegible]
40. Date Accepted: 7 29 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

To 211 KT-50

HAZARDOUS WASTE FACILITY 6/84 7 29 83

00455

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 110583

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10017; Delivery - Tue 8/8/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE:
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED: M D Y 8 / 8 / 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): Marvin Wagner
26. Date Accepted: M / D / Y 8 / 8 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted: M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FDUNFEE
40. Date Accepted: M / D / Y 8 / 8 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted: M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

T0205ET-50
8.8.83

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 110780

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10015 Delivery - Tue 5/31/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture [2] 2. Liquid	F003	44,544#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture [ ] 2. Liquid		
					1. Solid 3. Mixture [ ] 2. Liquid		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene Jameson Jr
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 5 / 30 / 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Gerald Wagner
25. NAME (Print): Gerald Wagner
26. Date Accepted M / D / Y: 5 / 30 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: T Dunfee
39. NAME (Print): T DUNFEE
40. Date Accepted M / D / Y: 5/31/83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

T0211KT-50

HAZARDOUS WASTE FACILITY Call 5/31/83

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 110781

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10017 Delivery - Wed 6/1/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire. WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	44,544#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene Jameson
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED: M 5 D 31 Y 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines. IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency -- Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE:
25. NAME (Print): E. Sniegowski
26. Date Accepted: M 5 D 31 Y 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted: M / D / Y

To 211RT-50
6/24/83

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 01630265
34. P.O. BOX OR STREET ADDRESS: 420 S. Caffax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: 219 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE:
39. NAME (Print): EDUNFEE
40. Date Accepted: M 6 D 1 Y 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted: M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

004320

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER: A 111803

004462

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10017 Delivery - Fri 2/11/83
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture [2] 2. Liquid	F003	Approx. 44,544#
		(RQ Toluene/Xylene)			1. Solid 3. Mixture [ ] 2. Liquid		
					1. Solid 3. Mixture [ ] 2. Liquid		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene Jameson/gb
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 2 / 10 / 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Marvin Wagner
25. NAME (Print): Marvin Wagner
26. Date Accepted M / D / Y: 2 / 10 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

To 211E T-50 GRM

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: Bob Mauck
39. NAME (Print): Bob Mauck
40. Date Accepted M / D / Y: 2 / 11 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 111900

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10015; Delivery - Mon 2/7/83
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	Approx. 44,544#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene Jameson /jb
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED: M D Y 2 / 6 / 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print):
26. Date Accepted: M D Y 2 / 6 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted: M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: Bob Mauck
39. NAME (Print): Bob Mauck
40. Date Accepted: 02/07/83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted: M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

TO 210 KT-50
[illegible] 2-2-83

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER: A 111947

004405

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10017 Delivery - Wed 2/2/83
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	Approx. 44,554#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED: M D Y 2 / / 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print):
26. Date Accepted: M / D / Y 2 / / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted: M / D / Y

To 211 KT-506 RM 2.2.83

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): R DUNFEE
40. Date Accepted: 2/2/83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted: M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER: A 111959

004403

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10009 Delivery - Wed 2/9/83
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	Approx. 44,544
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene Jameson
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 2 / 8 / 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE:
25. NAME (Print):
26. Date Accepted M / D / Y:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

To 212RT-50

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: Frank Price
39. NAME (Print): FRANK PRICE
40. Date Accepted: 2/8/83

I Hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 118811

004392

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10015
Delivery - Fri 6/3/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	44,544#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene H. Jameson
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M O Y: 6/ 2/ 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency Call Chemtrec 800424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE:
25. NAME (Print): E. Sniegowski
26. Date Accepted M / O / Y: 6 / 2 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / O / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FWNFEE
40. Date Accepted: 6/3/83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / O / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR ONR USE ONLY

To 211K T-50
EPA 6-3-83

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen -- press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 118812

004562

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 1 of 1
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: 715 834-9624

Delivery - Mon 6/6/83 AM

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture [2] 2. Liquid	F003	44,544#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture [ ] 2. Liquid		
					1. Solid 3. Mixture [ ] 2. Liquid		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE:
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M O Y: 6 / 5 / 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE:
25. NAME (Print): Gerald Wagner
26. Date Accepted M / D / Y: 6 / 5 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

To 21KT-50 CAM 6-6-83

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE:
39. NAME (Print): EDWUFFE
40. Date Accepted M / D / Y: 6/6/83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR ONR USE ONLY

004371

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER: A 118815

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10009 Delivery - Thurs 6/2/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: 715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	44,544#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene Jameson
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M O Y: 6 / 1 / 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: ( ) 608 838-3108
23. COMMENTS: In Case of Emergency Call Chemtrec 800-424-9300

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 118883

004578

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10015
Delivery - ~~MAX~~ Tue 6/28/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	44,544#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene Jameson /gh
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 6 / 27 / 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE:
25. NAME (Print): E. Sniegowski
26. Date Accepted M D Y: 6 / 27 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): EDWIN FEE
40. Date Accepted: 6-28-83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

To 211 K T-50
GRW 6-28-83

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 118886

004316

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10017 Delivery - Fri 6/24/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	44,544#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene Jameson l/fe
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 6/23/83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE:
25. NAME (Print): Marvin Wagner
26. Date Accepted M / D / Y: 6 / 23 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: F Dunfee
39. NAME (Print): F DUNFEE
40. Date Accepted: 6/24/83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 210 E T-50 6pm 6.24.83

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 118952

004581

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10017 Delivery - Thur 6/16/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	44,544#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene Jameson w/fe
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 6 / 15 / 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE:
25. NAME (Print): E. Sniegowski
26. Date Accepted M / D / Y: 6 / 15 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE:
39. NAME (Print): EDURFEE
40. Date Accepted M / D / Y:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 211 RT-50 6PM
6-16-83

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 118968

004360

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10015; Delivery - Fri 6/17/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	44,544#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene Jameson Jr.
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 6 / 16 / 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Marvin Wagner
25. NAME (Print): Marvin Wagner
26. Date Accepted M / D / Y: 6 / 16 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

To 210E 7-50
EPA 4-1283

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [illegible]
39. NAME (Print): [illegible]
40. Date Accepted M / D / Y: 6 / 17 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 118970

004374

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10015
Delivery - Tue 6/21/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	44,544#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene Jameson/jhs
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED: M D Y 6/ 20 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 G rand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 8383108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper conditinn for transportatinn and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Marvin Wagner
25. NAME (Print): Marvin Wagner
26. Date Accepted: M / D / Y 6 / 20 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted: M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: T Dunfee
39. NAME (Print): FD UNFEE
40. Date Accepted: 6/21/83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted: M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

To 210 KT-50
GPW 6.21.83

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 119005

004564

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10815 Delivery - Thurs 6/9/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	44,544#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene Jameson
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 6 / 8 / 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE:
25. NAME (Print): E. Sniegowski
26. Date Accepted M / D / Y: 6 / 8 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: F Dunfee
39. NAME (Print): F DUNFEE
40. Date Accepted M / D / Y: 6 / 9 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY To 210 RT-50 EPM

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER: A 119014

004366

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10009 Delivery - Mon 6/13/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	44,544#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene H Jameson
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 6 / 12 / 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE:
25. NAME (Print): Gerald Wagner
26. Date Accepted M / D / Y: 6 / 12 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE:
39. NAME (Print):
40. Date Accepted M / D / Y:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

T0210K T-50 6RW 6-13-83

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 119018

004363

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10017
Delivery - Tue - 6/7/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture [2] 2. Liquid	F003	44,544#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture [ ] 2. Liquid		
					1. Solid 3. Mixture [ ] 2. Liquid		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene H. Jameson
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 6 / 6 / 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE:
25. NAME (Print): E. Sniegowski
26. Date Accepted: 6 / 6 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE:
39. NAME (Print): EDWARD
40. Date Accepted: 6/7/83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

To 210E T-50
ERM 6.7.83

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 119020

004385

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10015; Delivery - Tues 6/14/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, Wi 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	44,544#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene Jameson [signature]
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 6 / 13 / 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE:
25. NAME (Print): E. Sniegowski
26. Date Accepted M / D / Y: 6 13 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): [illegible]
40. Date Accepted M / D / Y: [illegible]

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

TO 211 E T-50
GPN 6.14.83

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 119029

004566

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10017
Delivery - Fri 5/27/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715)-834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture [2] 2. Liquid	F003	44,544#
		(RO-Toluene/Xylene)			1. Solid 3. Mixture [ ] 2. Liquid		
					1. Solid 3. Mixture [ ] 2. Liquid		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 5 / 26 / 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: 608)-833-3108
23. COMMENTS

In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE
25. NAME (Print): Gerald Wagner
26. Date Accepted M D Y: 5 / 26 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE
39. NAME (Print): EDUNEC
40. Date Accepted: 5/27/83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO 21RT-50 GRY
5-27-83

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 119090

004367

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10009 Delivery - Thurs 5/26/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture [2] 2. Liquid	F003	44,544#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture [ ] 2. Liquid		
					1. Solid 3. Mixture [ ] 2. Liquid		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene Jameson
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 5/ 25/ 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE
25. NAME (Print): E. Sniegowski
26. Date Accepted M/D/Y: 5/25/83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE
39. NAME (Print): F DUNFEE
40. Date Accepted: 5/26/83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

T0211E T-50
GPM 5-26-83

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 119091

004570

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10015 Delivery - Tue 5/24/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	44,544#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene Jameson Jr.
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 5 /23 / 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608-838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): E. Sniegowski
26. Date Accepted M D Y: 5 / 23 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): [illegible]
40. Date Accepted: 5/[illegible]

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO 211E T-50
GRM 5.24.83

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDDUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 119145

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990029475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10009 Delivery - Thur 6/23/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	44,544#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene Jameson Jr.
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 6 / 22 / 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608-838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9624

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE:
25. NAME (Print): E. Sniegowski
26. Date Accepted M / D / Y: 6 22 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 463[illegible]19
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE:
39. NAME (Print):
40. Date Accepted M D Y: 6 23 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

To 210 RT-50

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 119804

00440

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co., Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10017; Delivery - Wed 8/3/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene Jameson /jb
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED: M D Y 8 / 2 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Marvin Wagner
25. NAME (Print): Marvin Wagner
26. Date Accepted: M / D / Y 8 / 2 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted: M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): F DUNFEE
40. Date Accepted: 8/3/83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted: M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

To 210 E. T-50

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 119804

004457

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co., Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10017
Delivery - Wed 8/3/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene Jameson / jb
16. NAME (Print): Gnae H. Jameson
17. DATE SHIPPED M D Y: 8/ 2 /83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): Marvin Wagner
26. Date Accepted M D Y: 8 / 2 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FOUNFEE
40. Date Accepted: 8/3/83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

To 205 KT-50 GRM
8-9-83

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 119811

004455

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10017
Delivery - Ftt 8/5/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 2. Liquid 3. Mixture [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 2. Liquid 3. Mixture [ ]		
					1. Solid 2. Liquid 3. Mixture [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 8 / 4 / 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 833-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE:
25. NAME (Print): E. Sniegowski
26. Date Accepted: 8 / 4 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted: M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FDVNFEE
40. Date Accepted: 8/5/83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted: M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

TO 21CK T-50
EPA 8-5-83

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 119813

004451

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10009 Delivery - Wed 8/10/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene Jameson
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED: M 8 D 9 Y 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (603) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE:
25. NAME (Print): Gerald Wagner
26. Date Accepted: M 8 D 9 Y 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted: M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE:
39. NAME (Print): EDUNTZ
40. Date Accepted: M 8 D 10 Y 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted: M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

TO 210 E T-50 GOW

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen -- press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 119820

004433

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10017 Delivery - Fri 8/12/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture [2] 2. Liquid	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture [ ] 2. Liquid		
					1. Solid 3. Mixture [ ] 2. Liquid		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene Jameson /ft
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED: M 8 D 11 Y 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE:
25. NAME (Print): E. Sniegowski
26. Date Accepted: 8 / 11 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted: M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: /Dan Jeen
39. NAME (Print): FDUVIGE
40. Date Accepted: 8 / 12 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted: M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

TO205 R T-50 CRM
6/1/83

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen ✦ press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A- 120070

004574

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co., Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10009 Delivery - Thurs. 5/19/83 8:00AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	44,544#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene Jameson
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 5 / 18 / 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE
25. NAME (Print): E. Sniegowski
26. Date Accepted M D Y: 5 / 18 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

To 211 R T-50 CHM

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE
39. NAME (Print): P DUNPEE
40. Date Accepted M D Y: 5 / 19 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen -- press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 120071

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10017 Deliver - Mon 5/23/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

73420
7800
11830

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	44,544#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene Jameson / jh
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 5 / 22 / 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): Gerald Wa gner
26. Date Accepted M D Y: 5 / 22 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FDUNFEE
40. Date Accepted: 5/23/83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

To 210 T-50
[illegible] 5.23.83

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 120096

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: W ste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10009 Delivery - Tue 5/17/83 8:00AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture [2] 2. Liquid	F003	44,544#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture [ ] 2. Liquid		
					1. Solid 3. Mixture [ ] 2. Liquid		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene Jameson/ph
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 5/16/83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency Ø Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: E. Sniegowski
25. NAME (Print): E. Sniegowski
26. Date Accepted M / D / Y: 5 / 16 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: F Dunlee
39. NAME (Print): F DUNLEE
40. Date Accepted M / D / Y: 5 / 17 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

To 211 RT-50 EIN

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 120140

004348

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker # 10015 Delivery - Thur 5/12/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) - 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture [2] 2. Liquid	F003	44,544#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture [ ] 2. Liquid		
					1. Solid 3. Mixture [ ] 2. Liquid		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene Jameson Jr
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED: M 5 D 11 Y 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE
25. NAME (Print): E. Sniegowski
26. Date Accepted: 5 / 12 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: F Dunfee
39. NAME (Print): FD UNFEE
40. Date Accepted: 5 / 12 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

TO 210KT-52 GRW

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 120162

004547

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10015
Delivery - Tue 5/10/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture [2] 2. Liquid	F003	44,544#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture [ ] 2. Liquid		
					1. Solid 3. Mixture [ ] 2. Liquid		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene Jameson Jr
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED: M 5 D 9 Y 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: E. Sniegowski
25. NAME (Print): E. Sniegowski
26. Date Accepted: M 5 D 9 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

To 211 KT-50
Call 5/10 83

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: P Dunlee
39. NAME (Print): P DUNLEE
40. Date Accepted: 5/10/83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 121218

004447

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co., Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 2727
Delivery - Thurs. 9/1/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE:
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED: M D Y 9 / 1 / 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corporation
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): Marvin Wagner
26. Date Accepted: M D Y 9 / 1 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted: M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FDUNFEE
40. Date Accepted: 9 / 1 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted: M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

TO 211 K T-50
GRM 9.1.83

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 120226

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co., Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker – 2727 Delivery – Wed 11/30/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	45,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE:
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 11 / 29 / 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency – Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE:
25. NAME (Print): Gerald Wagner
26. Date Accepted M D Y: 11 / 29 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: T Dunfee
39. NAME (Print): T DUNFEE
40. Date Accepted: 11/30/83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708.

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

T0212 RT-50 CRM

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 120227

004425

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10015
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

Delivery - Thurs 12/1/83 AM

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 11 / 30 / 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Marvin Wagner
25. NAME (Print): Marvin Wagner
26. Date Accepted M D Y: 11 / 30 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

HAZARDDUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION ND.: IND 016360265
34. P.O. BDX DR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHDNE NUMBER: (219) 924-4370
37. CDMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE
39. NAME (Print): EDUNFEE
40. Date Accepted: 12/1/83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDDUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHDRIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M D Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 212 R. T-SD GRN 12.1.83

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 120229

0044 23

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10009 Delivery - Tue 11/29/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 11/ 28/ 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE
25. NAME (Print): Marvin Wagner
26. Date Accepted M/D/Y: 11/ 28/ 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 9244370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE
39. NAME (Print): PDUNCAN
40. Date Accepted M/D/Y: 11/29/83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO 210 T-50
6PM 11.28.83

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 120244

004420

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10015
Delivery - Wed 11/23/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid ☐	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid ☐		
					1. Solid 3. Mixture 2. Liquid ☐		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 11/ 22/ 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Dew Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): Gerald Wagner
26. Date Accepted: 11/ 22/ 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): EDUNFEE
40. Date Accepted: 11/23/83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

TO210E. T-50
GRM 11.23.83

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 120249

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10009
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624
Delivery - Fri 12/2/83 AM

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 12/ 1 / 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Gerald Wagner
25. NAME (Print): Gerald Wagner
26. Date Accepted M / D / Y: 12 / 1 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE
39. NAME (Print)
40. Date Accepted M / D / Y

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

To 212RT-50 GRM

004424

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 120803

004363

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10009
Delivery - Thurs 7/14/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	44,544#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene Jameson /jh
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 7 13 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): E. Sniegowski
26. Date Accepted M / D / Y: 7 / 13 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FDUNFEE
40. Date Accepted M / D / Y:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

TO 211 R 7-50
[illegible] 7.14.83

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 120811

004362

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co., Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 2727 Delivery - Fri 7/15/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS (RQ-Toluene/Xylene)	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	44,544#
					1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene Jameson/gh
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 7 / 14 / 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE:
25. NAME (Print): Gerald Wagner
26. Date Accepted M / D / Y: 7 / 14 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE:
39. NAME (Print):
40. Date Accepted M / D / Y: 7 15 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

To 210 F T-50 GRM 7-15-83

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen -- press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 120891

004439

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 2727; Delivery - Mon 8/8/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluen/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene Jameson Jr.
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M O Y: 8 / 7 / 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE:
25. NAME (Print): E. Sniegowski
26. Date Accepted M / D / Y: 8 7 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: A Dumke
39. NAME (Print): FDUNFEE
40. Date Accepted: 8 8 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

To 211 E T-50

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 120895

004462

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10015
Delivery - Thurs 8/4/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene Jameson/jh
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 8 / 3 / 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 20001009
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): E. [illegible] Ki
26. Date Accepted M D Y: 8 / 3 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 01636026
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): F DUNFEE
40. Date Accepted: 8/4/83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

To211 E-T-50
GRW 8-4-83

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 120906

004577

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co., Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 2727 Delivery - Tue 7/5/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture [2] 2. Liquid	F003	44,544#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture [ ] 2. Liquid		
					1. Solid 3. Mixture [ ] 2. Liquid		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene Jameson Jr.
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED: M 7 D A Y 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: 608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Ronald Wagner
25. NAME (Print): Ronald Wagner
26. Date Accepted: M 7 D 8 Y 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS: To 211R T-50 7/5/83 Jim Murphy

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FD0NFEE
40. Date Accepted: 7/5/83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER: A 120908

004368

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co., Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10017 Delivery - Wed 7/6/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liqid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	44,544#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene Jameson Jr.
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED: M 7 D 5 Y 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE:
25. NAME (Print): E. Sniegowski
26. Date Accepted: M 7 D 5 Y 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted: M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS: To 211K T-50 7/6/83 Jim Murphy

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE:
39. NAME (Print): FDUNTEE
40. Date Accepted: M 7 D 6 Y 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted: M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 120910

0043567

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co., Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 2727 Delivery - Thurs 7/7/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	44,544#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene Jameson
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED: M 7 D 6 Y 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Marvin Wagner
25. NAME (Print): Marvin Wagner
26. Date Accepted: M 7 D 6 Y 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted: M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS: To 210E T-50 7/7/83 Jim Muff

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: P Dunfee
39. NAME (Print): P DUNFEE
40. Date Accepted: 7/7/83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted: M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 120915

004372

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co., Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10017 Delivery - Thur 6/30/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	44,544#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene H Jameson Jr
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 6 / 29 / 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 836-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE:
25. NAME (Print): E. Sniegowski
26. Date Accepted M / D / Y: 6 / 29 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS: T-50 TO 211 R 6/30/83 Jim Murphy

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: F Dunfee
39. NAME (Print): FDUNFEE
40. Date Accepted: 6/30/83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 120920

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10009 Delivery - Wed 6/29/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	44,544#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED: M 6 D 28 Y 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): Gerald Wagner
26. Date Accepted: M 6 D 28 Y 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted: M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): F
40. Date Accepted: M / D / Y

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted: M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 210F T-50

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 120923

004317

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10009 Delivery - Mon 6/27/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	44,544#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene Jameson Jr.
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 6 26 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: 608 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE:
25. NAME (Print): Gerald Wagner
26. Date Accepted M D Y: 6 26 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M D Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: F Dunfee
39. NAME (Print): F DUNFEE
40. Date Accepted M D Y: 6 27 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M D Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 210K T-50 GRW 6-27-83

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 120925

004367

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co., Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10017; Delivery - Fri 7/8/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	44,544#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene Jameson /jh
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 7 / 7 / 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE:
25. NAME (Print): Quentin Hagen
26. Date Accepted M / D / Y: 7 / 7 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

TO 205 RT-50 GPM 7-8-83

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FD UNFEE
40. Date Accepted M / D / Y: 7 / 8 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 120927

004364

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Resear-ch & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 2727
Delivery - Tue 7/12/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	44,544#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene Jameson/jh
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 7 / 11 / 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): F. Spiegowski
26. Date Accepted M D Y: 7 / 11 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FDUNFEE
40. Date Accepted M / D / Y: 7/12/83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

To 211KT-50

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 120948

004396

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10017 Delivery - Wed 7/13/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	44,544#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene Jameson
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 7 / 12 / 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (XXX 608-838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE
25. NAME (Print): Gerald Wagner
26. Date Accepted: M 7 / D 12 / Y 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

To 211K T-50 GRM 7-13-83

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: T Wangler
39. NAME (Print): FDUMFEE
40. Date Accepted M / D / Y: 7/13/83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instruction.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 120961

0043[illegible]

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co., Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10009
Delivery - Mon 7/11/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	44,544#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene Jameson Jr.
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 7 / 10 / 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE:
25. NAME (Print): Gerald Wagner
26. Date Accepted M / D / Y: 7 / 10 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

To 210 FT-50
GPM 7-11-83

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 463019
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: FDVNFEE
39. NAME (Print):
40. Date Accepted M / D / Y: 7/11/83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 121148

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10015 Delivery - Mon 7/25/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: 715 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene Jameson Jr.
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 7 /22 /83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608)838-3108
23. COMMENTS: In Case of Emergency- Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE:
25. NAME (Print): Gerald Wagner
26. Date Accepted M / D / Y: 7 / 24 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

To 210 TE T-50

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360625
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: 219)924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: T Munfee
39. NAME (Print): FDUNFEE
40. Date Accepted: 7/25/83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 121226

004400

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WId 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10017 Delivery - Thur 8/25/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene Jameson Jr
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 8 24 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: 608 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Gerald Wagner
25. NAME (Print): Gerald Wagner
26. Date Accepted M / D / Y: 8 / 24 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: FDunfee
39. NAME (Print): FDUNFEE
40. Date Accepted M / D / Y: 8 / 25 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 210 KT-50 GRM 8-25-83

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 121264

004449

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker – 10017 Delivery - Thur 8/18/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene Jameson
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED: M 8 / D 17 / Y 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): Gerald Wagner
26. Date Accepted: M 8 / D 17 / Y 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted: M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): F DUNFEE
40. Date Accepted: 8/18/83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted: M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

TO 210F
T-SD 6Pal 8.18.83

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 121285

004448

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co., Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10017; Delivery - Tue 8/30/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	~~49,000#~~
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		45450
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene Jameson/jh
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED: M D Y 8/29/83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Marvin Wagner
25. NAME (Print): Marvin Wagner
26. Date Accepted: 8/29/83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted: M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FD UNFEE
40. Date Accepted: 8/30/83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted: M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

To 210 K T-50 GRM 8-30-83

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 121321

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10009 Delivery - Mon 8/15/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene Jameson Jr
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED: 8 / 14 / 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE:
25. NAME (Print): E. Sniegowski
26. Date Accepted: 8 / 14 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted: M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE:
39. NAME (Print): FDUN FEE
40. Date Accepted: 8/15/83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted: M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

T0205FT50 GAM 8-15-83

00424

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 121323

004452

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10015; Delivery - Thurs 8/11/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US OOT HAZARD CLASS	11. US OOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene Jameson /jb
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED: 8 / 10 / 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): Marvin Wagner
26. Date Accepted: 8 / 10 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted: M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FDUNFEE
40. Date Accepted: 8 11 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted: M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 211E T-50 GRM
8.11.83

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen -- press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 121502

00419

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10009 Delivery - Mon 11/21/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 11 / 20 / 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE
25. NAME (Print): Gerald Wagner
26. Date Accepted M D Y: 11 / 20 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services,
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE
39. NAME (Print): EDWARDS
40. Date Accepted M / D / Y: 11/21/83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

To 210 KT-50 GKM 11-21-83

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 125902

004321

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10015 Delivery - Fri 10/14/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene H Jameson
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 10 / 13 / 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Gerald Wagner
25. NAME (Print): Gerald Wagner
26. Date Accepted M / D / Y: 10 / 13 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: Maurice Dunn
39. NAME (Print): Maurice DUNN
40. Date Accepted M / D / Y: 10 / 14 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO 210K T-50
GRM 10.14.83

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 125976

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10017
Delivery - Mon 11/28/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

1.62
15160

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE:
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED: M D Y 11/27/83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 8383-108
23. COMMENTS:
In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): [redacted] Wagner
26. Date Accepted: M D Y 11 27 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted: M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): F DUNFEE
40. Date Accepted: M / D / Y 11 28 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted: M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

TO 211ET-50 GRW

004422

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER: A 129510

0043247

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10009 Delivery - Mon 10/24/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED: M 10 / D 23 / Y 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE
25. NAME (Print): Gerald Wagner
26. Date Accepted: 10 / 23 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted: M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: N Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: Nupee
39. NAME (Print): FOUNTEE
40. Date Accepted: 10/24/83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted: M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

To 210 ET-50 GRN

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER: A 129519

004326

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10015 Delivery - Tue 10/25/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 10 / 24 / 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304 m
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Marvin Wagner
25. NAME (Print): Marvin Wagner
26. Date Accepted M / D / Y: 10 / 24 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: D Dunfee
39. NAME (Print): FDUNFEE
40. Date Accepted M / D / Y: 10 25 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

TO 211K T-50

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 129520

004325

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10009
Delivery - Wed 11/2/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE
16. NAME (Print): Gene H. Jackson
17. DATE SHIPPED M D Y: 11 / 1 / 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Marvin Wagner
25. NAME (Print): Marvin Wagner
26. Date Accepted M / D / Y: 11 / 1 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: T DUNFEE
39. NAME (Print): T DUNFEE
40. Date Accepted: 11/2/83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24-Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

TO 211 KT-50 6RM

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 129604

04320

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co., Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10017 Delivery - Wed 10/26/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene H Jameson
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED: M 10 D 25 Y 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE
25. NAME (Print): Gerald Wagner
26. Date Accepted: 10 / 25 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted: M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: H Lee
39. NAME (Print): F DUNFEE
40. Date Accepted: 10 28 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted: M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

To 211K T-50 GAL

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 129607

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & ReclamationCo. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10015 Delivery - Mon 11/7/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE:
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M O Y: 11/ 6/ 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box
21. CITY, STATE, ZIP CODE: Des Moines, I
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: emtrec 800-424-9300

ted quantity(ies) has (have) been accepted
hat delivery shall be made to the facility

t): Wagner
26. Date Accepted M O Y: 11/ 6/ 83

iantity(ies) has (have) been accepted
livery shall be made to the facility

28. EPA IDENTIFICATION NO.:
31. Date Accepted M / O / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE:
39. NAME (Print): F DUNFEE
40. Date Accepted M / O / Y: 11/ 7/ 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZAROOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR ONR USE ONLY

IET-50 GPM 11.7.83

094417

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 129661

004322

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WId 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10015
Delivery - Tue ~~XXX~~ 11/1/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE:
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED: M D Y 10 / 31 / 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 8383108
23. COMMENTS: InCase of Emergency Call Chemt4rec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): Gerald Wagner
26. Date Accepted: M D Y 10 / 31 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted: M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FDUNFEE
40. Date Accepted: M D Y 11 / 1 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted: M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

TO 210 FT-50 GRM 10-7-83

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 137813

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10017; Delivery - Thur 11/10/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Harold Loew
16. NAME (Print): Harold Loew
17. DATE SHIPPED: M D Y 11/9/83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Marvin Wagner
25. NAME (Print): Marvin Wagner
26. Date Accepted: 11/9/83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted: M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FANNIE LE
40. Date Accepted: 11/10/83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted: M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24-Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

T0210F T-50 GRM 11.10.83

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 137817

004415

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 2727 Delivery - Tue 11/8/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	45,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Harold Loew
16. NAME (Print): Harold Loew
17. DATE SHIPPED: M 11 D 7 Y 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Marvin Wagner
25. NAME (Print): Marvin Wagner
26. Date Accepted: 11 / 7 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted: M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IDD 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: J Dunfee
39. NAME (Print): J DUNFEE
40. Date Accepted: M 11/8/83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted: M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

TD211 RT-50 GRM 11.8.83

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER: A 137830

004400

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10009; Delivery - Wed 11/9/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Harold Loew
16. NAME (Print): Harold Loew
17. DATE SHIPPED: M 11 D 8 Y 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): Gerald Wagner
26. Date Accepted: M 11 D 8 Y 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted: M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FDUFEE
40. Date Accepted: 11 9 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted: M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

To 211 K T-52
GKM 11.9.83

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 137872

004414

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10015
Delivery - Fri 11/11/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Harold Loew
16. NAME (Print): Harold Loew
17. DATE SHIPPED M D Y: 11 / 10 / 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): Gerald Wagner
26. Date Accepted M D Y: 11 / 10 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FDU NFEE
40. Date Accepted M / D / Y: 11 / 11 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

To 210 K T-60
[illegible] 11.11.83

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 137885

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10009
Delivery - Mon 11/14/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Harold Loew
16. NAME (Print): Harold Loew
17. DATE SHIPPED: M D Y 11/13/83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Marvin Wagner
25. NAME (Print): Marvin Wagner
26. Date Accepted: M 11 D 13 Y 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted: M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: ( )
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FDU WEE
40. Date Accepted: M 11 D 14 Y 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted: M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

T0211E T-50
11.14.83

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 137886

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 2727
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

Delivery - Tue 11/15/83 AM

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	45,000
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Harold Loew
16. NAME (Print): Harold Loew
17. DATE SHIPPED M D Y: 11-14-83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): Gerald Wagner
26. Date Accepted: 11 / 14 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

To 211 RT-50 GRM 11.15.83

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FDUN FEE
40. Date Accepted: 11/14/83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 137887

00427

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10017 Delivery - Wed 11/16/83 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M O Y: 11/ 15 83

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave., Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Marvin Wagner
25. NAME (Print): Marvin Wagner
26. Date Accepted: 11/ 15 / 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / O / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FDUNFEE
40. Date Accepted: 11/16/83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / O / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR ONR USE ONLY

HAZARDOUS WASTE FACILITY

To 211RT-50

DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen -- press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

A 137902

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10015 Delivery - Wed 1/18/84 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 1 / 17 / 84

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE
25. NAME (Print): Gerald Wagner
26. Date Accepted M 1 / 17 / Y 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: T Dunfee
39. NAME (Print): T DUNFEE
40. Date Accepted: 1/18/84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

T0205 FT-50
GRM 1.18.84

00990

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER: A 137903

006633

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co., Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10009 Delivery - Mon 1/30/84 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED: M 1 D 29 Y 84

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): Gerald Wagner
26. Date Accepted: M 1 D 29 Y 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted: M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. ~~EIN~~ Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): R Rushnok
40. Date Accepted: M 1 D 30 Y 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted: M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

AZARDOUS WASTE FACILITY

T0212K T-50
GRM 1-30-84

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 137935

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co., Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10009
Delivery - Mon 1/16/84 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834 - 9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED: M 1 O 15 Y 84

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): Gerald Wagner
26. Date Accepted: M 1 O 15 Y 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted: M / O / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FDUNFEE
40. Date Accepted: M 1 O 16 Y 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted: M / O / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR ONR USE ONLY

HAZARDOUS WASTE FACILITY

To 210 KT-50 GRW 1.16.84

006642

DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 137939

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co., Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10009 Delivery - Tue 1/24/84 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene.Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 1 / 23 / 84

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave., Box 855
21. CITY, STATE, ZIP CODE: ~~EXXXXXX~~ Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE
25. NAME (Print): Gerald Wagner
26. Date Accepted M / D / Y: 1 / 23 / 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

To 211K T-50 GRM 1.24.84

HAZARDOUS WASTE FACILITY

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: R Rushak
39. NAME (Print): Rushak R
40. Date Accepted M / D / Y: 1 / 24 / 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

006636

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 137957

006641

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Reaearch & Reclamation Co., Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10009 Delivery - Thurs 1/19/84 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 1 / 18 / 84

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 2000100493
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Marvin Wagner
25. NAME (Print): Marvin Wagner
26. Date Accepted M / D / Y: 1 / 18 / 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American ChemicalServices
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: J Dunfee
39. NAME (Print): J DUNFEE
40. Date Accepted: 1/19/84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

T0206 RT-50 6KM
1.1C all

DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 137959

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co., Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10015; Delivery - Mon 1/23/84 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) - 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED: M 1 D 22 Y 84

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) · 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Marvin Wagner
25. NAME (Print): Marvin Wagner
26. Date Accepted: M 1 D 22 Y 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted: M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219 · 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: R Rushak
39. NAME (Print): Rushak
40. Date Accepted: M 1 D 23 Y 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted: M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 210 RT-50 GRM 1.23.84

UU6039

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen -- press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 137965

006630

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co., Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10009; Delivery - Thurs 1/26/84 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture [2] 2. Liquid	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture [ ] 2. Liquid		
					1. Solid 3. Mixture [ ] 2. Liquid		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 1 / 25 / 84

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Gerald Wagner
25. NAME (Print): Gerald Wagner
26. Date Accepted M / D / Y: 1 / 25 / 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE
39. NAME (Print)
40. Date Accepted M / D / Y

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE: R Rushwork
44. NAME (Print): R Rushwork
45. Date Accepted M / D / Y: 1 / 26 / 84

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 212 F T-50
GEM 1.26.84

DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 137966

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co., Inc.	2. EPA IDENTIFICATION NO.: WID 990829475
4. P.O. BOX OR STREET ADDRESS: Route 7	
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701	6. TELEPHONE NUMBER: (715)-834-9624

3. COMMENTS/SPECIAL INSTRUCTIONS
Tanker - 10015
Delivery - Thurs 2/2/84 AM

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 2 / 1 / 84

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.	19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855	
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304	22. TELEPHONE NUMBER: (608) 838-3108

23. COMMENTS
In Case of Emergency - Call Chemtrec 800424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE	25. NAME (Print)	26. Date Accepted M / D / Y
Marvin Wagner	Marvin Wagner	2 / 1 / 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME	28. EPA IDENTIFICATION NO.

29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services	33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Calfax	
35. CITY, STATE, ZIP CODE: Griffith, IN 46319	36. TELEPHONE NUMBER: (219) 924-4370

37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE	39. NAME (Print)	40. Date Accepted M / D / Y
R Rushnok	R Rushnok	2 / 2 / 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME	42. EPA IDENTIFICATION NO.

43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO210RT-50
GRM 2.2.84

006656

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 137967

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10015
Delivery - Wed 2/8/84 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene H Jameson
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 2 / 7 / 84

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Gerald Wagner
25. NAME (Print): Gerald Wagner
26. Date Accepted M / D / Y: 2 / 7 / 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: R Rushnck
39. NAME (Print): R Rushnck
40. Date Accepted M / D / Y: 1 / 8 / 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDDUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 212 TC T-50
GRM 2.8.84

006654

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen -- press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 137969

006632

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co., Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 2727; Delivery - Tue 1/31/84 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	45,000
		(RQ-Toluene.Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE
16. NAME (Print): Gene H. Jamason
17. DATE SHIPPED: M 1 D 30 Y 84

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 3666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Marvin Wagner
25. NAME (Print): Marvin Wagner
26. Date Accepted: M 1 D 30 Y 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services, Inc.
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: R Rushnak
39. NAME (Print): R Rushnak
40. Date Accepted: M 1 D 31 Y 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To: 210 ET-50
GRM 1.31.84

DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

A 138006

006644

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co., Inc.	2. EPA IDENTIFICATION NO.: WID 990829475
4. P.O. BOX OR STREET ADDRESS: Route 7	
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701	6. TELEPHONE NUMBER: (715) 834-9624

3. COMMENTS/SPECIAL INSTRUCTIONS
Tanker - 2727
Delivery - Wed 1/11/84 AM

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	45,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE	16. NAME (Print)	17. DATE SHIPPED M / D / Y
	Gene H. Jameson	1 / 10 / 84

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.	19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855	
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304	22. TELEPHONE NUMBER: (608) 838-3108

23. COMMENTS
In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE	25. NAME (Print)	26. Date Accepted M / D / Y
[signature]	Marvin Wagner	1 / 10 / 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME	28. EPA IDENTIFICATION NO.

29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services	33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax	
35. CITY, STATE, ZIP CODE: Griffith, IN 46319	36. TELEPHONE NUMBER: (219) 924-4370

37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE	39. NAME (Print)	40. Date Accepted M / D / Y
[signature]	[signature]	1 / 10 / 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME	42. EPA IDENTIFICATION NO.

43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

TO211KT-50 GRM 1.11.84

HAZARDOUS WASTE FACILITY

DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen, press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

A 138009

006646

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME	2. EPA IDENTIFICATION NO.	3. COMMENTS/SPECIAL INSTRUCTIONS
Waste Research & Reclamation Co. Inc.	WID 990829475	Tanker - 2727
4. P.O. BOX OR STREET ADDRESS: Route 7		Delivery - Fri 1/6/84 AM
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701	6. TELEPHONE NUMBER: (715) 834-9624	

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	45,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE

16. NAME (Print): Gene H. Jameson

17. DATE SHIPPED M D Y: 1 / 5 / 84

TRANSPORTER SECTION

18. COMPANY NAME	19. EPA IDENTIFICATION NO.
Ruan Transport Corp.	IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855	
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304	22. TELEPHONE NUMBER: (608) 838-3108

23. COMMENTS

In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE	25. NAME (Print)	26. Date Accepted M / D / Y
Marvin Wagner	Marvin Wagner	1 / 5 / 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME	28. EPA IDENTIFICATION NO.

29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME	33. EPA IDENTIFICATION NO.
American Chemical Services	IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax	
35. CITY, STATE, ZIP CODE: Griffith, IN 46319	36. TELEPHONE NUMBER: (219) 924-4370

37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE	39. NAME (Print)	40. Date Accepted M / D / Y
[signature]	FDUNFEE	1/6/84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME	42. EPA IDENTIFICATION NO.

43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY To 211E T-50 GAM 1.6.84

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 138011

006643

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10015
Delivery - Fri 1/13/84 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene H Jameson
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 1/ 12/ 84

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Marvin Wagner
25. NAME (Print): Marvin Wagner
26. Date Accepted: 1/ 12/ 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted: M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: F Dunfee
39. NAME (Print): F DUNFEE
40. Date Accepted: 1/ 13/ 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted: M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 206 FT-50 GRW
1.13.84

DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER: A 138036

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co., Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10009 Delivery - Mon 1/9/84 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 1 / 8 / 84

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (6 08 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE
25. NAME (Print): Wagner
26. Date Accepted: 1 / 8 /84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE
39. NAME (Print): FLYNN EE
40. Date Accepted M / D / Y

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

T0210 R T-50
GRM 1.9.84

006945

DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER: A 138071

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME	2. EPA IDENTIFICATION NO.	3. COMMENTS/SPECIAL INSTRUCTIONS
Waste Research & Reclamation Co~~r~~ Inc.	WID 990829475	Tanker - 2727 Delivery - Tue 1/17/84 AM
4. P.O. BOX OR STREET ADDRESS: Route 7		
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701	6. TELEPHONE NUMBER: (715) 834-9624	

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture **2** 2. Liquid	F003	45,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture ☐ 2. Liquid		
					1. Solid 3. Mixture ☐ 2. Liquid		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Harold Loew
16. NAME (Print): Harold Loew
17. DATE SHIPPED: M 1 / D 16 / Y 84

TRANSPORTER SECTION

18. COMPANY NAME	19. EPA IDENTIFICATION
Ruan Transport Corp.	IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855	
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304	22. TELEPHONE NUMBER: (608) 838-3108

23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE	25. NAME (Print)	26. Date Accepted
Marvin Wagner	Marvin Wagner	M 1 / D 16 / Y 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME	28. EPA IDENTIFICATION NO.

29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted
		M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME	33. EPA IDENTIFICATION NO.
American Chemical Services	IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax	
35. CITY, STATE, ZIP CODE: Griffith, IN 46319	36. TELEPHONE NUMBER: (219) 924-4370

37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE	39. NAME (Print)	40. Date Accepted
[signature]	F DUNPEE	M 1 / D 17 / Y 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME	42. EPA IDENTIFICATION NO.

43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted
		M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

T0211 R T-50
GRW 1.17.84

DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 138087

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co., Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10015; Delivery - Fri 1/27/84 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Harold Loew
16. NAME (Print): Harold Loew
17. DATE SHIPPED M D Y: 1/26/84

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Marvin Wagner
25. NAME (Print): Marvin Wagner
26. Date Accepted M D Y: 1/27/84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: R Rushnok
39. NAME (Print): R Rushnok
40. Date Accepted M D Y: 1/24/84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 212 K T-50 GRM 1.27.84

006631

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 138092

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co., Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 2727 Delivery - Fri 1/20/84 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture [2] 2. Liquid	F003	45,000#
		(RQ-Toluene./Xylene)			1. Solid 3. Mixture [ ] 2. Liquid		
					1. Solid 3. Mixture [ ] 2. Liquid		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 1 / 19/ 84

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. P. O. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE
25. NAME (Print): Gerald Wagner
26. Date Accepted M / D / Y: 1 19 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

TOWER T-50 GRM 1.20.84

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219)924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE
39. NAME (Print): T-DUNTEE
40. Date Accepted M / D / Y: 1 20 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

0006638

DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 138096

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co., Inc.
2. EPA IDENTIFICATION NO.: WID 99082w9475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 2727 Delivery - Wed 1/25/84 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	45,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 1 / 24 / 84

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Marvin Wagner
25. NAME (Print): Marvin Wagner
26. Date Accepted: 1 / 24 / 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: R Rushnok
39. NAME (Print): Rushnok
40. Date Accepted: 1/25/84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 210 KT-50 GRW 1.25.84

006035

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 201987

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co., Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10017; Delivery - Wed 5/30/84 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Harold Loew
16. NAME (Print): Harold Loew
17. DATE SHIPPED M D Y: 5 / 29 / 84

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Quentin J Hagen
25. NAME (Print): QUENTIN J HAGEN
26. Date Accepted M D Y: 5 29 83

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: T Dwyer
39. NAME (Print): T DWYER
40. Date Accepted: 53084

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

212 212E-T-50

HAZARDOUS WASTE FACILITY

006715

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 201999

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10017
Delivery - Fri 5/25/84 AM
2.55
10446
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE:
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 5 / 24 / 84

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (715) 7232391
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE:
25. NAME (Print): F. SMIEGOWSKI
26. Date Accepted M / D / Y: 5 24 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

212 R.T.50

HAZARDOUS WASTE FACILITY

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: ( ) 219 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: A Dunfee
39. NAME (Print): FDUNFEE
40. Date Accepted: 5/25/84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

006716

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 250802

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co., Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 20211 Delivery - Mon 7/30/84 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-8624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 7 / 29 / 84

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave, Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE
25. NAME (Print): Wagner
26. Date Accepted M D Y: 7 29 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE
39. NAME (Print)
40. Date Accepted M / D / Y

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

210K T-50 8000 BTU 1.4 Y. Cl.

HAZARDOUS WASTE FACILITY

00634

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 250832

006736

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 20211 Delivery - Fri 8/24/84 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 8 / 23 / 84

TRANSPORTER SECTION

18. COMPANY NAME: Ryan Transport Corp
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (715) 723-2391
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE
25. NAME (Print): F. SNIEGOWSKI
26. Date Accepted M / D / Y: 8 / 23 / 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

210K T-50 12,100 BTU/LB 1.7% Cl.

HAZARDOUS WASTE FACILITY

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemdeal Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE
39. NAME (Print): EDWIN [illegible]
40. Date Accepted M / D / Y: 8 [illegible]

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 251002

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10009
Delivery - Mon AM 7/9/84
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 7 / 8 / 84

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): [illegible] Wagner
26. Date Accepted M / D / Y: 7 / 8 / 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): EDUNFEE
40. Date Accepted: 7/9/84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

212 K T-50 11500 BTU 3.8%

HAZARDOUS WASTE FACILITY

000128

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 251021

006727

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10009
Delivery - Mon 7/16/84 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene Jameson / jk
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 7 / 15 / 84

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): Gerald Wagner
26. Date Accepted M D Y: 7 15 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): EDUNFEE
40. Date Accepted M D Y: 7 16 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
in Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

212E T-50

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 251054

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME	Waste Research & Reclamation Co., Inc.
2. EPA IDENTIFICATION NO.	WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS	Tanker - 10015 Delivery - Tue 7/31/84 AM
4. P.O. BOX OR STREET ADDRESS	Route 7
5. CITY, STATE, ZIP CODE	Eau Claire, WI 54701
6. TELEPHONE NUMBER	(715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RO-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE	16. NAME (Print)	17. DATE SHIPPED M D Y
[signature]	Gene H. Jameson	7 / 30 / 84

TRANSPORTER SECTION

18. COMPANY NAME	Ruan Transport Corp.
19. EPA IDENTIFICATION NO.	IAT 200010049
20. P.O. BOX OR STREET ADDRESS	666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE	Des Moines, IA 50304
22. TELEPHONE NUMBER	(608) 838-3108
23. COMMENTS	In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE	25. NAME (Print)	26. Date Accepted M / D / Y
[signature]	Marvin Wagner	7 30 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME	28. EPA IDENTIFICATION NO.

29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME	American Chemical Services
33. EPA IDENTIFICATION NO.	IND 016360265
34. P.O. BOX OR STREET ADDRESS	420 S. Colfax
35. CITY, STATE, ZIP CODE	Griffith, IN 46319
36. TELEPHONE NUMBER	(219) 924-4370
37. COMMENTS	

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE	39. NAME (Print)	40. Date Accepted M D Y
[signature]	F DUNFEE	7 31 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME	42. EPA IDENTIFICATION NO.

43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

212 ET-50 11400 BTU 5.5% Cl.

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 251064

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker 10009

Delivery - Fri 7/27/84 AM

4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE:
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 7 / 26 / 84

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE:
25. NAME (Print): Gerald Wagner
26. Date Accepted M / D / Y: 7 26 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE:
39. NAME (Print): EDUNTEE
40. Date Accepted M / D / Y: 7/27/84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

210K T-50 12200 B70 3.6Y. GL

006735

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 251076

006732

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 2727
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624
Delivery - Thurs 8/2/84 AM

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5200	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	45,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M O Y: 8 / 1 /84

TRANSPORTER SECTION

18. COMPANY NAME: Ryan Tranport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (715) 723-2391
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE
25. NAME (Print): F SNIEGOWSKI
26. Date Accepted M / D / Y: 8 1 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: F Dunfee
39. NAME (Print): F DUNFEE
40. Date Accepted M D Y: 8 2 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

12400 BTU/LB 21IRT-50
2.2% Cl.

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 251128

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 2727 Delivery - Mon 7/2/84 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5200	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	45,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE:
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 7 / 1 / 84

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE:
25. NAME (Print): Gerald Wagner
26. Date Accepted M D Y: 7 / 1 / 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE:
39. NAME (Print):
40. Date Accepted M D Y: 7/2/84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

212 K T-50

006121

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 251178

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME	2. EPA IDENTIFICATION NO.	3. COMMENTS/SPECIAL INSTRUCTIONS
Waste Research & ReclamationCo. Inc.	WID 990829475	11800 2% Tanker - 10015 Delivery - Fri 7/20/84 AM
4. P.O. BOX OR STREET ADDRESS: Route 7		
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701	6. TELEPHONE NUMBER: (715) 834-9624	

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE

16. NAME (Print): Gene H. Jameson

17. DATE SHIPPED M D Y: 7 / 19 / 84

TRANSPORTER SECTION

18. COMPANY NAME	19. EPA IDENTIFICATION NO.
Ruan Transport Corp.	IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. P. O. Box 855	
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304	22. TELEPHONE NUMBER: (715) 723-2391

23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE	25. NAME (Print)	26. Date Accepted M / D / Y
		7 19 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME	28. EPA IDENTIFICATION NO.

29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME	33. EPA IDENTIFICATION NO.
American Chemical Services	IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax	
35. CITY, STATE, ZIP CODE: Griffith, IN 46319	36. TELEPHONE NUMBER: (219) 924-4370

37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE	39. NAME (Print)	40. Date Accepted M / D / Y
	EDUNTEE	7 20 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME	42. EPA IDENTIFICATION NO.

43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

212F T-50 11800 BTU 2% Cl.

HAZARDOUS WASTE FACILITY

0067730

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 251252

006720

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10015
Delivery - Tue 7/3/84 AM
360
12090
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 7 /2 84

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call chemtrec 800-424-93-0

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Marvin Wagner
25. NAME (Print): Marvin Wagner
26. Date Accepted M / D / Y: 7 2 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chamical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): EDUNEEE
40. Date Accepted: 7/3/84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

211 RET-SO

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 251253

006722

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME	2. EPA IDENTIFICATION NO.	3. COMMENTS/SPECIAL INSTRUCTIONS
Waste Research & Reclamation Co., Inc.	WID 990829475	Tanker - 10009 Delivery - Thurs 6/28/84 AM
4. P.O. BOX OR STREET ADDRESS: Route 7		
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701	6. TELEPHONE NUMBER: (715) 834-9624	

1.34
5726

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE

16. NAME (Print): Gene H. Jameson

17. DATE SHIPPED M D Y: 6/27/84

TRANSPORTER SECTION

18. COMPANY NAME	19. EPA IDENTIFICATION NO.
Ruan Transport Corp.	IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855	
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304	22. TELEPHONE NUMBER: (608) 838-3108

23. COMMENTS

In Case of Emergency - Call chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE	25. NAME (Print)	26. Date Accepted M / D / Y
Marvin Wagner	Marvin Wagner	6 / 27 / 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME	28. EPA IDENTIFICATION NO.

29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY

211R T-50

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME	33. EPA IDENTIFICATION NO.
American Chemical Services	IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax	
35. CITY, STATE, ZIP CODE: Griffith, IN 46319	36. TELEPHONE NUMBER: (219) 924-4370

37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE	39. NAME (Print)	40. Date Accepted M / D / Y
	T-DUNTE	6/28/84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME	42. EPA IDENTIFICATION NO.

43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 251260

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co., Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10017
Delivery - Fri 7/6/84 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 7 / 5 / 84

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3188
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): Gerald Wagner
26. Date Accepted M / D / Y: 7 / 5 / 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services,
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): F DWFEE
40. Date Accepted M / D / Y: 7/6/84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

211KT-50
10600 BTU/LB
43% Cl.

000127

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 251421

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10015 Delivery - Wed 8/8/84 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 8 / 7 / 84

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE
25. NAME (Print): E SKIEPOWSKI
26. Date Accepted M / D / Y: 8 / 7 / 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

211E T-50 12000 BTU/LB 25% Cl.

HAZARDOUS WASTE FACILITY

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE
39. NAME (Print): EDWARDS
40. Date Accepted: 8/8/84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

006731

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER: A 251504

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10015 Delivery - Tue 3/6/84 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M O Y: 3 / 5 / 84

TRANSPORTER SECTION

18. COMPANY NAME: Ryan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): Marvin Wagner
26. DATE ACCEPTED M / D / Y: 3 / 5 / 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. DATE ACCEPTED M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN ~~46319~~ 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): F DUNTEE
40. Date Accepted M / D / Y: 3/6/84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

T0210 E T-50 6RU 3-6-84

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 251506

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10009; Delivery - Mon 3/12/84 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: ( ) 715 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 3 / 11 / 84

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: ( ) 608 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): Gerald Marvin Wagner
26. Date Accepted M / D / Y: 3 / 11 / 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: ( ) 219 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): [signature]
40. Date Accepted: 3/12/84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

To212 ET-5D GRM 3.12.84

HAZARDOUS WASTE FACILITY

00671

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 251541

006657

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10017; Delivery - Thurs 3/8/84 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 3 / 7 / 84

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: ( ) 6 08 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): Marvin Wagner
26. Date Accepted M / D / Y: 3 7 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: ( ) 219 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FDUNFEE
40. Date Accepted M / D / Y: 3 8 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

To 210 E T-50 GRM 3.8.84

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144.
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 251544

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co., Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10015; Delivery - Fri 3/9/84 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Harold Loew
16. NAME (Print): Harold Loew
17. DATE SHIPPED M D Y: 3 / 8 / 84

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Gerald Wagner
25. NAME (Print): Gerald Wagner
26. Date Accepted M / D / Y: 3 8 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE:
39. NAME (Print): FDUNEE
40. Date Accepted M / D / Y: 3984

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 212K T-50 GRM 3.9.84

0066772

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 251547

006658

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co., Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10009
Delivery - Wed 3/7/84 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 3 / 6 / 84

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): Gerald Wagner
26. Date Accepted M / D / Y: 3 6 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FDUNFEE
40. Date Accepted M / D / Y: 3 7 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO212E T-50 GRW
3.7.84

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 251548

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10017 3.56 11,100
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 2 / 4 / 84

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE
25. NAME (Print): General Marvin Wagner
26. Date Accepted M / D / Y: 2 4 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

To 211 KT-50 GRM 3.5.84

HAZARDOUS WASTE FACILITY

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE
39. NAME (Print): FDONFEE
40. Date Accepted: 3.5.84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

006899

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 251556

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10017
Delivery - Mon 4/2/84 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 2. Liquid 3. Mixture [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 2. Liquid 3. Mixture [ ]		
					1. Solid 2. Liquid 3. Mixture [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene H Jameson (HJJ)
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 4/ 1 / 84

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): Wagner
26. Date Accepted M / D / Y: 4 1 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FDUN FEE
40. Date Accepted M / D / Y: 4 2 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

T0212RT-50
GRM 4.2.84

006074

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 251558

006670

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10015 — Delivery - Tue 3/13/84 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 3 / 12 / 84

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Marvin Wagner
25. NAME (Print): Marvin Wagner
26. Date Accepted M / D / Y: 3 - 12 - 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: H Jameson
39. NAME (Print): EDUNFEE
40. Date Accepted M / D / Y: 3/13/84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 210 ET-50 GRW 3.13.84

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 251572

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co., Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10015 Delivery - Mon 4/16/84 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS (RQ-Toluene/Xylene)	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
					1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 4 / 15 / 84

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE
25. NAME (Print): Gerald Wagner
26. Date Accepted M / D / Y: 4 / 15 / 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY

To 211 E. T-50 GRM 4.16.84

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE
39. NAME (Print): FDUPEE
40. Date Accepted M / D / Y: 4/16/84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

00683

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 251580

006676

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10017 Delivery - Wed 3/28/84 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): Al Langworthy
17. DATE SHIPPED M D Y: 3/ 27/ 84

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Marvin Wagner
25. NAME (Print): Marvin Wagner
26. Date Accepted M / D / Y: 3 / 27 / 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FDWNFEP
40. Date Accepted M / D / Y: 3 / 28 / 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To210 KT-50 GRM 3-28-84

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 251594

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co., Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10009 Delivery - Thurs 3/29/84 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [ ]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 3 28 84

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: ( ) 608 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): Gerald Wagner
26. Date Accepted M / D / Y: 3 / 29 / 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY

TO 211 KT-50
GRW 3.29.84

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: ( ) 219 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): T. DUNFEE
40. Date Accepted M / D / Y: 3/29/84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

00675

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 251708

006717

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10015 12,500 3.1
Delivery - Mon 6/18/84 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 2. Liquid 3. Mixture [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 2. Liquid 3. Mixture [ ]		
					1. Solid 2. Liquid 3. Mixture [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Gene Jameson /jb
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M O Y: 6 / 17 / 84

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Jerry Wagner
25. NAME (Print): Gerald Wagner
26. Date Accepted M / O / Y: 6 17 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): F DUNFEE
40. Date Accepted M / D / Y: 6/18/84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR ONR USE ONLY

HAZARDOUS WASTE FACILITY

212 RT-50

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 251709

006726

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10009 Delivery - Tue 6/19/84 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED: M D Y 6 / 18 / 84

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): Marvin Wagner
26. Date Accepted: M / D / Y 6 / 18 / 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted: M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): DUNFEE
40. Date Accepted: 6/1984

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted: M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

210 F T-50

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 251728

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME	2. EPA IDENTIFICATION NO.	3. COMMENTS/SPECIAL INSTRUCTIONS
Waste Research & Reclamation Co. Inc.	WID 990829475	Tanker - 10009 247 Delivery - Mon 6/25/84 AM 13915
4. P.O. BOX OR STREET ADDRESS: Route 7		
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701	6. TELEPHONE NUMBER: (715) 834-9624	

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,0004
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE

16. NAME (Print): Gene H. Jameson

17. DATE SHIPPED: M 6 D 25 Y 84

TRANSPORTER SECTION

18. COMPANY NAME	19. EPA IDENTIFICATION NO.
Ruan Transport Corp.	IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855	
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304	22. TELEPHONE NUMBER: (608) 836-3103

23. COMMENTS

In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE	25. NAME (Print)	26. Date Accepted
	Gerald Wagner	M 6 D 25 Y 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME	28. EPA IDENTIFICATION NO.

29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted
		M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME	33. EPA IDENTIFICATION NO.
American Chemical Services	IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax	
35. CITY, STATE, ZIP CODE: Griffith, IN 46319	36. TELEPHONE NUMBER: 219) 924-7375

37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE	39. NAME (Print)	40. Date Accepted
		M / D / Y

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME	42. EPA IDENTIFICATION NO.

43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted
		M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

211F-T-50

HAZARDOUS WASTE FACILITY

000724

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 251736

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 2727 Delivery - Tue 6/26/84 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: 715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5200	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	45,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 6 / 25 / 84

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE
25. NAME (Print): Marvin Wagner
26. Date Accepted M / D / Y: 6 / 25 / 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE
39. NAME (Print): F DUFFEE
40. Date Accepted M / D / Y: 6 26 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

211KT-50

006723

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 251761

006714

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co., Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 2727 Delivery - Tue 5/29/84 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

2.8
14179

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5200	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 2. Liquid 3. Mixture [2]	F003	45,000#
		(RQ-Toluene//xylene)			1. Solid 2. Liquid 3. Mixture [ ]		
					1. Solid 2. Liquid 3. Mixture [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 5 / 28 / 84

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Marvin Wagner
25. NAME (Print): Marvin Wagner
26. Date Accepted M D Y: 5 / 28 / 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FOUNTEE
40. Date Accepted M D Y: 5 28 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

211R r-50

BUREAU OF SOLID WASTE MGT.

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 251769

006719

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10017 63 10842
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

Delivery - Fri 6/8/84 AM

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 6 / 7 / 84

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (715) 723 -2391
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Quentin Hagen
25. NAME (Print): QUENTIN HAGEN
26. Date Accepted M / D / Y: 6 7 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

212K T-50

HAZARDOUS WASTE FACILITY

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemican Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): PDUNFEE
40. Date Accepted: 6/8/84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 251772

006712

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co., Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: 1.89 12136 Tanker - 10017 Delivery - Fri 6/1/84 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Harold Loew
16. NAME (Print): Harold Loev
17. DATE SHIPPED M D Y: 5 / 31 / 84

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave, Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Quentin Hagen
25. NAME (Print): QUENTIN HAGEN
26. Date Accepted M / D / Y: 5 31 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: T Hagen
39. NAME (Print): T HAGEN
40. Date Accepted M / D / Y: 6/1/84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 251779

006713

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME	2. EPA IDENTIFICATION NO.	3. COMMENTS/SPECIAL INSTRUCTIONS
Waste Research & Reclamation Co. Inc.	WID 990829475	Tanker - 2727
4. P.O. BOX OR STREET ADDRESS: Route 7		Delivery - Thurs 5/31/84 AM
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701	6. TELEPHONE NUMBER: (715) 834-9624	

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5200	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	45,000
		(RQ-Toluene.Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Harold Loew
16. NAME (Print): Harold Loew
17. DATE SHIPPED M O Y: 5 / 30 / 84

TRANSPORTER SECTION

18. COMPANY NAME	19. EPA IDENTIFICATION NO.
Ruan Transport Corp.	IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855	
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304	22. TELEPHONE NUMBER: (608) 838-3108

23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE	25. NAME (Print)	26. Date Accepted M / D / Y
Marvin Wagner	Marvin Wagner	5 / 30 / 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME	28. EPA IDENTIFICATION NO.

29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY 211R - T-50

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME	33. EPA IDENTIFICATION NO.
American Chemical Services	IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax	
35. CITY, STATE, ZIP CODE: Griffith, IN 46319	36. TELEPHONE NUMBER: (219) 924-4370

37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE	39. NAME (Print)	40. Date Accepted
[signature]	FDUNFEE	5/30/84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME	42. EPA IDENTIFICATION NO.

43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR ONR USE ONLY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 251783

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10017 Delivery - Tue 6/5/84 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 6 / 4 / 84

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (715) 723-2391
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Quentin Hagen
25. NAME (Print): QUENTIN HAGEN
26. Date Accepted M / D / Y: 6 / 6 / 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

To 212-T-50

HAZARDOUS WASTE FACILITY

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE
39. NAME (Print): F DUNFEE
40. Date Accepted M / D / Y: 6/5/84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

001710

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 251786

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 2727 / Delivery - Mon 6/4/84 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5200	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	45,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE:
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 6 / 3 / 84

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Marvin Wagner
25. NAME (Print): Marvin Wagner
26. Date Accepted M / D / Y: 6 / 3 / 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE:
39. NAME (Print): EDWEE
40. Date Accepted: 6/4/84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

211RT50

006711

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 251791

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 2727 Delivery - Thurs 6/7/84 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5200	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	45,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 6/ 6/ 84

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Marvin Wagner
25. NAME (Print): Marvin Wagner
26. Date Accepted M / D / Y: 6 6 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: T Bufford DUNFEE
39. NAME (Print)
40. Date Accepted: 6/7/84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

2 OF 7 T-50

006109

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 251792

006718

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10009 Delivery - Wed 6/13/84 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

3.83
10199

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 6 / 12 / 84

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Marvin Wagner
25. NAME (Print): Marvin Wagner
26. Date Accepted M / D / Y: 6 12 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): F-DUNFEE
40. Date Accepted M / D / Y: 6 13 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

212TC T-50

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 251794

006725

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10015
Delivery - Thurs 6/21/84 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 6 / 20 / 84

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call chemtrec 800-424-0300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): Gerald Wagner
26. Date Accepted M / D / Y: 6 / 20 / 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: ( )
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print):
40. Date Accepted M / D / Y: 6/21/84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

212 R T-50

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 252603

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co., Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10015 137 18158
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

Delivery - Tue 5/22/84 AM

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture [2] 2. Liquid	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture [ ] 2. Liquid		
					1. Solid 3. Mixture [ ] 2. Liquid		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 5 / 21 / 84

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Marvin Wagner
25. NAME (Print): Marvin Wagner
26. Date Accepted M / D / Y: 5 / 21 / 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: F Johnson
39. NAME (Print): F DUNFEE
40. Date Accepted M / D / Y: 5 / 22 / 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

0078

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 252714

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME	2. EPA IDENTIFICATION NO.	3. COMMENTS/SPECIAL INSTRUCTIONS
Waste Research & Reclamation Co. Inc.	WID 990829475	Tanker - 10015
4. P.O. BOX OR STREET ADDRESS: Route 7		Delivery - Tue 2/14/84 AM
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701	6. TELEPHONE NUMBER: ( ) 715 834-9624	

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE

16. NAME (Print): Gene H. Jameson

17. DATE SHIPPED M D Y: 2 / 13 / 84

TRANSPORTER SECTION

18. COMPANY NAME	19. EPA IDENTIFICATION NO.
Ruan Transport Corp.	IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855	
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304	22. TELEPHONE NUMBER: ( ) 608 838-3108

23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE	25. NAME (Print)	26. Date Accepted M / D / Y
Gerald Wagner	Gerald Wagner	2 / 13 / 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME	28. EPA IDENTIFICATION NO.

29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY

To 21FT-SO
ERM 2.14.84

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME	33. EPA IDENTIFICATION NO.
American Chemical Services	IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax	
35. CITY, STATE, ZIP CODE: Griffith, IN 46319	36. TELEPHONE NUMBER: ( ) 219 924-4370

37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE	39. NAME (Print)	40. Date Accepted M / D / Y
R Rushnok	R Rushnok	2 / 14 / 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME	42. EPA IDENTIFICATION NO.

43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY [ ]

006852

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 252716

006634

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co., Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10009 Delivery - Wed 2/1/84 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS (RQ-Toluene/Xylene)	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
					1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE:
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 1 / 31 / 84

TRANSPORTER SECTION

18. COMPANY NAME: Rupp Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE	25. NAME (Print)	26. Date Accepted M / D / Y
Gerald Wagner	Gerald Wagner	1 / 31 / 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME	28. EPA IDENTIFICATION NO.

29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360263
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE	39. NAME (Print)	40. Date Accepted M / D / Y
R Rushoark	R Rushoark	2 / 1 / 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME	42. EPA IDENTIFICATION NO.

43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO210 RT-50 GRM 2.1.84

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 252733

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co., Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10015 Delivery - Fri 2/17/84 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE
16. NAME (Print): Gene R. Jameson
17. DATE SHIPPED M D Y: 2 / 16 84

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Marvin Wagner
25. NAME (Print): Marvin Wagner
26. Date Accepted M / D / Y: 2 / 16 / 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE
39. NAME (Print): R Rushak
40. Date Accepted M / D / Y: 2 / 17 / 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO 210 RT-50 GRN 2-16-84

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 252740

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co., Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 2727
Delivery - Thurs 2/16/84 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: ( ) 715 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	45,000#
					1. Solid 3. Mixture 2. Liquid [ ]		
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: Harold Loew
16. NAME (Print): Harold Loew
17. DATE SHIPPED M D Y: 2 / 15 84

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: ( ) 608 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE:
25. NAME (Print): Gerald Vasey
26. Date Accepted M / D / Y: 2 15 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 0 16360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: ( ) 219 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: R Rushnak
39. NAME (Print): R Rushnak
40. Date Accepted M / D / Y: 2 16 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 210 RT-50
from 2-16-84

00003

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 252742

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co, Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10015 Delivery - Tue 2/21/84 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: ( ) 715 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS (RQ-Toluene/Xylene)	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
					1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 2 / 20 / 84

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: ( ) 608 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Marvin Wagner
25. NAME (Print): Marvin Wagner
26. Date Accepted M / D / Y: 2 / 20 / 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY

T021RT-50 6KU 2.21.84

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: Aberdeen Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: ( ) 219 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: T Dunker
39. NAME (Print): F DUNTEE
40. Date Accepted: 2/21/84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

000048

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 252747

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990329475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10017 Delivery - Mon 2/20/84 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: ( ) 715 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 2 / 19 / 84

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave, Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: ( ) 608 838-3108
23. COMMENTS: In Case of Emergency - Call chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE
25. NAME (Print): Gerald Wagner
26. Date Accepted M / D / Y: 2 / 19 / 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360263
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: ( ) 219 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE
39. NAME (Print): FDUPS
40. Date Accepted M / D / Y: 2 / 20 / 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

T0210 RT-50 GRN 2-20-84

000649

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 252749

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10009 Delivery - Thurs 2/9/84 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS (RQ-Toluene/Xylene)	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
					1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 2 / 8 / 84

TRANSPORTER SECTION

18. COMPANY NAME: Ryan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: ( ) 608 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Marvin Wagner
25. NAME (Print): Marvin Wagner
26. Date Accepted M / D / Y: 2 / 8 / 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360263
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: ( ) 219 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: R Rushnok
39. NAME (Print): R Rushnok
40. Date Accepted M / D / Y: 2 / 9 / 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 12 ET-50
ERM 2.4.84

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 252751

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co., Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10015 Delivery - Thurs 2/23/84 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: ( ) 715 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS (RQ-Toluene/Xylene)	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
					1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 2 / 22 / 84

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave P. O. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: ( ) 608 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE
25. NAME (Print): Marvin Wagner
26. Date Accepted M / D / Y: 2 22 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: ( ) 219 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: F. Dunfee
39. NAME (Print): F. DUNFEE
40. Date Accepted: 2/23/84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY To 210 F T-506 RM 2-23-84

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER: A 252752

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10017 Delivery - Wed 2/22/84 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 2 21 84

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Gerald Wagner
25. NAME (Print): Gerald Wagner
26. Date Accepted M D Y: 2 21 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY

To 212 RT-50 6PM 2.22.84

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE
39. NAME (Print): F DUNFEE
40. Date Accepted: 2/22/84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

006647

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 252753

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co., Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10015 Delivery - Mon 2/27/84 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: ( ) 715 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 2 / 26 / 84

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: ( ) 608 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE
25. NAME (Print): Gerald Wagner
26. Date Accepted M / D / Y: 2 / 26 / 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY

To 211 FT-50 GRN 2-27-84

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: ( ) 219 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE
39. NAME (Print): HUNTER
40. Date Accepted: 2-27-84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 252754

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co., Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 2727 Delivery - Tue 2/28/84 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS (RQ-Toluene/Xylene)	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	45,000#
					1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 2 / 27 / 84

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transpott Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: ( ) 608 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Marvin Wagner
25. NAME (Print): Marvin Wagner
26. Date Accepted M / D / Y: 2 / 27 / 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: ( ) 219 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: R Dunlee
39. NAME (Print): R DUNLEE
40. Date Accepted M / D / Y: 2 28 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 210 RT-50
GRM 2.28.84

000004

STATE OF W[illegible]
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 252756

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10017 Delivery - Wed 2/15/84 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 2 / 14 84

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave, Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Marvin Wagner
25. NAME (Print): Marvin Wagner
26. Date Accepted M / D / Y: 2 14 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219-924-8370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: R Rushcall
39. NAME (Print): R Rushcall
40. Date Accepted M / D / Y: 2/15/84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 212 F T-506RM 2.15.84

00665

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 252775

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co., Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10009
Delivery - Tue 4/10/84 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 4 / 9 / 84

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 G rand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: ( ) 608 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): Gerald Wagner
26. Date Accepted M / D / Y: 4 / 9 / 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: ( ) 219 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): FDUNFEE
40. Date Accepted M / D / Y: 4/10/84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 210 E T-50
GKW 4-10-84

000681

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER: A 252799

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co., Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10015; Delivery - Wed 2/29/84 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE:
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED: M D Y 2 / 28 / 84

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): Gerald Wagner
26. Date Accepted: M D Y 2 / 28 / 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted: M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): [signature]
40. Date Accepted: 2 / 29 / 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted: M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 212 K T-50
GRM 2-29-84

006663

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 252880

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co. Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker -10017 Delivery - Wed 4/18/84 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE:
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 4 17 84

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (603) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: George Wagner
25. NAME (Print): Gerald Wagner
26. Date Accepted M / D / Y: 4 17 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y:

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: ( ) 219 924-4370
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): F DUNEZ
40. Date Accepted M / D / Y: 4 17 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 211 RT-50 GRN 4.18.84

000000

WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen – press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 252887

789900

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co., Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10009 Delivery - Tue 4/17/84 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liqnid	UN1993	1. Solid 3. Mixture 2. Liquid [2]	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 4 / 16 84

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Marvin Wagner
25. NAME (Print): Marvin Wagner
26. Date Accepted M / D / Y: 4 16 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: H Hunter
39. NAME (Print): FDUNTEE
40. Date Accepted: 4/17/84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 210 & T-50 GRN 4-17-84

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 252888

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Waste Research & Reclamation Co., Inc.
2. EPA IDENTIFICATION NO.: WID 990829475
3. COMMENTS/SPECIAL INSTRUCTIONS: Tanker - 10009 Delivery - Fri 4/13/84 AM
4. P.O. BOX OR STREET ADDRESS: Route 7
5. CITY, STATE, ZIP CODE: Eau Claire, WI 54701
6. TELEPHONE NUMBER: (715) 834-9624

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture [2] 2. Liquid	F003	49,000#
		(RQ-Toluene/Xylene)			1. Solid 3. Mixture [ ] 2. Liquid		
					1. Solid 3. Mixture [ ] 2. Liquid		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE
16. NAME (Print): Gene H. Jameson
17. DATE SHIPPED M D Y: 4 / 12 84

TRANSPORTER SECTION

18. COMPANY NAME: Ruan Transport Corp.
19. EPA IDENTIFICATION NO.: IAT 200010049
20. P.O. BOX OR STREET ADDRESS: 666 Grand Ave. Box 855
21. CITY, STATE, ZIP CODE: Des Moines, IA 50304
22. TELEPHONE NUMBER: (608) 838-3108
23. COMMENTS: In Case of Emergency - Call Chemtrec 800-424-9300

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: Marvin Wagner
25. NAME (Print): Marvin Wagner
26. Date Accepted M / D / Y: 4 12 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE
30. NAME (Print)
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE
39. NAME (Print): EDUFEE
40. Date Accepted: 4/13 KG

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME
42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE
44. NAME (Print)
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 212 RT-50 6PM 4.13.84

006684

STATE OF WISCONSIN

Form 4400-66 Rev. 7-84
Chapter 144, Wis. Stats.

Mail Copies To: State of Wisconsin
Department of Natural Resources
Bureau of Solid Waste Mgt.
Box 8094
Madison, Wisconsin 53708

FOR DNR USE ONLY

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: W.I.D.9.9.0.8.2.9.4.7.5 | Manifest Document No.: 8.5.0.1.4

2. Page 1 of 1

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Waste Research & Reclamation Co., Inc.
Route 7
Eau Claire, WI 54701

A. State Manifest Document Number: WI 25895

B. State Generator's ID

4. Generator's Phone ( ) 715-834-9624

5. Transporter 1 Company Name: Ruan Transport Corp.

6. US EPA ID Number: I.A.T.2.0.0.0.1.0.0.4.9

C. State Transporter's ID

D. Transporter's Phone: 608-838-3108

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Services
420 S. Colfax
Griffith, IN 46319

10. US EPA ID Number: I.N.D.0.1.6.3.6.0.2.6.5

G. State Facility's ID

H. Facility's Phone: 219-924-4370

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. Waste Flammable Liquid NOS (RQ-Toluene/Xylene) Flammable Liquid UN1993	01	T.T	5800 4.9.0.0.0	G P	F003
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Tanker - 10009 Delivery Mon 1/14/85 AM

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and according to the requirements of the Wisconsin Department of Natural Resources.

Printed/Typed Name: Gene H. Jameson | Signature | Date: Month 01 Day 13 Year 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Marvin Wagner | Signature: Marvin Wagner | Date: Month 01 Day 13 Year 85

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Date: Month . Day . Year .

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: T-DONFEE | Signature | Date: Month 1. Day 14 Year 85

Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

211 R T-50 7.5% @ 12100 BTU/LB

Distribution: 1 — BSWM 4 — Facility
2 — Generator 5 — Generator
3 — BSWM 6 — Transporter
BSWM Copies 1 & 3 mail to above.

COPY 4

009200

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. / Manifest Document No.: Email Quan: 74 Jinexus 00000

2. Page 1 of 8 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Waterbed Showcase, Inc. DBA Custom Wood Craft
135 S. Elkhart Ave.
Elkhart, Indiana 46516
4. Generator's Phone (219) 295-6060

A. State Manifest Document Number: INA 0315971
B. State Generator's ID:

5. Transporter 1 Company Name: Mr. Frank Inc.
6. Use EPA ID Number: I L D 0 6 9 9 8 6 1 6 0
C. State Transporter's ID: 0079
D. Transporter's Phone: 312-596-3377

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Service
420 South Colfax Avenue
Griffith, In 46319
10. Use EPA ID Number: I N A 0 1 6 3 6 0 2 6 5
G. State Facility's ID: 9180890002
H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. Waste Flammable Liquid N.O.S. UN1993	0 0 2	D M	0 0 1 1 0	1	F003
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR — Printed/Typed Name: Joyce Smith | Signature | Date: Month / Day / Year

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials — Printed/Typed Name: Dave Voss | Signature | Date: Month 01 Day Year 1989
18. Transporter 2 Acknowledgement of Receipt of Materials — Printed/Typed Name | Signature | Date: Month . Day . Year .

FACILITY
19. Discrepancy Indication Space
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted item 19.
Printed/Typed Name: Whitaker Alan | Signature: Whitaker A | Month Day Year: 01 30 89

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0315971

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

204TCTSD 1/4

COPY 5. TSD COPY

0016529

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. SMALL QUANTITY GENERATOR | Manifest Document No. | 2. Page 1 of | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Waterville Body Works Inc.
815 Michigan - Waterville, OH. 43566

A. State Manifest Document Number: INA 0159649

4. Generator's Phone (419) 878-2521

B. State Generator's ID

5. Transporter 1 Company Name: Strand Trucking

6. Use EPA ID Number: ILD 000 646 810

C. State Transporter's ID: 0311

D. Transporter's Phone: 312-385-8440

7. Transporter 2 Company Name

8. Use EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Service
420 S. Colfax Avenue
Griffith, IN. 46319

10. Use EPA ID Number: IND 016 360 265

G. State Facility's ID

H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. RQ WASTE PAINT RELATED MATERIAL (F003) FLAMMABLE LIQUID NA 1263	002	d-M	00440	G	F003
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name | Signature | Month | Day | Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Stan Strand | Signature | Month | Day | Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Month | Day | Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.

Printed/Typed Name: Philip Whitaker | Signature | Month: 8 | Day: 29 | Year: 88

GENERATOR / TRANSPORTER / FACILITY

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0159649

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

126TC:63 8/30

0015086

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: SM QTY GEN
Manifest Document No.: 071189R
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Waterville Body Works
815 Michigan Avenue, Waterville, OH 43566
4. Generator's Phone (419) 878-2521

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: ADCO Express
6. US EPA ID Number: ILD 047 267 364
C. State Transporter's ID: 0367
D. Transporter's Phone: 312-429-1660

7. Transporter 2 Company Name
8. US EPA ID Number
E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Service
420 S. Colfax Avenue
Griffith, IN 46319
10. US EPA ID Number: IND 016 360 265
G. State Facility's ID
H. Facility's Phone: 219-924-4370

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	HM	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. RQ WASTE PAINT RELATED MATERIAL (F003) FLAMMABLE LIQUID NA1263	X	2	DM	106	G	F003
b.						
c.						
d.						

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above: G = GALLON

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name | Signature | Month Day Year

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name | Signature | Month Day Year

Style F15REV-6 Labelmaster, Div. of American Labelmark Co. Inc. 60646

EPA Form 8700-22 (Rev. 9/86) Previous editions are obsolete.

12-3-87 7/17

TSDF COPY

0016528

HAZARDOUS WASTE MANIFEST

01
MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

Thomas Solvent Co.
NAME OF CARRIER (SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	Exempt	Wayne Home Equipment (219) 426-4000 801 Glasgow Ave., Ft. Wayne, In 46803	6/22/84
TRANSPORTER # 1	IND016319691	Thomas Solvent Co. (219) 482-9638 5605 Planewiew Dr., Ft. Wayne, In 46825	
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DIS-POSAL FACILITY	IND016360265	American Chemical Serv. (219)924-4370 420 S. Colfax, Griffith, In 46319	6/26/84
TSDF TREATMENT STORAGE OR DIS-POSAL FACILITY			

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
2 Dr	X	F003	Waste Petroleum Naptha (VM & P Natptha) Flammable Liquid	UN1255	Flam.		Gal	110		
3 Dr	X	U031	Waste N. Butyl Alcohol Flammable Liquid	NA1120	Flam.		Gal	165		
3 Dr	X	U220	Waste Toluene Flammable Liquid	UN1294	Flam.		Gal	165		
1 Dr	X	U031-U220	Waste Butyl Alcohol & Toluene Flammalbde Liquid	NA1120-UN1294	Flam.		Gal	40		

SPECIAL HANDLING INSTRUCTIONS

If an RQ commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED
Yes ☒ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

TOTAL CHARGES: $

FREIGHT CHARGES
FREIGHT PREPAID except when box at right is checked ☐ Check box if charges are to be collect

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding.
$ _____ per _____

"If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."
_____ Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.
_____ (Signature of Consignor)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

TSDF SIGNATURE 6 26 84 DATE

5

STYLE F-50 © LABELMASTER CHICAGO, IL 60646

TSDF COPY

204R T-50

006622

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2000-0404. Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. IND005422183

Manifest Document No. 1203

2. Page 1 of 1

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Wayne Novelty Corporation
901 W. Washington Street
Decatur, Indiana 46733

4. Generator's Phone (219) 724-2151

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name
Thomas Solvent Co.

6. US EPA ID Number
IND016319691

C. State Transporter's ID

D. Transporter's Phone 219-482-9638

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Service
420 So. Colfax
Griffith, IN 46319

10. US EPA ID Number
IND0163602265

G. State Facility's ID

H. Facility's Phone
219-924-4370

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. Waste Perchlorethylene ORM-A UN-1897		4	Dr	220	Gal	F001
b.						
c.						
d.						

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.

Printed/Typed Name: Donald B. Pike
Wayne Novelty Corporation

Signature: [signature]

Date: Month 2 Day 20 Year 86

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: JACK G. BENNETT

Signature: [signature]

Date: Month 2 Day 20 Year 86

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: WA HAKER

Signature: [signature]

Date: Month 2 Day 21 Year 86

Style F15-6 Labelmaster, Chicago, IL 60646 (312) 478-0900

EPA Form 8700-22 (3-84)

1BKT-63

TSDF COPY

011625

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE *(Form designed for use on elite (12-pitch) typewriter.)* *Form Approved. OMB No. 2050-0039. Expires 9-30-88*

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of	Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.
MID005323407			

3. Generator's Name and Mailing Address
Wayne Wire Cloth Products, Inc.
PO BOX 156, 221 Garfield St.
Hillman, MI 49746

4. Generator's Phone ((517) 742-4591

A. State Manifest Document Number: INA 0157778
B. State Generator's ID:

5. Transporter 1 Company Name	6. Use EPA ID Number	C. State Transporter's ID
Haviland Products Co.	MID006028492	D. Transporter's Phone
7. Transporter 2 Company Name	8. Use EPA ID Number	E. State Transporter's ID
		F. Transporter's Phone

9. Designated Facility Name and Site Address	10. Use EPA ID Number	G. State Facility's ID
American Chemical Services 420 S. Colfax Griffith, IN 46319	IND016360265	H. Facility's Phone

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. 1,1,1 Trichloroethane Still Bottoms	3	DM	1.65	gal	F001
b. ORM A UN-2831					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR

Printed/Typed Name	Signature	Date Month	Day	Year
Thomas Gonzalez/General Manager	Thomas Gonzalez	05	24	88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year
Christopher L. Hoorhead		05	24	88

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.

Printed/Typed Name	Signature	Date Month	Day	Year
Harold F Schmidt		06	01	88

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0157778

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

0015081

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: MID005323407 | Manifest Document No. | 2. Page 1 of | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Wayne Wire Cloth Products, Inc.
PO Box 156, 221 Garfield St.
Hillsdale, MI 49746

4. Generator's Phone ( ) 517 742-4591

A. State Manifest Document Number: INA 0157800
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone

5. Transporter 1 Company Name: Haviland Products Co.
6. Use EPA ID Number: MID006028492
7. Transporter 2 Company Name:
8. Use EPA ID Number:

9. Designated Facility Name and Site Address
American Chemical Services
420 S. Colfax
Griffith, IN 46319
10. Use EPA ID Number: IND016360265

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. COMBUSTIBLE LIQUID Waste Oil Products UN-1255	4	DM	220	gal	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable International and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR

Printed/Typed Name	Signature	Month	Day	Year
Thomas Coarsey/Gary Bl	Thomas Coarsey	05	24	88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Christopher Woodland	Christopher Woodland	05	24	88

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.

Printed/Typed Name	Signature	Month	Day	Year
Howard F. Schmidt	Howard F. Schmidt	06	01	88

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

2.04 RT 50 6/1 M

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0157800

0015085

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. M·I·D·0·9·7·8·1·3·5·1·3 | Manifest Document No. 0·0·0·3·4 | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
WCI REFRIGERATOR DIV.
635 W. CHARLES ST.
GREENVILLE, MI 48838

4. Generator's Phone (616) 754-7131

A. State Manifest Document Number: INA 0266924
B. State Generator's ID:

5. Transporter 1 Company Name: VALLEY CITY REFUSE DISPOSAL
6. Use EPA ID Number: M·I·D·9·8·1·9·5·6·0·6·3
C. State Transporter's ID:
D. Transporter's Phone:

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE, INC.
420 S. COLFAX
GRIFFITH, INDIANA 46319

10. Use EPA ID Number: I·N·D·0·1·6·3·6·0·2·6·5
G. State Facility's ID:
H. Facility's Phone:

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE PAINT RELATED MATERIAL, FLAMMABLE LIQUID, NA 1263	16	DM	800	G	F003
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: ALSO CONTAINS TOLUENE, AN F005 WASTE

K. Handling Codes for Wastes Listed Above: T-18 - FUEL BLEND
T-16 (EVENTUAL DISPOSAL)

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR — Printed/Typed Name: Philip S. Bell | Signature: Philip S. Bell | Date Month Day Year: 11 30 88

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials — Printed/Typed Name: Roger Norton | Signature: Roger Norton | Date Month Day Year: 11 30 88
18. Transporter 2 Acknowledgement of Receipt of Materials — Printed/Typed Name: | Signature: | Date Month Day Year:

FACILITY
19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: Whitaker A | Signature: Whitaker | Date Month Day Year: 12 2 88

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0266924

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

15-204 TCTSD 12/5
1-204 TCTSD 12/5

COPY 5. TSD COPY

0015092

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-9

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.
M I D 0 9 7 8 1 3 5 1 3	0 0 0 4 4		

3. Generator's Name and Mailing Address	A. State Manifest Document Number
WCI REFRIGERATOR DIV. 635 W. CHARLES ST. GREENVILLE, MI 48838	INA 0266928
4. Generator's Phone (616) 754-7131	B. State Generator's ID
5. Transporter 1 Company Name: VALLEY CITY REFUSE DISPOSAL	6. Use EPA ID Number: M I D 9 8 1 9 5 6 0 6 3
	C. State Transporter's ID
	D. Transporter's Phone (616) 235-1500
7. Transporter 2 Company Name	8. Use EPA ID Number
	E. State Transporter's ID
	F. Transporter's Phone
9. Designated Facility Name and Site Address: AMERICAN CHEMICAL SERVICE, INC. 420 S. COLFAX GRIFFITH, INDIANA 46319	10. Use EPA ID Number: I N D 0 1 6 3 6 0 2 6 5
	G. State Facility's ID
	H. Facility's Phone (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE PAINT RELATED MATERIAL, FLAMMABLE LIQUID, NA 1263 (XYLENE, TOLUENE)	1 4	D M	7 7 0	G	F003
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above	K. Handling Codes for Wastes Listed Above
ALSO CONTAINS TOLUENE, AN F005 WASTE	T-18 - FUEL BLEND T-16 (EVENTUAL DISPOSAL)

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I hav determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to m which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faitl effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name	Signature	Date (Month Day Year)
Philip S. Bell	Philip S Bell	0 2 2 2 8 9

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials		
Printed/Typed Name	Signature	Date (Month Day Year)
Roger Norton	Roger Norton	0 2 2 2 8 9
18. Transporter 2 Acknowledgement of Receipt of Materials		
Printed/Typed Name	Signature	Date (Month Day Year)
		. . .

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.

Printed/Typed Name	Signature	Date (Month Day Year)
Whitaker A	Whitaker A	12 24 89

GENERATOR

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/9-88)

COPY 5. TSD COPY 2047C750 7/27

0016541

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: M.I.D.0.9.7.8.1.3.5.1.3 | Manifest Document No.: 0 0 0 4 6 | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address:
WCI REFRIGERATOR DIV.
635 W. CHARLES ST.
GREENVILLE, MI 48838

4. Generator's Phone (616) 754-7131

A. State Manifest Document Number: INA 0266915
B. State Generator's ID:

5. Transporter 1 Company Name: VALLEY CITY REFUSE DISPOSAL
6. Use EPA ID Number: M.I.D.98 1.95.6.0.6.3
C. State Transporter's ID:
D. Transporter's Phone: (616) 235-1500

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address:
AMERICAN CHEMICAL SERVICE, INC.
420 S. COLFAX
GRIFFITH, INDIANA 46319
10. Use EPA ID Number: I.N.D.0.1.6.3.6.0.2.6.5
G. State Facility's ID:
H. Facility's Phone: (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE METHYLENE CHLORIDE ORMA UN-1593	09	DM	495	G	F002 HAZARDOUS
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: 11a-RQ (CERCLA)

K. Handling Codes for Wastes Listed Above: T-54 DISTILLATION
T-16 (EVENTUAL DISPOSAL OF ANY RESIDUE)

15. Special Handling Instructions and Additional Information:

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR — Printed/Typed Name: Philip S. Bell | Signature: Philip S. Bell | Date: Month 04 Day 04 Year 89

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials — Printed/Typed Name: [illegible] | Signature: [illegible] | Date: Month 04 Day 04 Year 89
18. Transporter 2 Acknowledgement of Receipt of Materials — Printed/Typed Name: | Signature: | Date: Month . Day . Year .

FACILITY
19. Discrepancy Indication Space:
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19
Printed/Typed Name: STEVE KULAVICK | Signature: Steve Kulavick | Month 04 Day 07 Year 89

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0266915

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY

#3 Still [40,21B] 3/21

0016510

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: M I D 0 9 7 8 1 3 5 1 3 | Manifest Document No.: 0 0 0 4 7
2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
WCI REFRIGERATOR DIV.
635 W. CHARLES ST.
GREENVILLE, MI 48838

4. Generator's Phone (616) 754-7131

A. State Manifest Document Number: INA 0266998
B. State Generator's ID:

5. Transporter 1 Company Name: VALLEY CITY REFUSE DISPOSAL
6. Use EPA ID Number: M I D 9 8 1 9 5 6 0 6 3
C. State Transporter's ID:
D. Transporter's Phone: (616) 235-1500

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE, INC.
420 COLFAX S.
GRIFFITH, IN 46319

10. Use EPA ID Number: I N D 0 1 6 3 6 0 2 6 5
G. State Facility's ID:
H. Facility's Phone: (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE PAINT RELATED MATERIAL, FLAMMABLE LIQUID, NA 1263 (XYLENE, TOLUENE)	1	T	2365	G	F003
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: ALSO CONTAINS TOLUENE, AN F005 WASTE
K. Handling Codes for Wastes Listed Above: T-18 FUEL BLEND

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR — Printed/Typed Name: Mark Allen | Signature | Date Month Day Year: 05 05 89

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jim Grunwell | Signature | Date Month Day Year: 05 05 89
18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: | Signature | Date Month Day Year: XXX XXX XXX

FACILITY
19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in 19.
Printed/Typed Name: WHITAKER R | Signature | Date Month Day: 5 15

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0266998

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY 126763 5/5

0016539

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: M I D 0 9 7 8 1 3 5 1 3 — Manifest Document No.: 0 0 0 5 8
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address:
WCI REFRIGERATOR DIV.
635 W. CHARLES ST.
GREENVILLE, MI 48838

4. Generator's Phone (616) 754-7131

A. State Manifest Document Number: INA 0266999
B. State Generator's ID:

5. Transporter 1 Company Name: VALLEY CITY REFUSE DISPOSAL
6. Use EPA ID Number: M I D 9 8 1 9 5 6 0 6 3
C. State Transporter's ID:
D. Transporter's Phone: (616) 235-1500

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address:
AMERICAN CHEMICAL SERVICE, INC.
420 S. COLFAX
GRIFFITH, INDIANA 46319

10. Use EPA ID Number: I N D 0 1 6 3 6 0 2 6 5
G. State Facility's ID:
H. Facility's Phone: (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE PAINT RELATED MATERIAL, FLAMMABLE LIQUID, NA 1263 (ACETONE, XYLENE, TOLUENE)	034	D M	01870	G	F003
b. WASTE METHYLENE CHLORIDE, ORM-A, UN 1593	004	D M	00200	G	F002
c.					
d.					

J. Additional Descriptions for Materials Listed Above:
11. a. ALSO CONTAINS TOLUENE, AN F005 WASTE

K. Handling Codes for Wastes Listed Above:
a) T54, T18 (FUEL BLEND), T16
b) T54, T18 (FUEL BLEND), T16

15. Special Handling Instructions and Additional Informatio

1989

16. GENERATOR'S CERTIFICATION: I hereby declare t ... ly and accurately described above by proper shipping name and are classified, packed, ... in proper condition for transport by highway according to applicable international and national

If I am a large quantity generator, I certify that ... olume and toxicity of waste generated to the degree I have determined to be economically practicable and ... of treatment, storage, or disposal currently available to me which minimizes the present and future threat t ... f I am a small quantity generator, I have made a good faith effort to minimize my waste generation and selec ... is available to me and that I can afford.

Printed/Typed Name: Mark Allen — Signature: Mark Allen — Date: Month 11 Day 01 Year 89

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Roger Norton — Signature: Roger Norton — Date: Month 11 Day 01 Year 89

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: — Signature: — Date: Month Day Year

19. Discrepancy Indication Space
4B. 117TKT63 3/21/90

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: Whitaker A — Signature: A Whitaker — Date: Month 11 Day 7 Year 89

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY

28A 126TKT63 11/3
6A 204TKT50 11/8

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0266999

0016538

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. M I D 0 9 7 8 1 3 5 2 3 | Manifest Document No. 0 0 0 6 . 0 | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
WCI REFRIGERATOR DIVISION
635 W. CHARLES ST. GREENVILLE MI 48838
4. Generator's Phone (616) 754-7131

A. State Manifest Document Number: INA 0267000
B. State Generator's ID:

5. Transporter 1 Company Name: VALLEY CITY REFUSE DISPOSAL
6. Use EPA ID Number: M I D 9 8 1 9 5 6 0 6 3
C. State Transporter's ID:
D. Transporter's Phone: 616-235-1500

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE, INC.
420 S. COLFAX
GRIFFITH, INDIANA 46319
10. Use EPA ID Number: I N D 0 1 6 3 6 0 2 6 5
G. State Facility's ID:
H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE PAINT RELATED MATERIAL, FLAMMABLE LIQUID, NA 1263 (ACETONE, XYLENE, TOLUENE	16	D M	880.	G	F003
b. WASTE METHYLENE CHLORIDE, ORM-A, UN1593	3	D M	165.	G	F002
c.					
d.					

J. Additional Descriptions for Materials Listed Above
11.a. ALSO CONTAINS TOLUENE, AN F005 WASTE

K. Handling Codes for Wastes Listed Above
a) T54,T18,T16(FUEL R LEND)
b) T54,T18,T16(FUEL BLEND)

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR
Printed/Typed Name: Lonnie Wymer
Signature:
Date: Month 1 2 Day 2 0 Year 8 9

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Date: Month 1 2 Day 2 0 Year 8 9

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Date: Month . Day . Year .

FACILITY
19. Discrepancy Indication Space
15-126 TCT63 12/29
1-204 TCT50 12/29
BB 1170 CT63 2/21/90

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted item 19.
Printed/Typed Name:
Signature:
Month 12 Day 29 Year 89

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0267000

0016537

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE *(Form designed for use on elite (12-pitch) typewriter.)* *Form Approved. OMB No. 2050-0039. Expires 9-30-91*

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: M·I D 0 9 7 8 1 3 5 1 3
Manifest Document No.: 0·0·0·6·6
2. Page 1 of 1
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
WCI Refrigerator Division
635 W. Charles St., Greenville, MI 48838
4. Generator's Phone (616)754-7131

A. State Manifest Document Number: INA 0316001
B. State Generator's ID:

5. Transporter 1 Company Name: Valley City Refuse Disposal
6. Use EPA ID Number: M·I D 9 8 1 9 5 6 0 6 3
C. State Transporter's ID:
D. Transporter's Phone: 616-235-1500

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Service, Inc.
420 S. Colfax
Griffith, Indiana 46319
10. Use EPA ID Number: I N D 0 1 6 3 6 0 2 6 5
G. State Facility's ID:
H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE PAINT RELATED MATERIAL, FLAMMABLE LIQUID, NA 1263 (ACETONE, XYLENE, TOLUENE)	31	DM	01·7·05	G	F003
b. WASTE METHYLENE CHLORIDE, CRM A, UN 1593	005	DM	00275	G	F002
c.					
d.					

J. Additional Descriptions for Materials Listed Above
11.a. Also contains TOLUENE, an F005 waste.

K. Handling Codes for Wastes Listed Above
a) T54,T18,T16 (Fuel Blend)
b) T54,T18,~~T15~~ T16(Fuel Blend)

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Mark Allen
Signature:
Date: Month 04 Day 19 Year 90

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: [signature]
Signature: [signature]
Date: Month 04 Day 19 Year 90

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Date: Month Day Year

19. Discrepancy Indication Space
A 31·204TCT50 4/23
B 15-#2 Still 5/10
BN 5089B

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: STEVE KULAVICK
Signature: [signature]
Month 04 Day 20 Year 90

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0316001

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY

0018141

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: M I D 0 9 7 8 1 3 5 1 3
Manifest Document No.: 0 0 0 7 3
2. Page 1 of 1
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
WCI REFRIGERATOR DIVISION
635 W. CHARLES ST.
GREENVILLE, MI 48838

4. Generator's Phone (616) 754-7131 ext. 519

A. State Manifest Document Number: INA 0420584
B. State Generator's ID:

5. Transporter 1 Company Name: VALLEY CITY REFUSE DISPOSAL
6. Use EPA ID Number: M I D 9 8 1 9 5 6 0 6 3
C. State Transporter's ID:
D. Transporter's Phone: 616-235-1500

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE, INC.
420 S. COLFAX
GRIFFITH, INDIANA 46319

10. Use EPA ID Number: I N D 0 1 6 3 6 0 2 6 5
G. State Facility's ID:
H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE PAINT RELATED MATERIAL, FLAMMABLE LIQUID, NA 1263 (ACETONE, XYLENE, TOLUENE)	0.1.4	D.M	0.0.7.7.0	G	F003
b. WASTE METHYLENE CHLORIDE, ~~ORMA~~, UN 1593	0.0.1	D.M	0.0.0.5.5	G	F002
c.					
d.					

J. Additional Descriptions for Materials Listed Above
11.a. ALSO CONTAINS TOLUENE, AN F005 WASTE.

K. Handling Codes for Wastes Listed Above
a) T54,T18,T16 (FUEL BLEND)
b) T54,T18,T16 (FUEL BLEND)

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Mark Allen
Signature: [signature]
Date: Month 07 Day 19 Year 90

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: [signature]
Signature: [signature]
Date: Month 07 Day 19 Year 90

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Date: Month Day Year

19. Discrepancy Indication Space
N
10-212 TCT 50 7/23
4-212 TCT 50 7/23 (20)
B
212 TCT 63 7/23

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19
Printed/Typed Name: STEVE KULAVICK
Signature: Steve Kulavick
Month 07 Day 20 Year 90

GENERATOR
TRANSPORTER
FACILITY

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0420584

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-89)

COPY 5. TSD COPY

0012142

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.
M I D 0 9 7 8 1 3 5 1 3	0 0 0 7 4		

3. Generator's Name and Mailing Address
WCI REFRIGERATOR DIVISION
635 W. CHARLES ST.
GREENVILLE, MI 48838

4. Generator's Phone (616) 754-7131

A. State Manifest Document Number: INA 0420585
B. State Generator's ID:

5. Transporter 1 Company Name: VALLEY CITY REFUSE DISPOSAL
6. Use EPA ID Number: M I D 9 8 1 9 5 6 0 6 3
C. State Transporter's ID:
D. Transporter's Phone: 616-235-1500

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE, INC.
420 S. COLFAX
GRIFFITH, INDIANA 46319

10. Use EPA ID Number: I N D 0 1 6 3 6 0 2 6 5
G. State Facility's ID:
H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No
a. WASTE PAINT RELATED MATERIAL, FLAMMABLE LIQUID, NA 1263 (ACETONE, XYLENE, TOLUENE)	24	DM	1320	G	F003
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
11.a. ALSO CONTAINS TOLUENE, AN F005 WASTE

K. Handling Codes for Wastes Listed Above
a) T54,T18,T16 (FUEL BLEND)

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR

Printed/Typed Name	Signature	Date Month	Day	Year
Mark Allen		0 8	1 4	9 0

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year
Roger Martin		0 8	1 4	9 0

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19

Printed/Typed Name	Signature	Month	Day	Year
Whitaker A		8	17	90

6-213-T50 8/23

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-89)

COPY 5. TSD COPY

0018143

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0420585

IL 512 610
IPC 62 8 81

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

TO BE COMPLETED BY WASTE GENERATOR

0634319
Authorization Number (1–13)

WEIGEL-MILLER CO. (Company Name) | 133 INTERSTATE (Address) | 3125435313 (Phone Number 14) | 0430050054 G (Generator Number 24)

ADDISON (City) | IL (State) | 60101 (Zip) | ILD005116181 (EPA Number)

LANDGREBE
WASTE HAULER(S)

MOTOR TRANSIT (Hauler Name) | VALPARAISO IN. 46383 (Hauler Address) | S.W.H. Registration Number (25–31)

3128423121 (Phone Number) | IND009842824 (EPA Number)

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number (32–38)

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | 420 S. COLFAX AVE (Address) | 91808902 (39 Site Number 46)

GRIFFITH (City) | IN (State) | 46319 (Zip) | 2199244370 (Phone Number) | IND016360265 (EPA Number)

(Alternate (Facility Name)) | (Address) | (39 Site Number 46)

(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: FLAMMABLE LIQUID N.O.S. WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW

SHIPPING DESCRIPTION	HAZARD CLASS	UN or NA Number	EPA HW Number
WASTE SOLVENTS	IGNITABLE	UN1993	F005

WEIGHT FOR D.O.T. USE 5600 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 700 (47–52) (1 GALLONS (Circle One) 2 CU. YDS.) (53)

METHOD OF SHIPMENT (Circle One) (DRUMS 14 Number) TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Frank J. Landro (Authorized Signature) DATE: 7-14-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) Fred Koelle (Authorized Signature) DATE: 7/14/82 (54–59)

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO_____

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: ___/___/___ (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS _____

IN ILLINOIS 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV. # 4

SITE COPY - PART 3 TO210TT-50 6RM 7-15-82

003512

IL 532-610
LPC 62 8 81

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
217/782-6762
SPECIAL WASTE HAULING MANIFEST

1025152

Authorization Number

WEIGEL-MILLER CO. (Company Name) | 133 INTERSTATE (Address) | (312) 543-5313 (Phone Number) | 0430055054 (Generator Number)

ADDISON (City) | IL (State) | 60101 (Zip) | ILD005116181 (EPA Number)

WASTE HAULER(S)

LANDGREBE MOTOR TRANSIT (Hauler Name) | VALPARAISO, IN. 46383 (Hauler Address) | ICC S.W.H. Registration Number 2980

3128423121 (Phone Number) | IND009842824 (EPA Number)

Hauler Name | Hauler Address | S.W.H. Registration Number

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | 420 S. COLFAX AVE (Address) | 9180890002 (Site Number)

GRIFFITH (City) | IN (State) | 46319 (Zip) | 2199244370 (Phone Number) | IND016360265 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: FLAMMABLE LIQUID N.O.S. WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: WASTE SOLVENTS | HAZARD CLASS: IGNITABLE | UN1993 (UN or NA Number) | F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE 2000 LBS TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED 250 (1) GALLONS (Circle One) (2) CU. YDS.

METHOD OF SHIPMENT (Circle One) (DRUMS 5 Number) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Frank J. Gandro (Authorized Signature) DATE: 9/11/84

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) DATE: 9/11/84

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

[signature] (Authorized Signature) DATE: 9/12/84

COMMENTS OR SPECIAL INSTRUCTIONS: 204 T-T-50 9500 BTU 2% Cl.

1025152

IN ILLINOIS 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV. # 4

SITE COPY - PART 3

This Agency is authorized to require this information under Illinois Revised Statutes, 1979, Chapter 111½, Section 22. Disclosure of this information is required. Failure to do so may result in a civil penalty up to $10,000.00 and an additional civil penalty up to $1,000.00 and imprisonment up to one year. This form has been approved by the Forms Management Center.

006623

ILLINOIS ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0610

LPC 62 8/81

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) **EPA Form 8700-22 (3-84)** Form Approved. OMB No. 2000-0404. Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I L D 0 0 5 1 1 6 1 8 1 — Manifest Document No. 0 0 0 1

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law, but is required by Illinois law.

3. Generator's Name and Mailing Address
WEIGEL - MILLER CO.
133 INTERSTATE ROAD ADDISON, IL 60101

4. Generator's Phone (312) 543-5313

A. Illinois Manifest Document Number IL 1170196

B. Illinois Generator's ID 0 4 3 0 0 5 5 0 4

5. Transporter 1 Company Name: LANDGREBE MOTOR TRANSIT — 6. US EPA ID Number: I N D 0 0 9 8 4 2 8 2 4

C. Illinois Tranporter's ID 2 9 8 0

D. (312) 842-3121 Transporter's Phone

7. Transporter 2 Company Name — 8. US EPA ID Number

E. Illinois Transporter's ID 1 8 7 5

F. ( ) Transporter's Phone

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
420 S. COLFAX AVE,
GRIFFITH, IN 46319 — 10. US EPA ID Number: I N D 0 1 6 3 6 0 2 6 5

G. Illinois Facility's ID 9 1 8 0 8 9 0 1 0 0 2

H. Facility's Phone (219) 924-4370

GENERATOR

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	FLAMMABLE LIQUID N.O.S. WASTE SOLVENTS IGNITABLE UN 1993	X	005	DM	00275		EPA HW Number F005 / Authorization Number
b.							EPA HW Number / Authorization Number
c.							EPA HW Number / Authorization Number
d.							EPA HW Number / Authorization Number

J. Additional Descriptions for Materials Listed Above
WT. 3000#

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, and Illinois regulations.

Printed/Typed Name: FRANK GAUDIO — Signature: Frank Gaudio — Date: Month 8 Day 22 Year 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Landgrebe Motor — Signature: Philip L Lyons — Date: Month 08 Day 22 Year 85

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Date: Month Day Year

FACILITY

19. Discrepancy Indication Space
DEL

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: STEVE . KULNKE — Signature: Steve Kulnke — Date: Month 8 Day 23 Year 85

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV. #5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½ Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

125 F 7-63

009199

STATE OF ILLINOIS ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0610

LPC 62 8/81

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) **EPA Form 8700-22 (3-84)** Form Approved. OMB No. 2000-0404. Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. | Manifest Document No. | 2. Page 1 of | Information in the shaded areas is not required by Federal law, but is required by Illinois law.

3. Generator's Name and Mailing Address
WEIGEL-MILLER, INC.
133 INTERSTATE RD. P.O. BOX 127
ADDISON, IL 60101

4. Generator's Phone (312) 543-5313

A. Illinois Manifest Document Number: IL 1170197

B. Illinois Generator's ID: 0430055054

5. Transporter 1 Company Name: LANDGREBE MOTOR TRANSIT

6. US EPA ID Number: IND009842824

C. Illinois Tranporter's ID: 2980

D. (312) 842-3121 Transporter's Phone

7. Transporter 2 Company Name

8. US EPA ID Number

E. Illinois Transporter's ID: 1875

F. Transporter's Phone

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
420 S. COLFAX AVE.
GRIFFITH, IN 46319

10. US EPA ID Number: IND016360265

G. Illinois Facility's ID

H. Facility's Phone: (219) 924-4370

	HM	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a.	X	FLAMMABLE LIQUID N.O.S. WASTE SOLVENTS IGNITABLE UN 1993	006	DM	00330	1	EPA HW Number: F005 Authorization Number
b.							EPA HW Number Authorization Number
c.							EPA HW Number Authorization Number
d.							EPA HW Number Authorization Number

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, and Illinois regulations.

Printed/Typed Name: LORRAINE MASICK | Signature: Lorraine Masick | Date: Month 10 Day 9 Year 86

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: FRED Schlundt | Signature: Fred Schlundt | Date: Month 10 Day 9 Year 86

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name | Signature | Date: Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: HARROLD E. Schmidt | Signature: [signature] | Date: Month 10 Day 10 Year 86

GENERATOR / TRANSPORTER / FACILITY

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV. # 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½ Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

211001
125RT63

DNR

MICHIGAN DEPARTMENT OF NATURAL RESOURCES

DO NOT WRITE IN THIS SPACE
ATT. ☐ DIS. ☐ REJ. ☐

...uired under authority of Act 64, P.A. ...979, as amended and Act 136, P.A. 1969.

Failure to file is punishable under section 299.548 MCL or Section 10 of Act 136, P.A. 1969.

Please print or type (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2000-0404. Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MID005117408 — Manifest Document No. 58913

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
WEIL McLAIN
P.O. BOX 868
BENTON HARBOR, MICH. 49022

4. Generator's Phone (616) 925-0601

A. State Manifest Document Number: MI 0545462

B. State Generator's ID:

5. Transporter 1 Company Name: MR. FRANK, INC

6. US EPA ID Number: ILD069506160

C. State Transporter's ID: 0079

D. Transporter's Phone: 3125963377

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID:

F. Transporter's Phone:

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICES
420 SO. COLFAX
GRIFFITH, IND.

10. US EPA ID Number: IND016360265

G. State Facility's ID:

H. Facility's Phone:

GENERATOR

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER). HM		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.	N/H
a.	X	WASTE FLAMMABLE LIQUID, N.O.S. FLAMMABLE LIQUID UN 1993 WASTE SOLVENTS N.O.S.	1	0 DM	00500	G	D001	H
b.								
c.								
d.								

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimumization certification under section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage or disposal currently available to me which minimizes the present and future threat to human health and the environment.

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, including applicable state regulations.

Printed/Typed Name	Signature	Date (Month Day Year)
Richard W Fox	Richard W. Fox	1 1 9 0 3 8 5

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)
CARL E. MILBURN	Carl E. Milburn	1 1 9 0 3 8 5

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name	Signature	Date (Month Day Year)
MURPHY		1 1 0 1 7 8 5

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOURS PER DAY.

EPA Form 8700-22 (3-84)

PR 5110 Rev. 7/84

TSDF COPY

204E.T-50

009198

DNR

MICHIGAN DEPARTMENT OF NATURAL RESOURCES

DO NOT WRITE IN THIS SPACE

ATT. ☐ DIS. ☐ REJ. ☐

Required under authority of Act 64, P.A. 1979, as amended and Act 136, P.A. 1969.

Failure to file is punishable under section 299.548 MCL or Section 10 of Act 136, P.A. 1969.

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2000-0404 Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MID095174981 — Manifest Document No. 58913

2. Page 1 of 1

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
WEIL McLAIN
P.O. BOX 868
BENTON HARBOR, MICH 49022

4. Generator's Phone (616) 925-0601

A. State Manifest Document Number: MI 0545315

B. State Generator's ID:

5. Transporter 1 Company Name: MR. FRANK

6. US EPA ID Number: TID069506160

C. State Transporter's ID: 0019

D. Transporter's Phone: 312 596 3377

7. Transporter 2 Company Name:

8. US EPA ID Number:

E. State Transporter's ID:

F. Transporter's Phone:

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERV.
420 SO. COLFAX
GRIFFITH, IND.

10. US EPA ID Number: IND016360265

G. State Facility's ID:

H. Facility's Phone:

11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER).	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.	N/H
a. FLAMMABLE LIQUID N.O.S. WASTE PAINT UN 1993	X	01	DM	800	G	D001	H
b.							
c.							
d.							

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, including applicable state regulations.

Printed/Typed Name: JOHN D. ANDRIS — Signature: John D. Andris — Date: Month 7 Day 11 Year 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: CARL E. MILBURN — Signature: Carl E. McBurn — Date: Month 07 Day 11 Year 85

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name: — Signature: — Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: F DUNFEE — Signature: F Dunfee — Date: Month 7 Day 19 Year 85

GENERATOR

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOURS PER DAY.

EPA Form 8700-22 (3-84)

PR 5110 Rev. 7/84

TSDF COPY

204K T-50

009197

DNR
MICHIGAN DEPARTMENT OF NATURAL RESOURCES

DO NOT WRITE IN THIS SPACE
ATT. ☐ DIS. ☐ REJ. ☐

Required under authority of Act 64, P.A. 1979, as amended and Act 136, P.A. 1969.

Failure to file is punishable under section 299.548 MCL or Section 10 of Act 136, P.A. 1969.

Please print or type.

Form Approved OMB No 2000-0404 Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: MID005174081 — Manifest Document No.: 58718
2. Page 1 of 1

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address: Weil McLain, PO Box 868, Benton Harbor Mich. 49022
4. Generator's Phone (616) 925 0601
5. Transporter 1 Company Name: Mr. Frank, Inc
6. US EPA ID Number: IND069506160
7. Transporter 2 Company Name: ~~420 So~~ Colfax
8. US EPA ID Number:
9. Designated Facility Name and Site Address: American Chemical Services, 420 So. Colfax, Griffith Ind.
10. US EPA ID Number: IND016360265

A. State Manifest Document Number: MI 0840719
B. State Generator's ID:
C. State Transporter's ID: 0077
D. Transporter's Phone: 312 [illegible] 38 77
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID:
H. Facility's Phone:

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER). HM		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.	N/H
a.	X	Waste Flamable Liquid NOS Flamable Liquid UN 1993 Waste Solvents NOS	6	DM	390	G	D001	H
b.								
c.								
d.								

J. Additional Descriptions for Materials Listed Above:

K. Handling Codes for Wastes Listed Above: a/ / b/ / c/ / d/ /

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage or disposal currently available to me which minimizes the present and future threat to human health and the environment.

Printed/Typed Name: Richard W Fox — Signature: Richard W. Fox — Date (Month Day Year): 3 14 86

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: CARL E. MILBURN — Signature: Carl E. McLaren — Date (Month Day Year): 03 14 86

18. Transporter 2 Acknowledgement or Receipt of Materials
Printed/Typed Name: — Signature: — Date (Month Day Year):

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: FRANK PRICE — Signature: Frank Price — Date (Month Day Year): 3 17

GENERATOR — TRANSPORTER — FACILITY

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOURS PER DAY.

EPA Form 8700-22 (Rev. 4-85)

TSDF COPY 204K TSO

011623

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: MID005124081
Manifest Document No.: 59777
2. Page 1 of
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address: Weil McLain, PO Box 568, Benton Harbor, Mich 49022
4. Generator's Phone: 616 9200601
A. State Manifest Document Number: INA 0114770
B. State Generator's ID:
5. Transporter 1 Company Name: MR Frank Inc
6. Use EPA ID Number: ILD069506160
C. State Transporter's ID:
D. Transporter's Phone:
7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:
9. Designated Facility Name and Site Address: American Chemical Service, 420 S Colfax, Griffith, IND 46319
10. Use EPA ID Number: ND016360265
G. State Facility's ID: 918089000
H. Facility's Phone: 312 768 3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	Waste No.
a. Waste Flammable Liquid N.O.S. Flammable Liquid, UN 1993	0077	A	00350	G	D001
b. Lubricating Oil	0050	M	00250	G	020
c.					
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Richard W. Fox
Signature: Richard W. Fox
Date: Month 04 Day 22 Year 97

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Dwayne Shaw
Signature: Dwayne Shaw
Date: Month 04 Day 22 Year 97

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Date: Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: Harold T. Chance
Signature: Harold T. Chance
Date: Month 4 Day 22 Year 97

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0114770

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COP
PAGE 8 (white) TRANSPORTER 2 COP

MRK
12-204R-TSD B

012242

DNR
MICHIGAN DEPARTMENT OF NATURAL RESOURCES

DO NOT WRITE IN THIS SPACE
ATT. ☐ DIS. ☐ REJ. ☐

Required under authority of Act 64, P.A. 1979, as amended and Act 136, P.A. 1969.

Failure to file is punishable under section 299.548 MCL or Section 10 of Act 136, P.A. 1969.

Please print or type

Form Approved OMB No. 2000-0404 Expires 7-31-86

UNIFORM ~~HAZARDOUS~~ WASTE MANIFEST

1. Generator's US EPA ID No.: MID005174081 — Manifest Document No.: 60870
2. Page 1 of 1

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address: Weil McLain PO Box 868, 1215 Milton St. Benton Harbor Mich 49022
4. Generator's Phone (616) 925-0601

A. State Manifest Document Number: MI 0840725
B. State Generator's ID:
C. State Transporter's ID: 0079
D. Transporter's Phone: 312 596 3377
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID: 918099 0002
H. Facility's Phone: 312 768 4200

5. Transporter 1 Company Name: Mr Frank Inc
6. US EPA ID Number: ILD 069 506 160
7. Transporter 2 Company Name:
8. US EPA ID Number:
9. Designated Facility Name and Site Address: American Chemical Services, 420 S Coltax Ave., Griffith IN 46319
10. US EPA ID Number: IND 016 360 265

11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER). HM		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.	N/H
a.	Waste Oil (Non Hazardous)	003	DM	09165	G		
b.							
c.							
d.							

J. Additional Descriptions for Materials Listed Above:

K. Handling Codes for Wastes Listed Above: a/ / b/ / c/ / d/ /

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage or disposal currently available to me which minimizes the present and future threat to human health and the environment.

Printed/Typed Name: Richard W. Fox — Signature: Richard W. Fox — Date: Month Day Year: 05 25 88

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Carl E. Milburn — Signature: [signature] — Date: Month Day Year: 05 25 88

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name: — Signature: — Date: Month Day Year:

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: Harrold F Schmidt — Signature: [signature] — Date: Month Day Year: 05 25 88

GENERATOR — TRANSPORTER — FACILITY

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOURS PER DAY.

EPA Form 8700-22 (Rev. 4-85)

PR 5110 Rev. 4/85

TSDF COPY

0015082

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. M.I.D.0.0.5.1.7.4.0.8.1 | Manifest Document No. 6.0.8.7.2

2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Weil McLain
12th Michigan St. Box [illegible] 49022

A. State Manifest Document Number INA 0162903

B. State Generator's ID

4. Generator's Phone (616) 323-6601

5. Transporter 1 Company Name
Mr Frank Inc

6. Use EPA ID Number 1.L.D.0.6.9.5.0.6.1.6.0

C. State Transporter's ID 00079

D. Transporter's Phone 312 796 3377

7. Transporter 2 Company Name

8. Use EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Service
4220 S Griffith Ave
Griffith IN 46319

10. Use EPA ID Number 1.N.D.0.1.6.3.6.0.2.6.5

G. State Facility's ID 918088D002

H. Facility's Phone 312 768 4200

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. Waste Flammable Liquid NOS Flammable Liquid UN1993 Waste Solvents NA	005	DM	002.60	G	F003
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR

Printed/Typed Name: Richard W. Fox | Signature: Richard W. Fox | Date: Month 05 Day 25 Year 88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: CARL E. WILSON | Signature: Carl E. Wilson | Date: Month 05 Day 25 Year 88

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Date: Month . Day . Year .

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: HAROLD F. SCHMIDT | Signature | Date: Month 05 Day 25 Year 88

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0162903

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

204 KTSD 5/86

0015083

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.
M·I·D·0·0·0·0·0·4·9·5·4	7·0·2·6·0		

3. Generator's Name and Mailing Address
WEIL MC CLAIN
1215 MILTON STREET., BENTON HARBOR, MI., 49022
4. Generator's Phone (616) 925-0601

A. State Manifest Document Number: INA 0370260
B. State Generator's ID:

5. Transporter 1 Company Name	6. Use EPA ID Number	C. State Transporter's ID	D. Transporter's Phone
MR. FRANK INC.	I·L·D·9·8·4·7·7·5·0·4·9	#0079	312-720-0700

7. Transporter 2 Company Name	8. Use EPA ID Number	E. State Transporter's ID	F. Transporter's Phone

9. Designated Facility Name and Site Address	10. Use EPA ID Number	G. State Facility's ID	H. Facility's Phone
AMERICAN CHEMICAL SERVICES., INC. 420 SOUTH COLFAX AVENUE GRIFFITH, INDIANA 46319	I·N·D·0·1·6·3·6·0·2·6·5		(312)-768-3400

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE FLAMMABLE LIQUID., N.O.S. FLAMMABLE LIQUID UN 1993 (D001)	005	DM	00250	G	D001
b. NON-HAZARDOUS WASTE STREAM LIQQID WASTE OIL	0	DM		G	
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name	Signature	Date Month	Day	Year
[illegible]	[signature]	10	11	89

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year
ARC E Price	[signature]	10	11	89

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year

FACILITY

19. Discrepancy Indication Space
4-204 DCT 50 10/13
1 " " 10/13 (20)

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted item 19

Printed/Typed Name	Signature	Month	Day	Year
Whitaker A	[signature]	10	11	89

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0370260

0016526

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE *(Form designed for use on elite (12-pitch) typewriter.)* Form Approved. OMB No. 2050-0039. Expires 9-

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: MID005179051 | Manifest Document No.: 0009

2. Page 1 of 1 | Information in the shaded are not required by Federal law. Items D, F, H and I are require State law.

3. Generator's Name and Mailing Address: Weil-McLain, PO Box 863, 1215 Milton St, Benton Harbor Mich 49022

4. Generator's Phone (616) 925 0601

A. State Manifest Document Number: INA 0315986

B. State Generator's ID:

5. Transporter 1 Company Name: Mr Frank Inc

6. Use EPA ID Number: ILD065[illegible]

C. State Transporter's ID: 0079

D. Transporter's Phone: 312 59[illegible]33

7. Transporter 2 Company Name:

8. Use EPA ID Number:

E. State Transporter's ID:

F. Transporter's Phone:

9. Designated Facility Name and Site Address: [illegible] 420 [illegible] Gilfax [illegible] IN [illegible]

10. Use EPA ID Number: [illegible]

G. State Facility's ID:

H. Facility's Phone: 312 768 4200

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No
a. Waste Flammable Liquid NOS. Flammable Liquid UN 1993	005	DM	00260	G	F003
b. Waste Oil Non Hazardous	002	DM	00100	-	
c.					
d.					

J. Additional Descriptions for Materials Listed Above:

K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information:

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I ha determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good fa effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Richard W. Fox | Signature: [signature] | Date: Month 03 Day 07 Ye

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Carl E Prosser | Signature: [signature] | Date: Month 3 Day [illegible] Ye

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name: | Signature: | Date: Month Day Ye

19. Discrepancy Indication Space

A: 3-204RT50 3/9; 1 204RT50 3/9 (21)

B: 2-204RT50 3/9

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted item 19

Printed/Typed Name: A Whitaker | Signature: [signature] | Month 3 Day 17 Ye

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

1A-MARINE SHALE 2/6/89 914152

COPY 5. TSD COPY

0016527

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: I.L.D.0.0.5.1.1.1.5.1.3
Manifest Document No.:
2. Page 1 of
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Welding Apparatus 1668 N Ada Chicago Il 60622

A. State Manifest Document Number: INA 0205898
B. State Generator's ID:

4. Generator's Phone (312) 252 7670

5. Transporter 1 Company Name: H Roskin Motor Service
6. Use EPA ID Number: I.L.D.0.4.5.6.9.5.7.1.5
C. State Transporter's ID: 1400
D. Transporter's Phone: 376 9343

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Service
Griffith In 46319
10. Use EPA ID Number: I.N.D.0.1.6.3.6.0.5.6.2
G. State Facility's ID: 9180890002
H. Facility's Phone: 312 768 3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	L Waste No.
a. 1,1,1,Trichloroethane ORM-A UN 2831	1	DM	50	Cal	F001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR

Printed/Typed Name	Signature	Month	Day	Year
THOMAS V FRITZ				

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
CLARENCE NEAL				

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.

Printed/Typed Name	Signature	Month	Day	Year
HAROLD F PLUMB		10	20	88

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0205898

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

0015080

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: ILD 0 0 5 1 1 1 5 1 3
Manifest Document No.:
2. Page 1 of
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Welding Apparatus 1668 N Ada Chicago Il 60622

A. State Manifest Document Number: INA 0249456
B. State Generator's ID:

4. Generator's Phone (312) 2527670

5. Transporter 1 Company Name: H. Roskin
6. Use EPA ID Number: I L D 0 4 5 6 9 5 7 1 5
C. State Transporter's ID: 1400
D. Transporter's Phone: 312 3769343

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Service Griffith In 46319
10. Use EPA ID Number: I N D 0 1 6 3 6 0 5 6 2
G. State Facility's ID: 9180890002
H. Facility's Phone: 3127683400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. 1,1,1 Trichloroethane ORM-A UN2831	1	DM	50	Gal	F001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR — Printed/Typed Name: Lore Terzic — Signature: [signature] — Date: Month / Day / Year

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: CLARENCE NEAL — Signature: [signature] — Date: Month / Day / Year

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: — Signature: — Date: Month / Day / Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: A. Whitaker — Signature: [signature] — Date: Month 10 Day 27 Year 88

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0249456

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

1 DIC T63 10/20

0015081

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I L D 0 0 5 1 1 1 5 1 3 | Manifest Document No. | 2. Page 1 of | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Welding Apparatus 1668 N Ada Chicago Il 60622

A. State Manifest Document Number: INA 0205907

B. State Generator's ID

4. Generator's Phone (312) 252 7670

5. Transporter 1 Company Name: H Roskin Motor Service
6. Use EPA ID Number: I L D 0 4 5 6 9 5 7 1 5
C. State Transporter's ID: I 1400
D. Transporter's Phone: 312 376 9343

7. Transporter 2 Company Name
8. Use EPA ID Number
E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address: American Chemical Service Griffith In 46319
10. Use EPA ID Number: I L D 0 4 5 6 9 5 7 1 5
G. State Facility's ID: 9180890002
H. Facility's Phone: 312 768 3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. 1,1,1 Trichloroethane ORM-A UN 2831	1 2	DM	50	Gal	F001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR

Printed/Typed Name | Signature | Date: Month | Day | Year

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Date: Month | Day | Year

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Date: Month | Day | Year

FACILITY

19. Discrepancy Indication Space

20 Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted item 18.
Printed/Typed Name | Signature | Date: Month | Day | Year

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0205907

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

0015079

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I.L.D.0.0.5.1.1.5.1.3 | Manifest Document No. 0.2.2.1.9 | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but Items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Welding Apparatus
1668 N Ada Chicago IL 60622

A. State Manifest Document Number: INA 0322615

4. Generator's Phone (312) 252 7670

B. State Generator's ID

5. Transporter 1 Company Name: H Roskin Motor Service

6. Use EPA ID Number: I.L.D.0.4.5.6.9.5.7.1.5

C. State Transporter's ID: 1400

D. Transporter's Phone: 312 376 9343

7. Transporter 2 Company Name

8. Use EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Service
Griffith IN 46319

10. Use EPA ID Number

G. State Facility's ID: 9180890002

H. Facility's Phone: 312 768 3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. 1,1,1 Trichloroethane ORM-A UN 2831	1	DM	50	Gal	F001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR

Printed/Typed Name: Floyd Pitts | Signature | Month | Day 4 | Year

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: David Smith | Signature | Month | Day | Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Month | Day | Year

FACILITY

19 Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.

Printed/Typed Name: Whitaker A | Signature | Month 3 | Day 3 | Year 89

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA0322615

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY

120763 4/3

0016522

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: IL.D.0.0.5.1.1.1.5.1.3 | Manifest Document No.: 0.4.2.8.9 | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Welding Apparatus 1668 N Ada
Chicago IL 60622
4. Generator's Phone (312) 2527670

A. State Manifest Document Number: INA 0322631
B. State Generator's ID:

5. Transporter 1 Company Name: H Roskin
6. Use EPA ID Number: I.L.D.0.4.5.6.9.5.7.1.5
C. State Transporter's ID: 1400
D. Transporter's Phone: 3128769343

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Service
Griffith IN 46319
10. Use EPA ID Number: IND.0.1.6.3.6.0.5.6.2
G. State Facility's ID: 9180890002
H. Facility's Phone: XXX 3127683400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. 1,1,1 Trichloroethane ORM-A UN 2381	1	DM	50	Gal	F001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above:
K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information:

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR — Printed/Typed Name: BRANT TERZIC | Signature: Brant Terzic | Date: Month 5 Day 10 Year 89

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials — Printed/Typed Name: CLARENCE NEAL | Signature: Clarence Neal | Date: Month 05 Day 10 Year 89
18. Transporter 2 Acknowledgement of Receipt of Materials — Printed/Typed Name: | Signature: | Date: Month . Day . Year .

FACILITY
19. Discrepancy Indication Space:

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19
Printed/Typed Name: HAROLD F SCHMIDT | Signature: Harold F Schmidt | Date: Month 05 Day 15 Year

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

IBT 6315

COPY 5. TSD COPY

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0322631

0016525

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. ILD 0 05111513 | Manifest Document No. 05029 | 2. Page 1 of 1 | Information in the shaded are not required by Federal law Items D, F, H and I are require State law.

3. Generator's Name and Mailing Address
Welding Apparatus 1668 N Ada
Chicago IL 60622
4. Generator's Phone (312) 252 7670

A. State Manifest Document Number INA 0322644
B. State Generator's ID

5. Transporter 1 Company Name: H Roskin
6. Use EPA ID Number: ILD 04 5.69 5.7 1.5
C. State Transporter's ID 1400
D. Transporter's Phone 312 376 9

7. Transporter 2 Company Name
8. Use EPA ID Number
E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Service
Griffith IN 46319
10. Use EPA ID Number: IND 01 636 056 2
G. State Facility's ID 91808900002
H. Facility's Phone 312 678 3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No
a. 1,1,1 Trichloroethane CRM-A UN2831	1	DM	50	Gal	F001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I ha determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good fa effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR — Printed/Typed Name: BRANDT | Signature | Date Month 06 Day 02 Ye

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: KAY ZAK | Signature | Date Month 06 Day 02 Ye

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Date Month Day Yea

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19
Printed/Typed Name: HAROLD F SCHMIDT | Signature | Date Month 06 Day 23 Year 89

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

1-IAT763 6/26/89

COPY 5. TSD COPY

0016524

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1	Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.
IL D 0 0 5 1 1 1 5 1 3	1 1 1 3 9	1 of 1	

3. Generator's Name and Mailing Address
Welding Apparatus
1668 N Ada Chicago IL 60622

4. Generator's Phone (312) 252 7670

A. State Manifest Document Number: INA 0322674

B. State Generator's ID:

5. Transporter 1 Company Name: H Roskin Motor Service

6. Use EPA ID Number: I L D 0 4 5 6 9 5 7 1 5

C. State Transporter's ID: 1400

D. Transporter's Phone: 312 376 9345

7. Transporter 2 Company Name:

8. Use EPA ID Number:

E. State Transporter's ID:

F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Service
Griffith IN 46319

10. Use EPA ID Number: I N D 0 1 6 3 6 0 5 6 2

G. State Facility's ID: 9180890002

H. Facility's Phone: 312 768 3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. 1,1,1 Trichloroethane ORM-A UN 2831	2	DM	100	Gal	F001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR

Printed/Typed Name	Signature	Month	Day	Year
Lore Terzin		11	14	

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
CLARENCE NEAL	Clarence Neal	11	17	89

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted item 19.

Printed/Typed Name	Signature	Month	Day	Year
STEVE KUNUICK	Steve Kunuick	11	17	89

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA0322674

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

ATC16212/6

COPY 5. TSD COPY

0016523

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE *(Form designed for use on elite (12-pitch) typewriter.)* *Form Approved. OMB No. 2050-0039. Expires 9-30-91*

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: I.L.D.0.0.5.1.1.1.5.1.3
Manifest Document No.: 0.1.1.9.0
2. Page 1 of 1
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Welding Apparatus 1668 N Ada
Chicago IL 60622
4. Generator's Phone (312) 252 7670

A. State Manifest Document Number: INA 0322688
B. State Generator's ID:

5. Transporter 1 Company Name: H Roskin
6. Use EPA ID Number: I.L.D.0.4.5.6.9.5.7.1.5
C. State Transporter's ID: 1400
D. Transporter's Phone: 3123769343

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Service
Griffith IN 46319
10. Use EPA ID Number: I.N.D.0.1.6.3.6.0.5.6.2
G. State Facility's ID: 9180890002
H. Facility's Phone: 3127683400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. 1,1,1 Trichlorethane ORM-A UN2831	1	DM	~~100~~ 50	Gal	F001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above:
K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information:

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Signature: Date Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: [illegible] Signature: [illegible] Date Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: [illegible] Signature: [illegible] Date Month Day Year

19. Discrepancy Indication Space:

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: [illegible] Signature: [illegible] Month 01 Day 29 Year 90

GENERATOR / TRANSPORTER / FACILITY

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA0322688

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

1-1BTK Tb3 3/19/90

COPY 5. TSD COPY

0018135

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.
I L D 0 0 5 1 1 1 5 1 3	0 4 0 2 0	1 of 1	

GENERATOR

3. Generator's Name and Mailing Address
Welding Apparatus 1668 N Ada
Chicago IL 60622
4. Generator's Phone (312) 252 7670

A. State Manifest Document Number: INA 0322704
B. State Generator's ID:

5. Transporter 1 Company Name: H Roskin
6. Use EPA ID Number: IL D 04 5 6 9 5 7 1 5
C. State Transporter's ID:
D. Transporter's Phone: 3123769343

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID: 1400
F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Service
Griffith IN 46319
10. Use EPA ID Number: I N D 0 1 6 3 6 0 5 6 2
G. State Facility's ID: 9180890002
H. Facility's Phone: 312 768 3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. XXX 111 Trichloroethane UN 2831	2	DM	100	Gal	F001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: BRIAN TERRIC | Signature | Date: Month 4 Day 3 Year 90

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: WILL SMITH | Signature | Date: Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Date: Month Day Year

FACILITY

19 Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted item 19.
Printed/Typed Name: WHITAKER A | Signature: J Whitaker | Month 4 Day 6 Year 90

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0322704

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

#3 Stick - 5/24/90 BN 509073

COPY 5. TSD COPY

0018131

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0001428

Authorization Number ~~8 1 2 4 0 5~~

WASTE GENERATOR

WELDON INDUSTRIES, INC. (Company Name) — 14527 S. LINCOLN AVE. (312)331-5050 (Address)

HARVY, (City) — IL (State) — 60426 (Zip)

0 3 1 1 1 1 0 0 0 5 G (Generator Number)
ILD 062480959

WASTE HAULER(S)

(1) VANDERDYDEN TRANSPORT (Hauler Name) — 18340 S. LECLAIRE AVE. TINLEY PARK, IL (Hauler Address) — S.W.H. Registration Number 0 3 1 8 0 0 3
ILD 048294904

(2) (Hauler Name) — XXXXXXXXXXXXXXX (Hauler Address) — S.W.H. Registration Number

DESTINATION -- DISPOSAL STORAGE OR TREATMENT SITE

AMERCHEMICAL (Facility Name) — 505 S. COLFAX (Address) — 9 1 8 0 8 9 0 2 (Site Number)
IND 016360265

GRIFFIN (City) — IN (State) — 46319 (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ADHESIVE- SOLVENT — WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

NA 1993 (UN) ORNA# — D001 EPA HW.#

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: NOS.

HAZARD CLASS: FLAMMABLE LIQUID

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 03/07/83 — [signature] (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 0 0 2 2 5 5 (47–52) — (1) GALLONS (2) CU. YDS. (Circle One) 1 (53)

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER _____ (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) — DATE: 0 3 / 0 7 / 8 3 (54–59)

(2) (Authorized Signature) — DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED.

[signature] (Authorized Signature) — DATE: 3 / 7 / 83 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 42

DISTRIBUTION PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

To 211 KT-50 GRM 3.7.83

005459

IL 532-610
LPC 62 8/81

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0780302
Authorization Number

TO BE COMPLETED BY WASTE GENERATOR

WELDON INDUSTRIES, INC. (Company Name) | 14527 S. LINCOLN Ave. (Address) | 31 233 1505 0 (Phone Number) | 03 111 10 005 G (Generator Number)
HARVEY (City) | IL (State) | 60426 (Zip) | (EPA Number)

WASTE HAULER(S)

VANDERBYDEN (Hauler Name) | 18340 S. LECLAIRE AVE. TINLEY PARK, IL (Hauler Address) | S.W.H. Registration Number 0 31 800 3
312 385 7671 (Phone Number) | ILD048294904 (EPA Number)

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number
(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERCHEMICAL (Facility Name) | 505 S. COLFAX (Address) | 918 0890 2 (Site Number)
GRIFFIN, (City) | IN (State) | 46319. (Zip) | (Phone Number) | IND016360265 (EPA Number)

(Alternate (Facility Name)) | (Address) | (Site Number)
(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ADHESIVE-SOLVENT WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: NOS
HAZARD CLASS: FLAMMABLE LIQUID
NA 1993 (UN or NA Number)
D001 (EPA HW Number)

WEIGHT FOR O.O.T. USE _____ LBS / TONS (circle one)
WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.
QUANTITY OF WASTE DELIVERED: 001900 GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) (DRUMS_____ Number) TANK TRUCK DPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION _____ (Authorized Signature) DATE: 9/21/83

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Gregory C Cobb (Authorized Signature) DATE 09/21/83

(2) _____ (Authorized Signature) DATE: / /

DISPOSAL: STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO /

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

_____ (Authorized Signature) DATE: 9/21/83

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV. # 4

SITE COPY - PART 3

To 211 K T-50 GKM 9-21-83

0U5458

IL 532-610
LPC 62 8/81

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0780303 (1–7)

Authorization Number (8–13)

TO BE COMPLETED BY WASTE GENERATOR

WELDON INDUSTRIES, INC	14527 S. LINCOLN AVE	31 2 3 3 1 5 0 50	03 11 110 005 G
(Company Name)	Address	Phone Number	(14) Generator Number (24)
HARVEY,	IL	60426	ILD 0 624 809 59
City	State	Zip	EPA Number

WASTE HAULER(S)

VANDERHYDEN	18340 S. LECLAIRE AVE	S.W.H. Registration Number 031 800 3 (25–31)
Hauler Name	Hauler Address	
	TINLEY PARK, IL	3 1 2 3 8 5 7 6 7 1 (Phone Number)
		ILD048294904 (EPA Number)
Hauler Name	Hauler Address	S.W.H. Registration Number (32–38)
		Phone Number / EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERCHEMICAL	505 S. COLFAX	918 0 890 2 (39–46)
(Facility Name)	Address	Site Number
GRIFFIN,	IN 46319	IND016360265
City	State Zip	Phone Number / EPA Number
Alternate (Facility Name)	Address	(39–46) Site Number
City	State Zip	Phone Number / EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ADHESIVE-SOLVENT WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:		
NOS	FLAMMABLE LIQUID	NA1993 (UN or NA Number)	D001 (EPA HW Number)

WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 002000 (47–52) (1) GALLONS (Circle One) / 2 CU. YDS. (53)

METHOD OF SHIPMENT (Circle One): (DRUMS_____ Number) / TANK TRUCK / OPEN TRUCK / OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION _____ (Authorized Signature) DATE: 1/27/84

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Terry S _____ (Authorized Signature) DATE: 1/27/84 (54–59)

(2) _____ (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO_____

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) DATE: 01/27/84 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV. # 4

SITE COPY - PART 3

To 212 RT-506 1.27.84

006625

IL 532-610
LPC 62 8/81

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0780304

Authorization Number

(Company Name)	Address	Phone Number	Generator Number
WELDON INDUSTRIES, INC.	14527 S. LINCOLN	3 1 2 3 3 1 5 0 5 0	0 3 1 1 1 1 0 0 0 5 G

City	State	Zip	EPA Number
HARVEY	IL	60426	I L D 0 6 2 4 8 0 9 5 9

WASTE HAULER(S)

Hauler Name	Hauler Address	S.W.H. Registration Number
VANBERHYDEN	18340 S. LeCLAIRE AVE.	0 3 1 8 0 0 3

Phone Number	EPA Number
TINLEY PARK, IL 3 1 2 3 8 5 7 6 7 1	I L D 0 4 8 2 9 4 9 0 4

Hauler Name	Hauler Address	S.W.H. Registration Number

Phone Number	EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

(Facility Name)	Address	Site Number
AMERCHEMICAL	505 S. COLFAX	9 8 1 8 0 8 9 0 2

City	State	Zip	Phone Number	EPA Number
GRIFFIN	IN	46319		I N D 0 1 6 3 6 0 2 6 5

Alternate (Facility Name)	Address	Site Number

City	State	Zip	Phone Number	EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ADHESIVE-SOLVENT WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
NOS	FLAMMABEL LIQUID	N A 1 9 9 3	D 0 0 1

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 0 0 2 0 9 0 (1) GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) (DRUMS _____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE: 5/11/84

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) DATE: 5/11/84

(2) _____ (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY:

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO _____

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[signature] (Authorized Signature) DATE: 5/11/84

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV. # 4

SITE COPY - PART 3

211E T-50

006626

IL 532-610
LPC 62 8/81

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

TO BE COMPLETED BY WASTE GENERATOR

0780306 (1–7)

Authorization Number ____ (8–13)

WELDON INDUSTRIES, INC	14527 S. LINCOLN	3 1 2 3 3 1 5 0 5 0	0 3 1 1 1 0 0 0 5 G
(Company Name)	Address	Phone Number	14 Generator Number 24
HARVEY,	IL	60426	I L D 0 6 2 4 8 0 9 5 9
City	State	Zip	EPA Number

WASTE HAULER(S)

VANDERHYDEN	18340 S. LE CLAIRE AVE. INLET PARK, IL	S.W.H. Registration Number 0 3 1 8 0 0 3 (25–31)
Hauler Name	Hauler Address	3 1 2 3 8 5 7 6 7 1 Phone Number
		I L D 0 4 8 2 9 4 9 0 4 EPA Number
Hauler Name	Hauler Address	S.W.H. Registration Number (32–38)
		Phone Number / EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERCHEMICAL	505 S. COLFAX	9 1 8 0 8 9 0 2 (39–46)
(Facility Name)	Address	Site Number
GRIFFIN	IN 46319	I N D 0 1 6 3 6 0 2 6 5
City	State Zip	Phone Number / EPA Number
Alternate (Facility Name)	Address	(39) Site Number (46)
City	State Zip	Phone Number / EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ADHESIVE-SOLVENT WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:		
NOS	FLAMMABLE LIQUID	N A 1 9 9 3 (UN or NA Number)	D 0 0 1 (EPA HW Number)

WEIGHT FOR D.O.T. USE ____ LBS / ____ TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 0 0 2 3 0 0 (47–52) (O) GALLONS (Circle One) / 2 CU. YDS. (53)

METHOD OF SHIPMENT (Circle One) (DRUMS 43 Number) (TANK TRUCK) OPEN TRUCK OTHER (Specify) ____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION ____ (Authorized Signature) DATE: 8/2/84

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Mark Lewis (Authorized Signature) DATE: 08/02/84 (54–59)

(2) ____ (Authorized Signature) DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

J W Miller (Authorized Signature) DATE: 8/2/84 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS ____

IN ILLINOIS 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV. # 4

SITE COPY - PART 3

211 ET-50 10900 BTU 1.6% Cl.

006627

Division of Land Pollution Control - Manifest
Indiana State Board of Health
P.O. Box 7035
Indianapolis, IN 46207-7035

DO NOT WRITE IN THIS SPACE

Please print or type. (Form designed for use on elite (12-pitch) typewriter)

Form Approved OMB No. 2000 0404 Expires 7 31 86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of	Information in the shaded areas is not required by Federal law
MID054648191		1	

3. Generator's Name
Wells Manufacturing
1100 W. Broadway, Three Rivers, MI 49043

4. Generator's Phone (616) 279-7414

A. State Manifest Document Number IN 091905

B. State Generator's ID

5. Transporter 1 Company Name A&B Industrial Services

6. US EPA ID Number MID017162722

C. State Transporter's ID

D. Transporter's Phone (616) 375-9595

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical SErvices
420 S. Colfax
Griffith, IN 46319

10. US EPA ID Number IND016360265

G. State Facility's ID

H. Facility's Phone (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	15. Waste No.
a. Waste 1,1,1, Trichloroethane	003	DM	001165	G	F001
b. Waste Paint Related Material Flammable Liquid NA1263		DM		G	F003
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

GENERATOR

Printed/Typed Name	Signature	Month	Day	Year
BINNERT HAIGHT		12	10	87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Wayne Brigance	Wayne Brigance	1	7	87

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.

Printed/Typed Name	Signature	Month	Day	Year
HAROLD F. [illegible]		1	13	87

IN 091905

EPA Form 8700-22A (Rev. 11-85)

UHWM 2/LP2

T.S.D. DETACH AND RETAIN THIS COPY

MRK 1-14-763 B
2-204E TSU B

012241

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0173296

WASTE GENERATOR

Authorization Number 920250

WESCO MANUFACTURING (Company Name) | PO BOX 1266/S. ORCHARD RD (Address) | ILD 005237235

AURORA (City) | IL (State) | 60507 (Zip) | 312-897-8458 | 0 8 9 4 6 9 0 0 0 3 (Generator Number)

WASTE HAULER(S)

(1) STRAND TRUCKING (Hauler Name) | 13642 KENTON CRESTWOOD, IL 60445 (Hauler Address) | S.W.H. Registration Number 0 3 1 1 0 0 4

(2) ECOLOGICAL TRANSFER (Hauler Name) | (Hauler Address) | S.W.H. Registration Number ILT 000646810

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 S. COLFAX / BOX 190 (Address) | 9 1 8 0 8 9 0 2 (Site Number)

GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | IN 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT & SOLVENT | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: PAINT THINNER & PIGMENTS

HAZARD CLASS: FLAMABLE

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE 3-26-82 | T W. Boyce (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 1750 | (1) GALLONS (2) CU. YDS. | (Circle One) 1

METHOD OF SHIPMENT (Circle One) (22) DRUMS | TANK TRUCK | OPEN TRUCK | (OTHER) _____ (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Thomas Stark (Authorized Signature) | DATE 03/26/82

(2) _____ (Authorized Signature) | DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

Michael Burke (Authorized Signature) | DATE 3-26-82

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-880

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

On dock 3-26-82 GRM
To dump box 5-6-82 T-50

003513

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0556709

Authorization Number 920250

WESO MANUFACTURING (Company Name) | 1266 S. ORCHARD RD. (Address) | 312-897-8458 (Phone Number) | 0894690003 (Generator Number)

AURORA (City) | ILL (State) | 60507 (Zip) | ILD005237235 (EPA Number)

WASTE HAULER(S)

STRAND TRUCKING (Hauler Name) | 13642 KENTON CRESTWOOD, ILL 60445 (Hauler Address) | S.W.H. Registration Number 0311004

312 388 8440 (Phone Number) | ILT000646 8 (EPA Number)

ECOLOGICAL TRANSFER (Hauler Name) | Hauler Address | S.W.H. Registration Number

3858440 (Phone Number) | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 S. COLFAX BOX 190 (Address) | 91808902 (Site Number)

GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | Phone Number | IN0163602 6 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT & SOLVENT | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: PAINT THINNER & PIGMENTS FLAMABLE

HAZARD CLASS: UN 1993 ~~1294~~ (UN or NA Number) | F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 000770 (47–52) GALLONS (Circle One) / 2 CU. YDS 1 (53)

METHOD OF SHIPMENT (Circle One): (DRUMS 14 Number) TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Leonard M Strand (Authorized Signature) DATE 9/15/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) Leonard M Strand (Authorized Signature) DATE 9/15/82 (54)

(2) _____ (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) DATE 9/15/82 (60)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS, 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-[illegible]

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV # 3

SITE COPY - PART 3

On dock 9.15.82
To 204 K T-50 GRM 9.15.82

003614

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0173297

Authorization Number 920250

Wesco Manufacturing (Company Name) | P O Box 1266/S. Orchard Road (Address) | ILD 005237235

Aurora (City) | Illinois 60507 312-897-8458 (State Zip) | 0 8 9 4 6 9 0 0 0 3 G (Generator Number)

WASTE HAULER(S)

(1) Strand Trucking (Hauler Name) | 13642 Kenton Crestwood, Illinois 60445 (Hauler Address) 312-385 8440 | S.W.H. Registration Number 0 3 1 1 0 [redacted] 1 1

(2) _____ (Hauler Name) | _____ (Hauler Address) | S.W.H. Registration Number _____

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

American Chemical (Facility Name) | 420 South Colfax Box 190 (Address) 312 768 3400 | 9 1 8 0 8 9 0 2 (Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip) | IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint and Solvent

WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW.

SHIPPING DESCRIPTION: Paint Thinner and Pigments

HAZARD CLASS: Flamable

UN 1294

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 10/20/83 Thomas R. Boyce (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 0070 (47–52) (1) GALLONS (2) CU. YDS. (Circle One) 1 (53)

METHOD OF SHIPMENT (Circle One) 14 DRUMS TANK TRUCK OPEN TRUCK OTHER VAN (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Leonard M Strand (Authorized Signature) DATE: 10/20/83 (54–59)

(2) _____ (Authorized Signature) DATE: ____/____/____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED

Michael C Burg (Authorized Signature) DATE: 10 20 83 (80–85)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS 217 / 782 3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS 800 424 8802

DISTRIBUTION: PART 1 GENERATOR PART 2 IEPA PART 3 SITE PART 4 HAULER PART 5 IEPA PART 6 GENERATOR

SITE COPY - PART 3

On Dock To Sold Mix T-50 GRY 10.20.83

006061

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0173299

Authorization Number [redacted]

WESCO MFG (Company Name)
P.O. BOX 1266 SO. ORCHARD RD (Address) (312) 897-8458
ILD 005 237 235
0 8 9 4 6 9 0 0 0 8 G (Generator Number)

AURORA (City) IL (State) 60507 (Zip)

WASTE HAULER(S)

(1) STRAND STRUCKING (Hauler Name)
13642 KENTON
CREST WOOD, IL 60445 (Hauler Address)
(312) 385-8440
S.W.H. Registration Number 0 3 1 1 0 1 1

(2) (Hauler Name) (Hauler Address)
S.W.H. Registration Number ILD000646810

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name)
420 SOUTH COLFAX, BOX 190 (Address)
9 1 8 0 8 9 0 2 (Site Number)

GRIFFITH (City) INDIANA (State) 46319
(312)-768-3400
IND 016 360 265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: SOLVENTS
WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: PAINT THINNER & PIGMENTS
HAZARD CLASS: FLAMABLE
UN 1294

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 6-28-84 (Authorized Signature) Thomas H Boyer

WASTE HAULER*

6750 lbs

QUANTITY OF WASTE RECEIVED: 000825 (1) GALLONS (2) CU. YDS. (Circle One) 1

METHOD OF SHIPMENT (Circle One) DRUMS 15 TANK TRUCK OPEN TRUCK OTHER VAN (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) (Authorized Signature) DATE 6/28/84

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

(Authorized Signature) DATE: 6/25/84

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

205RT-50

006628

STATE OF ILLINOIS ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0610
LPC 62 8/81

Please print or type. (Form designed for use on elite (12-pitch) typewriter) **EPA Form 8700-22 (3-84)** Form Approved. OMB No. 2000-0404. Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. **I L D 0 0 5 2 3 7 2 3 5** Manifest Document No.

2. Page 1 of

Information in the shaded areas is not required by Federal law, but is required by Illinois law.

3. Generator's Name and Mailing Address
Nesco Manufacturing/Div. Of Steiner Company, Inc.
1266 So. Orchard Road Aurora, IL 60506

4. Generator's Phone (312) 897-8458

A. Illinois Manifest Document Number: **IL 1171704**

B. Illinois Generator's ID: **0 6 9 0 0 5 0 0 1 8**

5. Transporter 1 Company Name: **Strand Trucking, Inc.**

6. US EPA ID Number: **I L D 0 0 0 6 4 6 8 1 0**

C. Illinois Tranporter's ID: **0 3 1 1**

D. **312 385-8440** Transporter's Phone

7. Transporter 2 Company Name

8. US EPA ID Number

E. Illinois Transporter's ID

F. ( ) Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical
420 So. Colfax, Box 190
Griffith, Indiana 46319

10. US EPA ID Number: **I N D 0 1 6 3 6 0 2 6 5**

G. Illinois Facility's ID: **0 1 8 0 8 9 0 0 0 2**

H. Facility's Phone: **(312) 768-3400**

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. Solvents Flammable UN 1993	[redacted]	055	1	03245		EPA HW Number: 6 0 0 5
b.						EPA HW Number / Authorization Number
c.						EPA HW Number / Authorization Number
d.						EPA HW Number / Authorization Number

J. Additional Descriptions for Materials Listed Above
Paint Thinner & Pigments

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, and Illinois regulations.

Printed/Typed Name: Richard Boyce — Signature: Richard Boyce — Date (Month Day Year): 12 4 86

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Date (Month Day Year)

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name: Stan Strand — Signature: Stan Strand — Date (Month Day Year): 12 6 3 86

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: Harold F. Schmidt — Signature: Harold F. Schmidt — Date (Month Day Year): 12 04 86

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV # 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½, Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

MRK 59- 204R TSU 6 OK

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

43

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: C.O.D.0.3.2.0.3.6.3.6.0
Manifest Document No.:
2. Page 1 of 8
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
West Auto Body Inc.
8450 E. Colfax, Denver, CO 80220
4. Generator's Phone (303) 388-1619

A. State Manifest Document Number: INA 0159793
B. State Generator's ID:

5. Transporter 1 Company Name: Strand Trucking
6. Use EPA ID Number: I.L.D.0.0.0.6.4.6.8.1.0
C. State Transporter's ID: 0311
D. Transporter's Phone: 312-385-8440

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Service
420 S. Colfax Avenue
Griffith, IN 46319
10. Use EPA ID Number: I.N.D.0.1.6.3.6.0.2.6.5
G. State Facility's ID:
H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. RQ WASTE PAINT RELATED MATERIAL (F003) FLAMMABLE LIQUID NA1263	04	D.M	02.20	G	F003
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable International and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR — Printed/Typed Name: [illegible] Signature: [signature] Date: Month 7 Day 21 Year 88

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: LINDA LAMBERT Signature: [signature] Date: Month 7 Day 21 Year 88
18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: Signature: Date: Month . Day . Year .

FACILITY
19. Discrepancy Indication Space
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: FRANK PRICE Signature: Frank Price Date: Month 7 Day 25 Year 88

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0159793

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

11 GTCT 63 76

0015078

DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 123480

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: The West Bend Company	2. EPA IDENTIFICATION NO.: WID 006070205
3. COMMENTS/SPECIAL INSTRUCTIONS	
4. P.O. BOX OR STREET ADDRESS: 400 Washington Street	
5. CITY, STATE, ZIP CODE: West Bend, WI 53095	6. TELEPHONE NUMBER: (414) 334-2311

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
Bulk	2315	Waste Flammable Liquid NOS	Flammable Liquid	UN 1993	1. Solid 3. Mixture 2. Liquid [2]	D001	16205
					1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE	16. NAME (Print)	17. DATE SHIPPED M D Y
James L. Hopp	James L. Hopp	4 / 12 / 84

TRANSPORTER SECTION

18. COMPANY NAME: ABC Services Inc.	19. EPA IDENTIFICATION NO.: WID 076159339
20. P.O. BOX OR STREET ADDRESS: 5710 49th Street.	
21. CITY, STATE, ZIP CODE: Kenosha, WI 53142	22. TELEPHONE NUMBER: (414) 657-6222
23. COMMENTS	

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE	25. NAME (Print)	26. Date Accepted M D Y
Lee R. Gerou	Lee R. Gerou	4 / 12 / 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME	28. EPA IDENTIFICATION NO.

29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service, Inc.	33. EPA IDENTIFICATION NO.: IND 016360265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190	
35. CITY, STATE, ZIP CODE: Griffith, Indiana 46319	36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS: Waste paint & solvents will be converted to liquid chemical fuel.	

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE	39. NAME (Print)	40. Date Accepted M D Y
[signature]	FDWFEE	4/17/84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME	42. EPA IDENTIFICATION NO.

43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO212TC T-50 GMW 4.17.84

006624

STATE OF WISCONSIN

Form 4400-66 Rev. 7-84
Chapter 144, Wis. Stats.

Mail Copies To: State of Wisconsin
Department of Natural Resources
Bureau of Solid Waste Mgt.
Box 8094
Madison, Wisconsin 53708

FOR DNR USE ONLY

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: W.I.D.0.0.6.0.7.0.2.0.4 — Manifest Document No.: 1.0.7.3.7
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
The West Bend Company
400 Washington Street
West Bend, WI 53095

4. Generator's Phone (414) 334-2311

A. State Manifest Document Number: WI 10737
B. State Generator's ID: —

5. Transporter 1 Company Name: ABC Services Inc.
6. US EPA ID Number: W.I.D.0.7.6.1.5.9.8.3.9
C. State Transporter's ID: —
D. Transporter's Phone: 414/657-6222

7. Transporter 2 Company Name:
8. US EPA ID Number:
E. State Transporter's ID: —
F. Transporter's Phone: —

9. Designated Facility Name and Site Address
American Chemical Service, Inc.
P.O. Box 190
Griffith, Indiana 46319

10. US EPA ID Number: I.N.D.0.1.6.3.6.0.2.6.5
G. State Facility's ID: —
H. Facility's Phone: (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. Waste Flammable Liquid NOS Flammable Liquid, UN1993	20	DM	1100	G	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and according to the requirements of the Wisconsin Department of Natural Resources.

Printed/Typed Name: Gerald F. Falkowski — Signature: Gerald F Falkowski — Date: Month 0.5 Day 23 Year 8.5

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Timothy R. Norman — Signature: Timothy R Norman — Date: Month [illegible] Day [illegible] Year [illegible]

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name: — Signature: — Date: Month . Day . Year .

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: FDUNFEE — Signature: F Dunfee — Date: Month 5 Day 30 Year 85

GENERATOR / TRANSPORTER / FACILITY

Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

204K T76 T-50

Distribution: 1 — BSWM 4 — Facility
2 — Generator 5 — Generator
3 — BSWM 6 — Transporter
BSWM Copies 1 & 3 mail to above.

COPY 4

009195

STATE OF WISCONSIN

Form 4400-66 Rev. 7-84
Chapter 144, Wis. Stats.

Mail Copies To: State of Wisconsin
Department of Natural Resources
Bureau of Solid Waste Mgt.
Box 8094
Madison, Wisconsin 53708

FOR DNR USE ONLY

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: W.I.D.0.0.6.0.7.0.2.0.4
Manifest Document No.: 1.0.7.3.7
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
The West Bend Company
400 Washington Street
West Bend, WI 53095
4. Generator's Phone (414) 334-2311

A. State Manifest Document Number: WI 10738
B. State Generator's ID:

5. Transporter 1 Company Name: APC Services Inc.
6. US EPA ID Number: W.I.D.0.7.6.1.5.9.8.3.9
C. State Transporter's ID:
D. Transporter's Phone: 414/857-6222

7. Transporter 2 Company Name:
8. US EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Service, Inc.
P.O. Box 190
Griffith, Indiana 46319
10. US EPA ID Number: I.N.D.0.1.6.3.6.0.2.6.5
G. State Facility's ID:
H. Facility's Phone: (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. Waste Flammable Liquid NOS Flammable Liquid, UN1993	12	DM	660	G	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and according to the requirements of the Wisconsin Department of Natural Resources.

GENERATOR

Printed/Typed Name: Gerald E. Falkowski
Signature:
Date: Month 06 Day 20 Year 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Date: Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: GR MURPHY
Signature:
Date: Month 7 Day 18 Year 85

Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

204ET-50

Distribution: 1 — BSWM 4 — Facility
2 — Generator 5 — Generator
3 — BSWM 6 — Transporter
BSWM Copies 1 & 3 mailed above.

COPY 4

009146

MINNESOTA POLLUTION CONTROL AGENCY
DIVISION OF SOLID AND HAZARDOUS WASTE
1935 WEST COUNTY ROAD B-2
ROSEVILLE, MN 55113-2785
ATTN: HWIMS

For MPCA use only

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) Instructions on back of form.

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MND981 088677 — Manifest Document No.
2. Page 1 of — Information in shaded area not required by Federal law. Minnesota rules require Items H. and I.

3. Generator's Name and Mailing Address WEST HENNEPIN COLLISION CENTER
547 TAMARACK AVE
4. Generator's Phone (612) 476-1267 LONG LAKE, MN 55356

State Manifest Document Number MN 0042189
State Generator's ID

5. Transporter 1 Company Name AUTOBODY SUPPLY INC — 6. US EPA ID Number MND023023377
State Transporter's ID
Transporter's Phone

7. Transporter 2 Company Name ABC SERVICES — 8. US EPA ID Number WIO 076159 839
State Transporter's ID
Transporter's Phone

9. Designated Facility Name and Site Address AMERICAN CHEMICAL SERVICES
420 S. COLFAX
GRIFFITH, INDIANA 46319 — 10. U.S EPA ID Number IND016360265
State Facility's ID
Facility's Phone

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE PAINT RELATED MATERIAL FLAMMABLE LIQUID NA 1263	X	2	DM	110	G	F003
b.						
c.						
d.						

J. Additional Descriptions for Materials Listed Above — K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

Printed/Typed Name: WILLIAM L. HULETT — Signature — Date: Month 06 Day 19 Year 96

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: DOUGLAS A. WEIMER — Signature — Date: Month 06 Day 19 Year 96

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name: FRANK KLEES — Signature — Date: Month 6 Day 20 Year 96

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: LE MOI PILY — Signature — Date: Month 06 Day 25 Year 96

GENERATOR

In case of spill or emergency, immediately call the Minnesota Pollution Control Agency at 612/296-7373; the Minnesota Division of Emergency Services at 612/778-0600; the National Response Center at 800/424-8802. Outside Minnesota, call the National Response Center and appropriate state agency.

Minnesota Form PQ-00371-01(10 84)

COPY 4: TSDF RETAIN

011974

Division of Land Pollution Control - Manifest
Indiana State Board of Health
P.O. Box 7035
Indianapolis, IN 46207-7035

DO NOT WRITE IN THIS SPACE

Please print or type. (Form designed for use on elite (12-pitch) typewriter) Form Approved OMB No. 2000 0404 Expires 7 31 86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: TVD047029798
Manifest Document No.: 00000
2. Page 1 of 1
Information in the shaded areas is not required by Federal law

3. Generator's Name: West Instrument
3800 N. River Rd. Schiller Park Ill 60176
4. Generator's Phone (312) 679-6400

A. State Manifest Document Number: IN 095527
B. State Generator's ID: [illegible]

5. Transporter 1 Company Name: MR Frank Inc.
6. US EPA ID Number: TVD009506160
C. State Transporter's ID: 0079
D. Transporter's Phone: 312-544-3777

7. Transporter 2 Company Name:
8. US EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address: American Chemical Services
420 S. Colfax Ave
Griffith Ind 46319
10. US EPA ID Number: TWD016360265
G. State Facility's ID: 918089602
H. Facility's Phone: (312) 768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a. Waste Trichloroethylene RQ1000/454 DRM-A UN 1710	002	DM	00110	G	F-002
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: (Flux thinners)

K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

Printed/Typed Name: [illegible]
Signature: [illegible]
Month Day Year: 03 11 87

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Manuel Garcia
Signature: [illegible]
Date: Month Day Year: 03 11 87

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Date: Month Day Year:

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: Harold F. Schmidt
Signature: [illegible]
Month Day Year: 03 X X 87

GENERATOR / TRANSPORTER / FACILITY

IN 095527

EPA Form 8700-22A (Rev. 11-85) UHWM 2/LP2

T.S.D. DETACH AND RETAIN THIS COPY

MRK 2-2045 TSD B

012235

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: I.L.D.0.4.7.0.2.9.7.9.8
Manifest Document No.: 6.2.9.1.9
2. Page 1 of 8
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
WEST INSTRUMENT COMPANY
3860 N. RIVER RD., SCHILLER PARK, ILLINOIS 60176

4. Generator's Phone (312) 678-6400

A. State Manifest Document Number: INA 0162919
B. State Generator's ID:

5. Transporter 1 Company Name: MR. FRANK INC.
6. Use EPA ID Number: I.L.D.0.6.9.5.0.6.1.6.0
C. State Transporter's ID: 0079
D. Transporter's Phone: 312-596-3377

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICES., INC.
420 SOUTH COLFAX AVENUE
GRIFFITH., IN., 46319
10. Use EPA ID Number: I.N.D.0.1.6.3.6.0.2.6.5
G. State Facility's ID:
H. Facility's Phone: (219)-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE TRICHLOROETHYLENE (RQ-1000/454) ORM-A UN 1710., (F002)	0.0.2	D.M	1.0.1.5.0	G	F002
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: MILO R. KOZAK JR.
Signature: Milo R. Kozak Jr.
Date: Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: CARL E. PRUSER
Signature: Carl E. Pruser
Date: Month 0.3 Day 1.7 Year 88

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Date: Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: HARROLD F. Schmidt
Signature: Harrold F. Schmidt
Date: Month 0.2 Day 1.7 Year 88

GENERATOR / TRANSPORTER / FACILITY

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424.8802 or 202/126-2675.

INA 0162919

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

DISTRIBUTION.
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

1-2 [illegible] TSD 4/2/8
2-2 [illegible] TSD 10/14/83

0015074

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: I L D 0 4 7 0 2 9 7 9 8 | Manifest Document No.: 000000
2. Page 1 of 8 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
West Instrument Inc.
3860 N. River Rd., Schiller Park, Illinois 60176

A. State Manifest Document Number: INA 0268000

4. Generator's Phone (312) 678-6400 X 41

B. State Generator's ID: 0312855023

5. Transporter 1 Company Name: Mr. Frank Inc.
6. Use EPA ID Number: I L D 0 6 9 5 0 6 1 6 0
C. State Transporter's ID: 0079
D. Transporter's Phone: (312) 720-0700

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Services
420 S. Colfax Ave.
Griffith, Indiana
10. Use EPA ID Number: I N D 0 1 6 3 6 0 2 6 5
G. State Facility's ID: 9180890002
H. Facility's Phone: (312) 768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. Waste Trichloroethylene ORM A UN1710 (F001 - F002)	0 0 2	D M	0 0 1 1 0	G	F001 F002
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
Trichloroethylene and Oil
F002

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR — Printed/Typed Name: Norbert Jarocki | Signature: [signature] | Date: Month 04 Day 21 Year 89

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: MIGUEL GARCIA | Signature: [signature] | Date: Month 04 Day 21 Year 89
18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: | Signature: | Date: Month . Day . Year .

FACILITY
19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: WHITAKER AHUJA | Signature: [signature] | Date: Month 04 Day 25 Year 89

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY REJECTED 4/28

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0268000

0016521

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. Manifest Document No.: U T D 0 2 6 7 2 4 7 2 4 | 1 2 1 1 P

2. Page 1 of 1

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
West Valley Body Shop
2236 South 2700 West, West Valley City, UT 84119
4. Generator's Phone (801) 972-1889

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: MR. FRANK, INC.

6. US EPA ID Number: I L D 9 8 4 7 7 5 0 4 9

C. State Transporter's ID: 0079

D. Transporter's Phone: 708-720-0700

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Service
420 South Colfax Avenue
Griffith, IN 46319

10. US EPA ID Number: I N D 0 1 6 3 6 0 2 6 5

G. State Facility's ID

H. Facility's Phone: 219-924-4370

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	HM	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. RQ WASTE PAINT RELATED MATERIAL (F003) FLAMMABLE LIQUID NA 1263	X	002	DM	00110	G	F003
b.						
c.						
d.						

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above: G - Gallon

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: [illegible] | Signature: [illegible] | Month Day Year: 11 22 89

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Walter C Klauba | Signature: Walter C. Klauba | Month Day Year: 11 22 89

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: [illegible] | Signature: [illegible] | Month Day Year: 11 27 89

Style F15REV-6 LABELMASTER, Div. of AMERICAN LABELMARK CO., CHICAGO, IL 60646

EPA Form 8700-22 (Rev. 9-88) Previous editions are obsolete

12 NCT 63 X

TSDF COPY

0017895

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

05-01 (152)

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. ILD067464875
Manifest Document No.
2. Page 1 of
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
West-Tronics, Inc.
215 Park Street Bensenville, IL 60106

A. State Manifest Document Number INA 0159974

B. State Generator's ID

4. Generator's Phone (312) 860-3560

5. Transporter 1 Company Name
Landgrebe Motor Transit

6. Use EPA ID Number IND009842824

C. State Transporter's ID

D. Transporter's Phone (219) 462-4181

7. Transporter 2 Company Name

8. Use EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Service
421 S. Colfax Avenue
Griffith, IN 46319-0190

10. Use EPA ID Number IND016360265

G. State Facility's ID

H. Facility's Phone (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I Waste No.
a. 1,1,2 - Trichloro, 1,2,2, - Trifluoroethane ORM-E NA9189	003	DM	00165	1	F001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above
1-Gals

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable International and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR

Printed/Typed Name | Signature | Date Month Day Year

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Date Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Date Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name | Signature | Date Month Day Year

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0159974

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

0015068

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: I.L.D.9.8.2.0.6.8.0.7.4 — Manifest Document No.: [illegible]
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address: WESTELL INC, 101 KENDALL PT DR, OSWEGO IL 60543
4. Generator's Phone (312) 820-1919
A. State Manifest Document Number: INA 0162914
B. State Generator's ID: 193015-0004
C. State Transporter's ID: 0079
D. Transporter's Phone: 312-596-3377
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID: 9180840002
H. Facility's Phone: (312) 768-3400

5. Transporter 1 Company Name: MR Frank INC
6. Use EPA ID Number: I.L.D.0.6.9.5.0.6.1.6.0
7. Transporter 2 Company Name: [illegible]
8. Use EPA ID Number:
9. Designated Facility Name and Site Address: American Chemical Ser, 420 Sur Col Fax Ave, Griffith Ind 46319
10. Use EPA ID Number: 016360265 I.N.D. [illegible]

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. Waste Flammable Liquid N.O.S. 1N1993	004	DM	00220	G	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Jay D. Lansman — Signature: Jay D. Lansman — Date: Month 01 Day 21 Year 88

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: RON BRIDGEWATER — Signature: [illegible] — Date: Month 01 Day 21 Year 88

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: — Signature: — Date: Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: HARROLD F. SCHMIDT — Signature: Harold F. Schmidt — Date: Month 01 Day 27 Year 88

GENERATOR — TRANSPORTER — FACILITY

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424 8802 or 202/426-2675.

INA 0162914

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865 4-20-88 T-50 1/28/88

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

0015077

Division of Land Pollution Control - Manifest
Indiana State Board of Health
P.O. Box 7035
Indianapolis, IN 46207-7035

DO NOT WRITE IN THIS SPACE

Please print or type. (Form designed for use on elite (12-pitch) typewriter) Form Approved OMB No. 2000 0404 Expires 7 31 86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. ILD0396382260 0028 — Manifest Document No.

2. Page 1 of 1

Information in the shaded areas is not required by Federal law

3. Generator's Name: Westell Inc. 7630 Quincy St Willowbrook, IL 60521

4. Generator's Phone: 312-789-0888

A. State Manifest Document Number: IN 103611

B. State Generator's ID: 0431105005

5. Transporter 1 Company Name: Mr. Frank Inc.

6. US EPA ID Number: ILD069506160

C. State Transporter's ID: 0077

D. Transporter's Phone: 312-768-3400

7. Transporter 2 Company Name:

8. US EPA ID Number:

E. State Transporter's ID:

F. Transporter's Phone:

9. Designated Facility Name and Site Address: American Chemical Service Colfax Ave. At The C. & O. Railroad Griffith, Ind. 46319

10. US EPA ID Number: ILD069506160

G. State Facility's ID: 9180790002

H. Facility's Phone: 312-768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. Waste Flammable Liquid NOS UN 1993	006	DM	0330	G	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

Printed/Typed Name: David Shelby — Signature: David Shelby — Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials — Date

Printed/Typed Name: Carl E. [illegible] — Signature: [illegible] — Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials — Date

Printed/Typed Name — Signature — Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.

Printed/Typed Name: Harold F. Schmidt — Signature: [illegible] — Month Day Year: 01 30 92

GENERATOR — TRANSPORTER — FACILITY

IN 103611

EPA Form 8700-22A (Rev. 11-85) UHWM 2/LP2

T.S.D. DETACH AND RETAIN THIS COPY

G 20 YRT 50 P

012240

Division of Land Pollution Control - Manifest
Indiana State Board of Health
P.O. Box 7035
Indianapolis, IN 46207-7035

DO NOT WRITE IN THIS SPACE

Please print or type. (Form designed for use on elite (12-pitch) typewriter) Form Approved OMB No. 2000 0404 Expires 7 31 86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: IL0039638226 — Manifest Document No.: 00024
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law

3. Generator's Name: Westell Inc. 7630 Quincy St Willowbrook, IL 60521
4. Generator's Phone: 312 789-0888
A. State Manifest Document Number: IN 076685
B. State Generator's ID: 0431105005
5. Transporter 1 Company Name: Mr. Frank Inc
6. US EPA ID Number: IL0069506160
C. State Transporter's ID: 0079
D. Transporter's Phone: 312-768-3400
7. Transporter 2 Company Name:
8. US EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:
9. Designated Facility Name and Site Address: American Chemical Service Colfax Ave at The C. & O. Railroad Griffith, Ind. 46319
10. US EPA ID Number: IL0069506160
G. State Facility's ID: 9180890002
H. Facility's Phone: (312) 768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a. Waste Flammable Liquid NOS Flammable Liquid UN1993	006	DM	330	G	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

Printed/Typed Name: Jay D. Lansman — Signature: Jay D. Lansman — Month 01 Day 08 Year 87

17. Transporter 1 Acknowledgement of Receipt of Materials — Date

Printed/Typed Name: Miguel L Garcia — Signature: Miguel Garcia — Month 01 Day 08 Year 87

18. Transporter 2 Acknowledgement of Receipt of Materials — Date

Printed/Typed Name: — Signature: — Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.

Printed/Typed Name: Harold F Schmidt — Signature: Harold F Schmidt — Month 01 Day 08 Year 87

IN 076685

EPA Form 8700-22A (Rev. 11-85) UHWM 2/LP2

T.S.D. DETACH AND RETAIN THIS COPY

MRK 6-204R TSD 4

012239

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0425346

Authorization Number 998471

WESTERN ELECTRIC CO. (Company Name) — HAWTHORNE STATION (Address) — 312 4942685 (Phone Number) — 0310510004 (Generator Number)

CHICAGO (City) — ILL. (State) — 60623 (Zip) — ILD074381427 (EPA Number)

WASTE HAULER(S)

STRAND TRUCKING (Hauler Name) — 13642 S. KENTON CRESTWOOD, ILL. 60445 (Hauler Address) — S.W.H. Registration Number 0024001

Phone Number — ILT000646810 (EPA Number)

Hauler Name — Hauler Address — S.W.H. Registration Number

Phone Number — EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEM. SERVICES (Facility Name) — P.O. BOX 190 (Address) — 91808902 (Site Number)

GRIFFITH (City) — INDIANA (State) — 46319 (Zip) — (312)7683400 (Phone Number) — IND016360265 (EPA Number)

Alternate (Facility Name) — Address — ~~91808902~~ (Site Number)

City — State — Zip — Phone Number — EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ORGANIC SOLVENTS — WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: TRICHLOROETHYLENE — HAZARD CLASS: ORM-A — UN 1710 (UN or NA Number) — F001 (EPA HW Number)

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one) — WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. — QUANTITY OF WASTE DELIVERED: 0041 25 (1 GALLONS 2 CU. YDS. Circle One)

METHOD OF SHIPMENT (Circle One) (DRUMS 75 Number) TANK TRUCK OPEN TRUCK OTHER (Specify) VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION X George Evans (Authorized Signature) DATE: 10-8-81

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) X James Batten (Authorized Signature) DATE: 10/8/81

(2) _____ (Authorized Signature) DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[signature] (Authorized Signature) DATE: 10/8/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 122E T-63 10/22/81 JM

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637 — OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR — PART - 2 IEPA — PART - 3 SITE — PART - 4 HAULER — PART - 5 IEPA — PART 6 - GENERATOR

SITE COPY - PART 3

001929

Division of Land Pollution Control - Manifest
Indiana State Board of Health
P.O. Box 7035
Indianapolis, IN 46207-7035

DO NOT WRITE IN THIS SPACE

Please print or type. (Form designed for use on elite (12-pitch) typewriter) Form Approved OMB No. 2000 0404 Expires 7 31 86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: W I D 0 0 6 0 9 3 1 9 9 — Manifest Document No.: 0 0 0 0 2
2. Page 1 of 1
Information in the shaded areas is not required by Federal law

3. Generator's Name: Western Products
7777 N 73rd Street
Milwaukee, WI 53223
4. Generator's Phone: 414 354-2310

A. State Manifest Document Number: IN 028436
B. State Generator's ID:

5. Transporter 1 Company Name: Chem Central Milwaukee
6. US EPA ID Number: W I D 0 0 0 7 1 3 6 6 9
C. State Transporter's ID:
D. Transporter's Phone: 414-784-2400

7. Transporter 2 Company Name: Mr. Frank, Inc.
8. US EPA ID Number: I L D 0 6 9 5 0 6 1 6 0
E. State Transporter's ID: 0079
F. Transporter's Phone: 800-642-2283

9. Designated Facility Name and Site Address: American Chemical Services
Colfax Ave. P.O. Box 190
Griffith, IN 46319 (Lake County)
10. US EPA ID Number: I N D 0 1 6 3 6 0 2 6 5
G. State Facility's ID: SITE #91808902
H. Facility's Phone: 312-768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a. Waste Flammable Liquids, Nos. WN 1993	0 0 1	D M	0 0 0 5 5	G	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

Printed/Typed Name: John V. Sorensen — Signature: [signature] — Month Day Year: 1 0 0 6 8 7

17. Transporter 1 Acknowledgement of Receipt of Materials — Date
Printed/Typed Name: — Signature: — Month Day Year:

18. Transporter 2 Acknowledgement of Receipt of Materials — Date
Printed/Typed Name: Dave V[illegible] — Signature: [signature] — Month Day Year: 1 0 2 7 8 7

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19
Printed/Typed Name: [illegible] — Signature: [signature] — Month Day Year: 1 1 1 1 D

GENERATOR / TRANSPORTER / FACILITY

IN 028436

EPA Form 8700-22A (Rev 11-85) UHWM 2/LP2

1-204R T-50 11/2/87 gm TSD ~~TRANSPORTER NO. 2~~ DETACH AND RETAIN THIS COPY

012238

Division of Land Pollution Control - Manifest
Indiana State Board of Health
P.O. Box 7035
Indianapolis, IN 46207-7035

DO NOT WRITE IN THIS SPACE

Please print or type. (Form designed for use on elite (12-pitch) typewriter)

Form Approved OMB No. 2000 0404 Expires 7 31 86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. / Manifest Document No.: W I D 0 0 6 0 9 3 1 9 9 0 0 0 0 1

2. Page 1 of: 1

Information in the shaded areas is not required by Federal law

3. Generator's Name: Western Products
7777 North 73rd St.
Milwaukee, WI 53223

4. Generator's Phone (414) 354-2310

A. State Manifest Document Number: IN 028437

B. State Generator's ID:

5. Transporter 1 Company Name: Mr. Frank, Inc.

6. US EPA ID Number: I L D 0 6 9 5 0 6 1 6 0

C. State Transporter's ID: 0079

D. Transporter's Phone: 800-642-2203

7. Transporter 2 Company Name:

8. US EPA ID Number:

E. State Transporter's ID:

F. Transporter's Phone:

9. Designated Facility Name and Site Address: American Chemical Services
Colfax Ave. P.O. Box 190
Griffith, IN 46319 (Lake County)

10. US EPA ID Number: I N D 0 1 6 3 6 0 2 6 5

G. State Facility's ID: SITE #91808902

H. Facility's Phone: (312) 768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I.? Waste No.
a. Waste Flammable Liquids, N.O.S. UN 1993	0 0 2	D M	0 0 1 1 0	G	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

Printed/Typed Name	Signature	Month	Day	Year
John V. Sorensen		0 5	1 5	8 7

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials — Date

Printed/Typed Name	Signature	Month	Day	Year

18. Transporter 2 Acknowledgement of Receipt of Materials — Date

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name	Signature	Month	Day	Year

EPA Form 8700-22A (Rev. 11-85) UHWM 2/LP2

MRL T.S.D. DETACH AND RETAIN THIS COPY 2 - 204750 E

IN 028437

012237

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: W I D 0 0 6 0 9 3 1 9 9
Manifest Document No.: 0 0 0 0 2
2. Page 1 of 7
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Western Products
7777 N. 73rd St.
Milwaukee, WI 53223

A. State Manifest Document Number: INA 0179107
B. State Generator's ID:

4. Generator's Phone (414) 354-2310

5. Transporter 1 Company Name: Chem Central Milwaukee
6. Use EPA ID Number: W I D 0 0 0 0 7 1 3 6 6 9
C. State Transporter's ID:
D. Transporter's Phone: 414-784-2400

7. Transporter 2 Company Name: Mr. Frank, Inc.
8. Use EPA ID Number: I L D 0 6 9 5 0 6 1 6 0
E. State Transporter's ID: 0079
F. Transporter's Phone: 800-642-2283

9. Designated Facility Name and Site Address
American Chemical Services
Colfax Ave. P.O. Box 190
Griffith, IN 46319 (Lake County)
10. Use EPA ID Number: I N D 0 0 6 3 6 0 2 6 5
G. State Facility's ID: SITE #91808902
H. Facility's Phone: 312-768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. Waste Falmmable Liquids, Nos. WN 1993	0 0 2	D M	0 0 1 1 0	G	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR

Printed/Typed Name	Signature	Month	Day	Year
John V. Sorensen	John V. Sorensen	0 4	1 2	8 8

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Donald L Burmeister		04	13	88

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Robert PERKINS	Robert Perkins	04	13	88

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.

Printed/Typed Name	Signature	Month	Day	Year

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0179107

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

REJECTED 4/13

0015075

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: W I D 0 0 6 0 9 3 1 9 9 | Manifest Document No.: 0 0 0 0 2 | 2. Page 1 of 8 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Western Products
7777 N. 73rd St.
Milwaukee, WI 53223

A. State Manifest Document Number: INA 0179108

4. Generator's Phone (414) 354-2310

B. State Generator's ID

5. Transporter 1 Company Name: Mr. Frank, Inc.

6. Use EPA ID Number: I L D 0 6 9 5 0 6 1 6 0

C. State Transporter's ID: 0079

D. Transporter's Phone: 800-642-2283

7. Transporter 2 Company Name

8. Use EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Services
Colfax Ave. P.O. Box 190
Griffith, IN 46319 (Lake County)

10. Use EPA ID Number: I N D 0 1 6 3 6 0 2 6 5

G. State Facility's ID: Site #91808902

H. Facility's Phone: 312-768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. UN Waste Flammable Liquids, Nos. NOS 1993	003	DM	00165	G	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR

Printed/Typed Name	Signature	Month	Day	Year
John V. Sorensen	John V. Sorensen	12	14	88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Walter C Klimko	Walter C Klimko	12	14	88

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name	Signature	Month	Day	Year
Harold F Schmidt	Harold F Schmidt	12	15	88

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0179108

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

204 CT 50 12/16

0015076

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 136491

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Western Publishing Company
2. EPA IDENTIFICATION NO.: WID006094619
3. COMMENTS/SPECIAL INSTRUCTIONS: None
4. P.O. BOX OR STREET ADDRESS: 1220 Mound St.
5. CITY, STATE, ZIP CODE: Racine, WI 53404
6. TELEPHONE NUMBER: (414) - 631-5074

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1, 55-gal. steel	55	Flammable liquid, N.O.S.	Flammable Liquid	UN 1993	1. Solid 3. Mixture 2. Liquid [2]	D001	450
					1. Solid 3. Mixture 2. Liquid [ ]		
					1. Solid 3. Mixture 2. Liquid [ ]		

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): [illegible]
17. DATE SHIPPED M D Y: 2 / 13 / 84

TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD060506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th Street
21. CITY, STATE, ZIP CODE: South Holland, IL 60473
22. TELEPHONE NUMBER: (312) - 596-3377
23. COMMENTS: None

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE: [signature]
25. NAME (Print): C E MILBURN
26. Date Accepted M D Y: 2 / 13 / 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER COMPANY NAME:
28. EPA IDENTIFICATION NO.:
29. AUTHORIZED SIGNATURE:
30. NAME (Print):
31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND016360265
34. P.O. BOX OR STREET ADDRESS: Colfax Avenue at C & O R.R. - P. O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (312) - 768-3400
37. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE: [signature]
39. NAME (Print): Jim Murphy
40. Date Accepted M D Y: 2 / 13 / 84

I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
42. EPA IDENTIFICATION NO.:
43. AUTHORIZED SIGNATURE:
44. NAME (Print):
45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 204 K T-50 GRH
2-17-84

006629

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE *(Form designed for use on elite (12-pitch) typewriter.)* Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: TLD981788219
Manifest Document No.:
2. Page 1 of 1
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address: WESTINGHOUSE AIR BRAKE, 6400 S. STEWART AVE, CHICAGO, IL 60620
A. State Manifest Document Number: INA 0160142
4. Generator's Phone (312) 488-6730
B. State Generator's ID
5. Transporter 1 Company Name: STRAND TRUCKING CO.
6. Use EPA ID Number: ILD000646810
C. State Transporter's ID
D. Transporter's Phone
7. Transporter 2 Company Name
8. Use EPA ID Number
E. State Transporter's ID
F. Transporter's Phone
9. Designated Facility Name and Site Address: AMERICAN CHEMICAL SERVICE, 420 S. COLFAX AVE, GRIFFITH, IN 46319-0190
10. Use EPA ID Number: IND016360265
G. State Facility's ID
H. Facility's Phone

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	Waste No.
a. WASTE 1,1,1 TRICHLOROETHANE, CRM-A UN 2831 HAZARDOUS LIQUID WASTE		DM	1/2	10	
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above: 1 - GALLONS

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name | Signature | Month | Date Day | Year

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: RONALD CHANEY | Signature: Ronald Chaney | Month 1 | Date Day 1 | Year 87

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: STAY STRAND | Signature: Stay Strand | Month 1 | Date Day 1 | Year 87

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: HAROLD F. SCHMIDT | Signature: Harold F. Schmidt | Month 1 | Day 1 | Year 87

GENERATOR / TRANSPORTER / FACILITY

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424 8802 or 202/426-2675.

INA 0160142

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865
22-1ATR T-63 12/9/87

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

012236

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. ILD981788219 | Manifest Document No. | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address: WESTINGHOUSE AIR BRAKE, 8400 S. STEWART AVE, CHICAGO, IL. 60620

A. State Manifest Document Number: INA 0160165

B. State Generator's ID:

4. Generator's Phone: (312) 488-6730

5. Transporter 1 Company Name: STRAND TRUCKING CO | 6. Use EPA ID Number: ILD000646810 | C. State Transporter's ID: | D. Transporter's Phone: 312-385-8440

7. Transporter 2 Company Name: | 8. Use EPA ID Number: | E. State Transporter's ID: | F. Transporter's Phone:

9. Designated Facility Name and Site Address: AMERICAN CHEMICAL SERVICE, 420 S. COLFAX AVE, GRIFFITH IN 46319-0190 | 10. Use EPA ID Number: IND016360265 | G. State Facility's ID: | H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
WASTE 1,1,1-TRICHLOROETHANE ORM A UN-7831	12	DM	660	1	F001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: CHLORINATED SOLVENT WASTE LIQUID

K. Handling Codes for Wastes Listed Above: 1 = GALLONS

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR — Printed/Typed Name: RONALD CHANEY | Signature: | Date Month 11 Day 15 Year 88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials — Printed/Typed Name: RONALD CHANEY | Signature: | Date Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials — Printed/Typed Name: Leonard M Strand | Signature: | Date Month 11 Day 15 Year 88

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted item 19. — Printed/Typed Name: HAROLD F [illegible] | Signature: | Date Month 11 Day 15 Year 88

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0160165

EPA Form 8700-22 (Rev. 9-86) Previous editions are obsolete.
State Form 11065 (12-87) T-63 1/2/88

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

0015070

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: I.L.0.9.8.1.7.8.8.2.1.9
Manifest Document No.:
2. Page 1 of
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address: WESTINGHOUSE AIR BRAKE, 8400 S. STEWART AVE, CHICAGO, IL. 60620
4. Generator's Phone (312) 488-6730
A. State Manifest Document Number: INA 0202751
B. State Generator's ID:
5. Transporter 1 Company Name: STRAND TRUCKING CO.
6. Use EPA ID Number: I.L.A.D.0.0.6.4.6.8.1.0
C. State Transporter's ID:
D. Transporter's Phone: 312-385-8446
7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:
9. Designated Facility Name and Site Address: AMERICAN CHEMICAL SERVICE, 420 S. COLFAX AVE., GRIFFITH, IN. 46319-0190
10. Use EPA ID Number: I.N.D.0.1.6.3.6.0.2.6.5
G. State Facility's ID:
H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE 1,1,1,-TRICHLOROETHANE-DRMA UN-2831	21	DM	1155	1	Fool
b. SABRESLURRY W12.5		DM		1	Dool Fool
c.					
d.					

J. Additional Descriptions for Materials Listed Above: LAYERING CHAMBER AND SLUDGE, CHLORINATED SOLVENT WASTE LIQUID
K. Handling Codes for Wastes Listed Above: 1 = GALLONS

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: RONALD CHANEY
Signature: [signature]
Date: Month 04 Day 27 Year 88

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: THOMAS STRAND
Signature: [signature]
Date: Month 04 Day 27 Year 88

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Date: Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: HARROLD F. Schmidt
Signature: [signature]
Date: Month 04 Day 27 Year 88

GENERATOR / TRANSPORTER / FACILITY

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0202751

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

17-1 AK 963 5/13
4-204KT 20 5/13

0015071

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: ILD981788219
Manifest Document No.:
2. Page 1 of
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address: WESTINGHOUSE AIRBRAKE, 8400 S. STEWART AVE, CHICAGO, IL 60620
4. Generator's Phone (312) 488-6730
A. State Manifest Document Number: INA 0202752
B. State Generator's ID:
C. State Transporter's ID: 0311
D. Transporter's Phone: 312-385-8446
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID:
H. Facility's Phone: 219-924-4370

5. Transporter 1 Company Name: STRAND TRUCKING CO.
6. Use EPA ID Number: ILD000646810
7. Transporter 2 Company Name:
8. Use EPA ID Number:
9. Designated Facility Name and Site Address: AMERICAN CHEMICAL SERVICE, 420 S. COLFAX AVE., GRIFFITH, IN 46319-0190
10. Use EPA ID Number: IND 0163 60265

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE 1,1,1 TRICHLOROETHANE UN-2831 ORM	1.5	D.M	8.25	1	Fool
b. WASTE W12.5 SABRE SLURRY	1.5	D.M	8.25	1	Dool Fool
c.					
d.					

J. Additional Descriptions for Materials Listed Above: CHLORINATED SOLVENT WASTE LIQUID LAPPING COMPOUND
K. Handling Codes for Wastes Listed Above: 1-GAL

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: [illegible] Signature: [illegible] Date: Month 7 Day 7 Year 8

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: [illegible] Signature: [illegible] Date: Month 7 Day 7 Year 8

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: Signature: Date: Month Day Year

19. Discrepancy Indication Space
14B-204TCTSO 9/16 1-204X TSO 10/21/88
1B-204TCTSO 9/16 (TRIL 120)
15-120TCT63 9/20M

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19
Printed/Typed Name: ALVIN WHITAKER Signature: [illegible] Date: Month 7 Day 12 Year 8

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0202752

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

0015072

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: I.L.D.9.8.1.7.8.8.2.1.9 — Manifest Document No.: [illegible]
2. Page 1 of 10 — Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address: WESTINGHOUSE AIR BRAKE, 8400 S. STEWART AVE., CHICAGO, IL 60620 — 00001
4. Generator's Phone: (312) 488-6730

A. State Manifest Document Number: INA 0202753
B. State Generator's ID:
C. State Transporter's ID:
D. Transporter's Phone:
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID:
H. Facility's Phone: 219-924-4370

5. Transporter 1 Company Name: STRAND TRUCKING CO.
6. Use EPA ID Number: I.L.D.0.0.0.6.4.6.8.1.0
7. Transporter 2 Company Name:
8. Use EPA ID Number:
9. Designated Facility Name and Site Address: AMERICAN CHEMICAL SERVICE, 420 S. COLFAX AVE., GRIFFITH, IN. 46319-0190
10. Use EPA ID Number: I.N.0.0.1.6.3.6.0.2.6.5

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE 1.1.1. TRICHLOROETHANE UN-2831 ORMA	0.8	D.m	480	1	Fool
b. WASTE W12.5 SPERE SLURRY UN-2831 ORMF	1.0		550	1	Fool Dool
c.					
d.					

J. Additional Descriptions for Materials Listed Above: CHLORINATED SOLVENT WASTE LIQUID LAPPING COMPOUND
K. Handling Codes for Wastes Listed Above: 1-GAL

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: [illegible] EXNER — Signature: [signature] — Date: Month 12 Day 16 Year 88

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: LEONARD M STRAND — Signature: Leonard M Strand — Date: Month 12 Day 16 Year 88

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: — Signature: — Date: Month Day Year

19. Discrepancy Indication Space: 9B.204TC T50 12/20; 8A-120 TC T63 12/20; 1B-13 GAL 20TR T50 1/31/89

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted item 19.
Printed/Typed Name: WHITAKER A — Signature: [signature] — Date: Month 12 Day 16 Year 88

GENERATOR / TRANSPORTER / FACILITY

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0202753

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

7B PAILS (42 GAL) [illegible] 3/15/89 90/02

0015073

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: ILD981788219
Manifest Document No.: 00002
2. Page 1 of 6
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
WESTINGHOUSE AIR BRAKE
8400 S. STEWART AVE.
CHICAGO, IL 60620
4. Generator's Phone: 312 488-6730

A. State Manifest Document Number: INA 0202754
B. State Generator's ID: 1974775002
C. State Transporter's ID: 0311
D. Transporter's Phone: 312 385-8440
E. State Transporter's ID: 0024
F. Transporter's Phone: 219 924-4370
G. State Facility's ID: 9180890002
H. Facility's Phone: 219-924-4370

5. Transporter 1 Company Name: STRAND TRUCKING CO.
6. Use EPA ID Number: ILD000646810
7. Transporter 2 Company Name:
8. Use EPA ID Number: IND016360265
9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
420 S. COLFAX AVE.
GRIFFITH, IN. 46319-0190
10. Use EPA ID Number: INA016360265

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE 1-1-1 TRICHLOROETHANE UN-2831 ORMA	1.2	D.M	00660	1	F001
b. WASTE W12.5 SABRE SLURRY UN-2831 ORME	1.2	D.M	00660	1	F001 D001
c.					
d.					

J. Additional Descriptions for Materials Listed Above
CHLORINATED SOLVENT WASTE LIQUID
LAPPING COMPOUND

K. Handling Codes for Wastes Listed Above
1-GAL

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable International and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: [illegible]
Signature: [illegible]
Month / Day / Year

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: THOMAS STRAND
Signature: [illegible]
Month / Day / Year: 03 10 89

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Month / Day / Year

19. Discrepancy Indication Space
12A-120TCT63 3/15
9B-120TCT63 3/15
2B-204TCT50 3/15
1B MARINE SHALE 18/16/890/910660

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: Whitaker A
Signature: [illegible]
Month / Day / Year: 03 10 89

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0202754

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

0016520

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: I-L-0-9-8-1-7-8-8-2-1-9
Manifest Document No.: 0-0-0-0-3
2. Page 1 of 8
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
WESTINGHOUSE AIR BRAKE
8400 S. STEWART AVE.
CHICAGO, IL 60620

A. State Manifest Document Number: INA 0202755
B. State Generator's ID:
C. State Transporter's ID:
D. Transporter's Phone:
E. State Transporter's ID: 0311
F. Transporter's Phone: 317-331-8449
G. State Facility's ID:
H. Facility's Phone: 219-924-4370

4. Generator's Phone ( )

5. Transporter 1 Company Name: STRAND TRUCKING CO.
6. Use EPA ID Number: I-L-D-0-0-0-6-4-6-8-1-0

7. Transporter 2 Company Name:
8. Use EPA ID Number:

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
420 S. COLFAX AVE.
GRIFFITH, IN. 46319-0190
10. Use EPA ID Number: I-N-C-C-1-6-3-6-0-2-6-5

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. ~~WASTE 1-1-1 TRICHLOROETHANE~~ ~~UN-2831~~ ~~ORME~~		D-m			F-261
b. WASTE W12.5 SABRE SURRY UN-2831 ORME	0-7-7	D-m	0-1-7-6-5	1	F001 D001
c.					
d.					

J. Additional Descriptions for Materials Listed Above
CHLORINATED SOLVENT WASTE LIQUID
LAPPING COMPOUND

K. Handling Codes for Wastes Listed Above
1 GAL.

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: DON FAITH
Signature: [signature]
Month: 06 Day: 07 Year: 89

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: KEVIN STRAND
Signature: [signature]
Month: 06 Day: 09 Year: 89

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Month: Day: Year:

19. Discrepancy Indication Space: 22-1 ART 63 6/15

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted item 19.
Printed/Typed Name: WHITAKER A
Signature: A Whitaker
Month: 6 Day: 12 Year: 89

GENERATOR / TRANSPORTER / FACILITY

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0202755

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

1 PAIL (6 GAL) ASHGROVE 8/15/89 90103
1 (7 GAL) MARINE SEALE 8/8/89 914152
42 GAL MARINE SEALE 3/6/90 010881

0016518

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: I·L·D·9·8·1·7·8·8·2·1·9
Manifest Document No.: 0·0·0·0·4
2. Page 1 of 8
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
WESTINGHOUSE AIR BRAKE
8400 S. STEWART AVE.
CHICAGO, IL 60620

4. Generator's Phone (312) 488-6730

A. State Manifest Document Number: INA 0202757
B. State Generator's ID: 1974775002

5. Transporter 1 Company Name: STRAND TRUCKING CO.
6. Use EPA ID Number: I·L·D·0·0·0·6·4·6·8·1·0
C. State Transporter's ID: 0311
D. Transporter's Phone: 312-385-8440

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID: 0311
F. Transporter's Phone: 312-331-8440

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
420 S. COLFAX AVE.
GRIFFITH, IN 46319-0110

10. Use EPA ID Number: I·N·0·0·1·6·3·6·0·2·6·5
G. State Facility's ID: 9180890002
H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE W12.5 SABRE SLURRY UN-2831 ORME	0.1.9	D.M	0.1.0.45		F001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: LAPPING COMPOUND
K. Handling Codes for Wastes Listed Above: 1-GAL

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: [illegible] Signature: [illegible] Date: Month 11 Day 20 Year 89

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: LEN STRAND Signature: Len Strand Date: Month 11 Day 20 Year 89

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: Signature: Date: Month Day Year

19. Discrepancy Indication Space
1-204R TSD 4/11/90
1-MARINE SHALE 4/11/90 010882
17-1 PK T63 12/6

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: WHITAKER A Signature: Alvin Whitaker Date: Month 11 Day 21 Year 89

GENERATOR / TRANSPORTER / FACILITY

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day); or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0202757

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSO MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

0016519

STATE OF MICHIGAN

Rev. 3/81

WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS) ☐ Act 136 Waste (OTHER) MI 0029648

001928

IDENTIFICATION

Generator's Name	Primary Transporter's Name	Treatment, Storage or Disposal Facility
WESTINGHOUSE ELECTRIC CORP	VALLEY CITY REFUSE DISPOSAL	AMERICHEM
Site Address	**Transporters Address**	**Facility Address**
4300 36th St. SE GRAND RAPIDS, MI	2640 THORNWOOD, S.W. WYOMING, MI	420 SO. COLFAX AVENUE GRIFFITH, IN 46319
Phone Number	**Phone Number**	**Phone Number**
(616) 969-1050	(616) 538-8499	(219) 924-4370
Generator's Site EPA I.D. Number	**Transporter's EPA I.D. Number**	**Facility Site EPA I.D. Number**
MID083690587	MID095853733	IND016360265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES — WASTE INFORMATION

LOT NO.	U.S. D.O.T. Shipping Name	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container No.	Container Type	Form: Solid	Form: Liquid	Form: Gas	Form: Sludge	Weight or Volume	Units	Hazardous Waste Number
1.	WASTE CEMEMT LIQUID NOS AND WASTE XYLENE MIXTURE	FLAMMABLE LIQUID	UN1133 UN1307	03	31	bbl		X			1705 ~~117610~~	GAL	D001 F003
2.													
3.													
4.													
5.													
6.													

COMMENTS

Include Safety precautions and special handling instructions.

DOT EMERGENCY RESPONSE GUIDE NO. 26

GENERATOR COMPLETES

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature ① Ronald J. VanMoke

Date Shipped MO. DAY YEAR: 09 04 81

TRANSPORTER COMPLETES

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No. No. 1 4213-1

Subsequent Transporter Vehicle I.D. No's

Transporter Signature ② Arnold Dykstra

Subsequent transporter(s) signature(s) ③

Date(s) Received: 09 04 81

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF COMPLETES

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature ④ James Murphy

Facility Site EPA I.D. Number: IND016360265

☑ Accepted ☐ Rejected

Date Received: 09 10 81

Describe any significant discrepancies between manifest and shipment.

To 204 TG 9/4/81 #20 9/9/81 T-50 gm

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM AT 800—294-4706, 24 HOURS PER DAY AND THE NATIONAL RESPONSE CENTER AT 800—424-8802

TSDF COPY

STATE OF MICHIGAN

WASTE DISPOSAL MANIFEST

[XX] Act 64 Waste (HAZARDOUS) [ ] Act 136 Waste (OTHER)

MI 0048067

001927

IDENTIFICATION

Generator's Name	Primary Transporter's Name	Treatment, Storage or Disposal Facility
WESTINGHOUSE ELECTRIC CORP	VALLEY CITY REFUSE DISPOSAL	AMERICHEM
Site Address: 4300 36th ST., S.E. GRAND RAPIDS, MI	Transporters Address: 2640 THORNWOOD, S.W WYOMING, MI	Facility Address: 420 SO. COLFAX AVENUE GRIFFITH, IN 46319
Phone Number: (616) 949-1050	Phone Number: (616) 538-8499	Phone Number: (219) 924-4370
Generator's Site EPA I.D. Number: MID083690537	Transportar's EPA I.D. Number: MID005855373	Facility Site EPA I.D. Number: IND016360265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

WASTE INFORMATION

LOT NO.	U.S. D.O.T. Shipping Name	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container No.	Container Type	Form Solid	Form Liquid	Form Gas	Form Sludge	Weight or Volume	Units	Hazardous Waste Number
1.	WASTE CEMENT	FLAMMABLE LIQUID	NA1133	07	1	bbl		X			55	GAL	D001
2.													
3.													
4.													
5.													
6.													

COMMENTS

Include Safety precautions and special handling instructions.

DOT EMERGENCY RESPONSE GUIDE NO. 26

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature: ① Ronald J. Dr. Molar

Date Shipped MO. DAY YEAR: 09 04 81

TRANSPORTER COMPLETES

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No. No. 1 H-213-1

Subsequent Transporter Vehicle I.D. No's

Transporter Signature: ② [signature]

Date(s) Received: 09 04 81

Subsequent transporter(s) signature(s): ③

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF COMPLETES

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature: ④ James Murray

Facility Site EPA I.D. Number: IND016360265

[X] Accepted [ ] Rejected

Date Received: 09 09 81

Describe any significant discrepancies between manifest and shipment.

#20 9/9/81 JM

TO 204 R 6/1/81 T-50

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM AT 800—294-4706, 24 HOURS PER DAY AND THE NATIONAL RESPONSE CENTER AT 800—424-8802

TSDF COPY

STATE OF MICHIGAN

WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS) ☐ Act 136 Waste (OTHER) MI 0048068

001926

IDENTIFICATION

Generator's Name	Primary Transporter's Name	Treatment, Storage or Disposal Facility
WESTINGHOUSE ELECTRIC CORP	VALLEY CITY REFUSE DISPOSAL	AMERICHEM
Site Address 4300 36th ST., S.E. GRAND RAPIDS, MI	Transporters Address 2640 THORNWOOD, SW WYOMING, MI	Facility Address 420 SO. COLFAX AVENUE GRIFFITH, IN 46319
Phone Number (616) 949-1050	Phone Number (616) 538-8499	Phone Number (219) 924-4370
Generator's Site EPA I.D. Number MID083690537	Transporter's EPA I.D. Number MID005855373	Facility Site EPA I.D. Number IND016360265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES — WASTE INFORMATION

LOT NO.	U.S. D.O.T. Shipping Name	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container No.	Container Type	Form Solid	Form Liquid	Form Gas	Form Sludge	Weight or Volume	Units	Hazardous Waste Number
1.	WASTE LACQUER LIQUID	FLAMMABLE LIQUID	UN1263	07	1	bbl		X			55	GAL	D001
2.													
3.													
4.													
5.													
6.													

COMMENTS

Include Safety precautions and special handling instructions.

DOT EMERGENCY RESPONSE GUIDE NO. 26

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature ① [signature] Date Shipped MO. DAY YEAR 07 04 81

TRANSPORTER COMPLETES

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No. No. 1 H-213-1

Subsequent Transporter Vehicle I.D. No's

Transporter Signature ② [signature] Date(s) Received 09 04 81

Subsequent transporter(s) signature(s) ③

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF COMPLETES

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature ④ [signature]

Facility Site EPA I.D. Number IND016360265

☒ Accepted ☐ Rejected

Date Received 09 09 81

Describe any significant discrepancies between manifest and shipment.

TO #20 9/9/81 T-50 gm
TO 204 9/11/81

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM AT 800—294-4706, 24 HOURS PER DAY AND THE NATIONAL RESPONSE CENTER AT 800—424-8802

TSDF COPY

R 4896
Rev. 3/81

STATE OF MICHIGAN

WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS) ☐ Act 136 Waste (OTHER) MI 0003106

IDENTIFICATION

Generator's Name	Primary Transporter's Name	Treatment, Storage or Disposal Facility
Westinghouse Electric Corp.	Valley City Refuse Disposal, Inc.	American Chemical Service, Inc.
Site Address 4300 36th Street, S.E. Grand Rapids, MI 49508	**Transporters Address** 2650 Thornwood, S.W. Wyoming, MI 49509	**Facility Address** 420 S. Colfax Griffith, IN 46319
Phone Number (616) 949-1050	**Phone Number** (616 538-8499	**Phone Number** (219) 924-4370
Generator's Site EPA I.D. Number MID 083 690 537	**Transporter's EPA I.D. Number** MID 055 855 373	**Facility Site EPA I.D. Number** IND 016 360 265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES — WASTE INFORMATION

LOT NO.	U.S. D.O.T. Shipping Name	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container No.	Container Type	Form: Solid	Form: Liquid	Form: Gas	Form: Sludge	Weight or Volume	Units	Hazardous Waste Number
1.	Waste Methylene Chloride	ORM-A	1593	09	2	Dr		X			110	gal	F002
2.													
3.													
4.													
5.													
6.													

COMMENTS Include Safety precautions and special handling instructions.

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature ① W R Moore — Date Shipped MO. DAY. YEAR: 10 14 82

TRANSPORTER COMPLETES

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No. No. 1 640

Subsequent Transporter Vehicle I.D. No's

Transporter Signature ② Russell Hannigan — Date(s) Received: 10 14 82

Subsequent transporter(s) signature(s) ③

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF COMPLETES

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature ④ [signature] — Facility Site EPA I.D. Number: IND 016 360 265 — ☒ Accepted ☐ Rejected — Date Received: 10 15 82

Describe any significant discrepancies between manifest and shipment.

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM AT 800—294-4706, 24 HOURS PER DAY AND THE NATIONAL RESPONSE CENTER AT 800—424-8802

WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS) ☐ Act 136 Waste (OTHER) MI 0048070

IDENTIFICATION

Generator's Name	Primary Transporter's Name	Treatment, Storage or Disposal Facility
WESTINGHOUSE ELE CORP.	VALLEY CITY REFUSE DISPSAL	AMERICAN
Site Address: 4300 36TH ST. SE. GRANDRAPIDS MICH. 49508	Transporters Address: 2640 THORNWOOD SW. WYOMING MI.	Facility Address: 420 SO. COLFAX AVE. GRIFFITH IN. 46319
Phone Number: (616) 949 1050	Phone Number: (616) 5388499	Phone Number: (219) 924-4370
Generator's Site EPA I.D. Number: MID083690537	Transporter's EPA I.D. Number: MID005855373	Facility Site EPA I.D. Number: IND016360265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES — WASTE INFORMATION

LOT NO.	U.S. D.O.T. Shipping Name	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container No.	Container Type	Form Solid	Form Liquid	Form Gas	Form Sludge	Weight or Volume	Units	Hazardous Waste Number
1.	WASTE CEMENT LIQUID NOS. AND WASTE XYLENE MIXTURE	FLAMMABLE LIQUID	NA1133 UN1307	07	18	DR		X			800	GAL	F003
2.													
3.													
4.													
5.													
6.													

COMMENTS

Include Safety precautions and special handling instructions.

EMERGENCY RESPONSE No 26

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature: ① Richard L. Martin

Date Shipped MO. DAY YEAR: 031582

TRANSPORTER COMPLETES

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No.: No. 1 H 213-1

Subsequent Transporter Vehicle I.D. No's:

Transporter Signature: ② [signature]

Subsequent transporter(s) signature(s): ③

Date(s) Received: 31582

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature: ④ [signature]

Facility Site EPA I.D. Number: IND016360265

7 ☒ Accepted
11 ☒ Rejected

Date Received: 31682

... significant discrepancies between manifest and shipment.

...RE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM AT 800—294-4706, 24 HOURS PER DAY AND THE NATIONAL RESPONSE CENTER AT 800—424-8802

TSDF COPY TO 204 E T-50 50 GRM 3/16/82

003617

STATE OF MICHIGAN

WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS) ☐ Act 136 Waste (OTHER) MI 0048771

IDENTIFICATION

Generator's Name	Primary Transporter's Name	Treatment, Storage or Disposal Facility
WESTINGHOUSE ELE. CORP.	Valley City Refuse Disp.	American Chemical Service
Site Address 4300 36TH ST. SE GRANDRAPIDS MICHIGAN 49508	Transporters Address 2640 Thornwood SW. Wyoming, Mi 49509	Facility Address 420 S. Colfax ave. Griffith, IND 46319
Phone Number (616) 949 1050	Phone Number (616) 538-8499	Phone Number (219) 924-4370
Generator's Site EPA I.D. Number MID083690537	Transporter's EPA I.D. Number MID005855373	Facility Site EPA I.D. Number IND016360265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES — WASTE INFORMATION

LOT NO.	U.S. D.O.T. Shipping Name	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container No.	Container Type	Form Solid	Form Liquid	Form Gas	Form Sludge	Weight or Volume	Units	Hazardous Waste Number
1.	WASTE CEMENT LIQUID NOS AND WASTE XYLENE MIXTURE	FLAMMABLE LIQUID	NA1133 UN1307	7		DR		X			1000	GAL	F003
2.	WASTE CEMENT LIQUID NOS	FLAMMABLE LIQUID	NA1133	7		DR		X			150	GAL	F003
3.													
4.													
5.													
6.													

COMMENTS

Include Safety precautions and special handling instructions.

EMERGENCY RESPONSE GUIDE NO. 26

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature ① Richard S Martin

Date Shipped MO. DAY YEAR 03 08 82

TRANSPORTER COMPLETES

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No. No. 1 H213-1

Subsequent Transporter Vehicle I.D. No's

Transporter Signature ② [signature]

Date(s) Received 03 08 82

Subsequent transporter(s) signature(s) ③

If the shipment cannot be deliverad, describe the reasons for non-delivery.

TSDF COMPLETES

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature ④ [signature]

Facility Site EPA I.D. Number IND016360265

17 ☒ Accepted 15 ☒ Rejected

Data Received 3 5 82

Describe any significant discrepancies between manifest and shipment.

17 DRUMS ACCEPTABLE — 15 REJECTED @ SITE

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM AT 800—294-4706, 24 HOURS PER DAY AND THE NATIONAL RESPONSE CENTER AT 800—424-8802

(17) TO204 T-50 GRM 3/9/82 TSDF COPY

003610

STATE OF MICHIGAN

WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS) ☐ Act 136 Waste (OTHER)

MI 0050412

R 4896 Rev. 3/81

IDENTIFICATION

Generator's Name	Primary Transporter's Name	Treatment, Storage or Disposal Facility
Westinghouse Electric Corp.	Valley City Refuse Disp	American Chemical Serv.
Site Address	**Transporters Address**	**Facility Address**
4300 36th St. SE Grand Rapids, MI 49508	2650 Thornwood SW Wyoming MI 49509	426 S. Colfax Griffith, Ind. 46319
Phone Number	**Phone Number**	**Phone Number**
616) 949-1050	(616) 538-8499.	(219) 924-4370
Generator's Site EPA I.D. Number	**Transporter's EPA I.D. Number**	**Facility Site EPA I.D. Number**
MIDD83690537	MID055855373	IND016360265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

WASTE INFORMATION (GENERATOR COMPLETES)

LOT NO.	U.S. D.O.T. Shipping Name	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container No.	Container Type	Form: Solid	Form: Liquid	Form: Gas	Form: Sludge	Weight or Volume	Units	Hazardous Waste Number
1.	Waste Paint Liquid Lacquer	Flamable Liquid	1263	08	1	DR		X			55	Gals	D001
2.	Waste Paint Compound Thinning	Combustible	1142	01	1	DR		X			55	Gals	D001
3.	Hazardous Waste Liquid NOS (FREON)	ORM-E	9189	15	1	DR		X			55	Gals	F002
4.	Waste 111 Trichloroethane	ORM-A	2831	13	2	DR		X			110	Gals	F002
5.													
6.													

COMMENTS Include Safety precautions and special handling instructions.

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature ① Steve Hall — Date Shipped MO. DAY. YEAR: 02 07 84

TRANSPORTER COMPLETES

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No. 1 4830910 — Transporter Signature ② Jack Ruter — Date(s) Received 02 07 84

Subsequent Transporter Vehicle I.D. No's — Subsequent transporter(s) signature(s) ③

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF COMPLETES

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature ④ Kathy L — ☒ Accepted ☐ Rejected — Date Received 02 09 84

Facility Site EPA I.D. Number IND 063602 65

Describe any significant discrepancies between manifest and shipment.

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM AT 800—294-4706, 24 HOURS PER DAY AND THE NATIONAL RESPONSE CENTER AT 800—424-8802

1299000

2 - [illegible] - T-120 RT-636 RM

DNR

MICHIGAN DEPARTMENT OF NATURAL RESOURCES

DO NOT WRITE IN THIS SPACE
ATT. ☐ DIS. ☐ REJ. ☐

Required under authority of Act 64, P.A. 1979, as amended and Act 136, P.A. 1969.

Failure to file is punishable under section 299.548 MCL or Section 10 of Act 136, P.A. 1969.

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved OMB No 2000-0404 Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MID083690537 Manifest Document No. 79838

2. Page 1 of 1

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Westinghouse
4300 36th Street, S.E., Grand Rapids, MI 49508

4. Generator's Phone (616) 949-1050

A. State Manifest Document Number MI 0579838

B. State Generator's ID

5. Transporter 1 Company Name: Valley City Refuse Disposal, Inc.

6. US EPA ID Number: MID055855373

C. State Transporter's ID

D. Transporter's Phone (616) 538-8499

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Service, Inc.
420 S. Colfax, P.O. Box 190
Griffith, IN 46319

10. US EPA ID Number: IND016360265

G. State Facility's ID

H. Facility's Phone (219) 924-4370

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID NUMBER).	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.	N/H
a.	X Paint Related Material Combustible Liquid UN1263	5	DM	275	G	D001	H
b.							
c.							
d.							

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable International and national governmental regulations, including applicable state regulations.

Printed/Typed Name: Steve Hendorf — Signature: Steve Hendorf — Date: Month Day Year 05 07 85

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Earl W. Coons — Signature: Earl W. Coons — Date: Month Day Year 05 07 85

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name — Signature — Date: Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: G R MURPHY — Signature — Date: Month Day Year 05 09 85

GENERATOR

TRANSPORTER

FACILITY

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOURS PER DAY.

EPA Form 8700-22 (3-84)

TSDF COPY

204 K T-50

PR 5110 Rev. 7/84

009194

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0361875

Authorization Number 991111

WESTINGHOUSE ELECTRIC CORP. (Company Name) | 2211 WEST PERSHING ROAD (Address)
CHICAGO (City) | IL (State) | 60609 (Zip) | ATTN: E. CHAPPELLE

031 6000 6 77 G — Generator Number

WASTE HAULER(S)

LANDGREBE FREIGHT
c/o AMERICAN CHEMICAL SERVICE (Hauler Name) | 420 S. COLFAX, GRIFFITH, IN, 46319 (Hauler Address) | S.W.H. Registration Number

Hauler Name | Hauler Address | S.W.H. Registration Number PV

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

2
AMERICAN CHEMICAL SERVICE (Facility Name) | 420 S. COLFAX (Address) | 918 08 902 Site Number
GRIFFITH (City) | IN 9990 2201 (State) | 46319 (Zip) | IND 016360765

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: NU-TRICHLOROETHANE 70% 02 20
WASTE OIL 25%

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: (6) 55 GAL. DRUMS
HAZARD CLASS: CLASS 6 9
WEIGHT FOR D.O.T. USE: 3000 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: (6) 55 GAL DRUMS
(GALLONS) 2 CU. YDS. (Circle One) 330

METHOD OF SHIPMENT (Circle One) (DRUMS) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: _____ (Authorized Signature) F001

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) _____ (Authorized Signature) DATE: 12/3/20

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) DATE: 12/11/20

COMMENTS OR SPECIAL INSTRUCTIONS: Unloaded on dock

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424 8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

0000263

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

Is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER: 23915

TO:	FROM:
T/S/D FACILITY American Chemical Service, Inc.	Generator Wheel Horse Products
E.P.A. ID Code No. IND 016360265	E.P.A. ID Code No. IND 0054877658
Address 420 S. Colfax Ave., P.O. Box 190	Address 515 West Ireland Road
Destination Griffith, IN. 46319	Origin South Bend, IN. 46680
Phone 219-924-4370	Phone 219-291-3112

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
30 Drums	Solvent N.O.S.		1993	D 001		1650 gal.

PLACARDS REQUIRED

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding $_____ Per _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement.
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of Consignor)

FREIGHT CHARGES: PREPAID ☐ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY American Chemical Service, Inc.
E.P.A. ID Code No. IND 016360265
Address 420 S. Colfax Ave., P.O. Box 190
Destination Griffith, Indiana 46319

EMERGENCY RESPONSE INFORMATION

CONTACT Name Ronald K. Klein
Phone 219-291-3112
National Response Center 1-800-424-8802
In D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date / / /

TRANSPORTER #1 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____
This is to certify acceptance of the hazardous waste shipment.
Transporter No. 1 Signature _____ Date _____

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____
This is to certify acceptance of the hazardous waste shipment.
Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY
This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.
T/S/D FACILITY Signature _____ Date / / /

T/S/D F COPY 123ET-63

009193

HAZARDOUS WASTE

HAZARDOUS WASTE

HAZARDOUS WASTE MANIFEST

23916
MANIFEST DOCUMENT NUMBER

[illegible]
SHIPPER NUMBER

American Chemical Service, Inc.
420 S. Colfax Ave. P.O. Box 190
Griffith, IN. 46319 219-924-4370
NAME OF CARRIER (SCAC)

IND016360265
CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND0054877658	Wheel Horse Products Inc. 515 West Ireland Road South Bend, Indiana 46680 219-291-3112	
TRANSPORTER # 1	IND009842924	LANDGRBE MTR TRNSPT VALPARAISO IN	3/20/86
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	AMERICAN CHEMICAL SERVICE INC GRIFFITH INDIANA 46319	3/21/86
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY			

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
36 Drums		D001	Solvent N.O.S.	1993				1980 Gal.		

SPECIAL HANDLING INSTRUCTIONS

If an RQ commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED
Yes ☑ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☑ COLLECT ☐ $

TOTAL CHARGES: $

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding.
$ _____ per _____

"If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."
_____ Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges
_____ (Signature of Consignor)

FREIGHT CHARGES
FREIGHT PREPAID except when box at right is checked ☐ Check box if charges are to be collect

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

[illegible]
GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

[illegible]
TRANSPORTER #1 SIGNATURE & DATE

[illegible]
TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

[illegible]
TSDF SIGNATURE DATE

5

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TSDF COPY 122RT63 011620

Division of Land Pollution Control - Manifest
Indiana State Board of Health
P.O. Box 7035
Indianapolis, IN 46207-7035

DO NOT WRITE IN THIS SPACE

Please print or type. (Form designed for use on elite (12-pitch) typewriter) Form Approved OMB No. 2000 0404 Expires 7 31 86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: IND005487765 Manifest Document No.: 00001

2. Page 1 of

Information in the shaded areas is not required by Federal law

3. Generator's Name: WHEEL HORSE PRODUCTS

A. State Manifest Document Number: IN 027330

4. Generator's Phone (217) 291-3112

B. State Generator's ID: IND 005487765 8

5. Transporter 1 Company Name: LANDGREBE MOTOR TRANSP.

6. US EPA ID Number: IND007842824

C. State Transporter's ID

D. Transporter's Phone: 287-0402

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address: AMERICAN CHEMICAL SERVICES, INC. 420 S COLFAX AVE P.O. BOX 170 GRIFFITH, IN

10. US EPA ID Number: IND016360265

G. State Facility's ID: IND 016360265

H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
~~SOLVENT N.O.S.~~					
a. SOLVENT N.O.S. D001	024	DM	840	G	D001
b. OIL USED	004	DM	220	G	D001
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, markad, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

Printed/Typed Name: RONALD K. KLEIN — Signature: Ronald K. Klein — Month 09 Day 02 Year 86

17. Transporter 1 Acknowledgement of Receipt of Materials — Date

Printed/Typed Name: LANDGREBE MOTOR TRANSPORT — Signature: [signature] (18) — Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials — Date

Printed/Typed Name — Signature — Month Day Year

19. Discrapancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19

Printed/Typed Name — Signature — Month Day Year

GENERATOR / TRANSPORTER / FACILITY

IN 027330

EPA Form 8700-22A (Rev 11-85) UHWM 2/LP2

T.S.D. DETACH AND RETAIN THIS COPY

(4) 204E 750
(26) 121E 063

011621

Division of Land Pollution Control - Manifest
Indiana State Board of Health
P.O. Box 7035
Indianapolis, IN 46207-7035

DO NOT WRITE IN THIS SPACE

Please print or type. (Form designed for use on elite (12-pitch) typewriter) * Form Approved OMB No. 2000 0404 Expires 7 31 86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. | Manifest Document No.: IWDP5717F5E

2. Page 1 of | Information in the shaded areas is not required by Federal law

3. Generator's Name: WHITE HORSE PRODUCTS
NW. WEST LAFAYETTE RD, SOUTH BEND, IN 46614
4. Generator's Phone (219) 271-3112

A. State Manifest Document Number: IN 027329
B. State Generator's ID: IND005777168

5. Transporter 1 Company Name: STRAND TRUCK CO. | 6. US EPA ID Number: ILD0509648
C. State Transporter's ID:
D. Transporter's Phone: 312-376-8810

7. Transporter 2 Company Name | 8. US EPA ID Number
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address: AMERICAN CHEMICAL SERVICES, INC.
420 E. COLFAX HWY. P.O. BOX 170
GRIFFITH, IN | 10. US EPA ID Number: INDO16316215
G. State Facility's ID: IND 016316215
H. Facility's Phone: 219-972-0480

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a. PAINT D001	(RV)	DM	11215	G	D001
b. OIL	12	DM	11110	G	D001
c.	11	DM	11115	T	D001
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

GENERATOR

Printed/Typed Name: RONALD E. KLEIN | Signature | Month 11 Day 21 Year 87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: [illegible] | Signature | Date: Month 11 Day 21 Year 87

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: RONALD E. SCHMIDT | Signature | Month 11 Day 21 Year 87

IN 027329

EPA Form 8700-22A (Rev. 11-85)

UHWM 2/LP2

T.S.D. DETACH AND RETAIN THIS COPY

GM 23-123R - T63-B
23-204R TSU 12

012234

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.
I N D 0 0 5 4 7 7 6 5 8	0 0 0 0 2		

3. Generator's Name and Mailing Address
Wheel Horse Products, Inc.
515 West Ireland Road
South Bend, Indiana 46680
4. Generator's Phone ( ) 219-291-3112

A. State Manifest Document Number: INA 0303394
B. State Generator's ID: IND 005477658

5. Transporter 1 Company Name: Landgrebe
6. Use EPA ID Number: I N D 0 0 7 8 4 2 8 2 4
C. State Transporter's ID: IND007842824
D. Transporter's Phone: 219-462-4181

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Services, Inc.
420 South Colfax Avenue
Griffith, Indiana 46419
10. Use EPA ID Number: I N D 0 1 6 3 6 0 2 6 5
G. State Facility's ID: IND 016360265
H. Facility's Phone: (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. RQ, Waste Flammable Liquid, N.O.S., UN 1993	23 ~~2-4~~	D.R	1320	G	F003 F005
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above: F003 F005

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name	Signature	Date Month	Day	Year
Al Shoemaker				

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year
Landgrebe Alvin Sult			5	89

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.

Printed/Typed Name	Signature	Month	Day
Whitaker Alvin		5	4 89

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0303394

0016517

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I N D 0 0 5 4 7 7 6 5 8 | Manifest Document No. 0 0 0 0 0 1 | 2. Page 1 of 1 | Information in the shaded areas not required by Federal law. b items D, F, H and I are required State law.

3. Generator's Name and Mailing Address
Wheel Horse Products
515 West Ireland Road
South Bend, Indiana 46680 219-291-3112

4. Generator's Phone ( )

A. State Manifest Document Number: INA 0303399

B. State Generator's ID: IND 005477658

5. Transporter 1 Company Name: Landgrebe | 6. Use EPA ID Number: I N D 0 0 7 8 4 2 8 2 4

C. State Transporter's ID: IND007842824

D. Transporter's Phone: 219-462-4181

7. Transporter 2 Company Name | 8. Use EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Services
420 South Colfax Avenue
Griffith, Indiana 46419

10. Use EPA ID Number: I N D 0 1 6 3 6 0 2 6 5

G. State Facility's ID: IND 016360265

H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. RQ, Waste Flammable Liquid, N.O.S., (Xylene) UN 1993	30	DM	1650	G	F003 F005
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I hav determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to m which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good fai effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Al Shoemaker | Signature | Month Day Yea

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: John Swoveland | Signature: John Swoveland | Date: 03 05 90

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Yea

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name | Signature | Month Day Year: 3-9-90

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY

123C-63 3/4

0018134

Division of Land Pollution Control - Manifest
Indiana State Board of Health
P.O. Box 7035
Indianapolis, IN 46207-7035

DO NOT WRITE IN THIS SPACE

Please print or type. (Form designed for use on elite (12-pitch) typewriter)

Form Approved OMB No. 2000 0404 Expires 7 31 86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. ILD005162052 — Manifest Document No.

2. Page 1 of — Information in the shaded areas is not required by Federal law

3. Generator's Name: Whirlpool Kitchens, Inc. - St. Charles Div.
1611 E. Main Street
St. Charles, IL 60174

4. Generator's Phone: 312 584-3800

A. State Manifest Document Number: IN 093006

B. State Generator's ID

5. Transporter 1 Company Name: Strand Trucking

6. US EPA ID Number: ILD006468100

C. State Transporter's ID

D. Transporter's Phone: 312/385-8440

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address: American Chemical Service
420 S. Colfax Ave.
Griffith, IN.. 46319

10. US EPA ID Number: IND016360265

G. State Facility's ID

H. Facility's Phone

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. Waste Flamable Liquid N.O.S. UN 1993	1	DM	1	Gal	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15 Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

Printed/Typed Name: C.F. Getz — Signature — Month/Day/Year: 12/12/17

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials — Printed/Typed Name — Signature — Date: Month/Day/Year: 12/12/17

18 Transporter 2 Acknowledgement of Receipt of Materials — Printed/Typed Name — Signature — Date: Month/Day/Year

FACILITY

19 Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.

Printed/Typed Name — Signature — Month/Day/Year: 12/12/17

IN 093006

EPA Form 8700-22A (Rev. 11-85)

T.S.D. DETACH AND RETAIN THIS COPY

MAK

31-20601 6010

(HWM 24LPE)

Division of Land Pollution Control - Manifest
Indiana State Board of Health
P.O. Box 7035
Indianapolis, IN 46207-7035

DO NOT WRITE IN THIS SPACE

Please print or type. (Form designed for use on elite (12-pitch) typewriter)

Form Approved OMB No. 2000 0404 Expires 7 31 86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. | Manifest Document No.: ILD005162052

2. Page 1 of | Information in the shaded areas is not required by Federal law

3. Generator's Name: Whirlpool Kitchens, Inc. - St. Charles Div.
1611 E. Main Street
4. Generator's Phone: St. Charles, IL 60174 (312) 584-3800

A. State Manifest Document Number: IN 093007

B. State Generator's ID: 08943300111

5. Transporter 1 Company Name: Mr. Frank | 6. US EPA ID Number: ILD069506160 | C. State Transporter's ID: 0071

7. Transporter 2 Company Name | 8. US EPA ID Number | D. Transporter's Phone: 312/596-3377 | E. State Transporter's ID | F. Transporter's Phone

9. Designated Facility Name and Site Address: American Chemical Service
420 S. Colfax Ave.
Griffith, IN 46319 | 10. US EPA ID Number: IND016360265 | G. State Facility's ID | H. Facility's Phone

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. Waste Flammable Liquid, N.O.S. UN 1993	001	~~D M~~	01500	Gal	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15 Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

Printed/Typed Name: C.F. Getz | Signature | Month 12 Day 15 Year 87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: KEN WHITE | Signature | Date: Month 12 Day 15 Year 87

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Date: Month Day Year

FACILITY

19 Discrepancy Indication Space

20 Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted item 19.

Printed/Typed Name: FDUNFEE | Signature | Month 12 Day 18 Year 87

EPA Form 8700-22A (Rev. 11-85) UHWM 2/LP2

T.S.D. DETACH AND RETAIN THIS COPY 210R TSO 4

011619

IN 093007

Division of Land Pollution Control - Manifest
Indiana State Board of Health
P.O. Box 7035
Indianapolis, IN 46207-7035

DO NOT WRITE IN THIS SPACE

Please print or type. (Form designed for use on elite (12-pitch) typewriter) Form Approved OMB No. 2000 0404 Expires 7 31 86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: ILD005162052
Manifest Document No.:
2. Page 1 of 1
Information in the shaded areas is not required by Federal law

3. Generator's Name: Whirlpool Kitchens, Inc.-St.Charles
1611 E. Main Street
St. Charles, IL 60174
4. Generator's Phone: (312)584-3800

A. State Manifest Document Number: IN 100803
B. State Generator's ID: 0894830011
C. State Transporter's ID: 1079
D. Transporter's Phone: 312-596-3377
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID: 0918089-0002
H. Facility's Phone: (219) 924-4370

5. Transporter 1 Company Name: Mr. Frank, Inc.
6. US EPA ID Number: ILD069506160
7. Transporter 2 Company Name:
8. US EPA ID Number:
9. Designated Facility Name and Site Address: American Chemical Service
420 S. Colfax Ave.
Griffith, IN. 46319
10. US EPA ID Number: IND016360265

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a. Waste Flammable Liquid N.O.S. UN 1993	001	DM	01200	Gal	D001
b.					
c.					
d.					

1200 Gal.

J. Additional Descriptions for Materials Listed Above

Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

Printed/Typed Name: C.F. Getz
Signature: [signature]
Month Day Year: 11 2 87

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: [illegible]
Signature: [signature]
Month Day Year: 11 2 87

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Month Day Year:

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: F DUNFEE
Signature: F Dunfee
Month Day Year: 11 2 87

GENERATOR / TRANSPORTER / FACILITY

IN 100803

EPA Form 8700-22A (Rev. 11-85) UHWM 2/LP2

T.S.D. DETACH AND RETAIN THIS COPY

212 RT 50

012233

Division of Land Pollution Control - Manifest
Indiana State Board of Health
P.O. Box 7035
Indianapolis, IN 46207-7035

DO NOT WRITE IN THIS SPACE

Please print or type. (Form designed for use on elite (12-pitch) typewriter)

Form Approved OMB No. 2000 0404 Expires 7 31 86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. ILD005162052 | Manifest Document No. | 2. Page 1 of | Information in the shaded areas is not required by Federal law

3. Generator's Name: Whirlpool Kitchens, Inc. - St. Charles Division
1611 E. Main Street
St. Charles, IL 60174 (312) 584-3800

A. State Manifest Document Number: IN100802

B. State Generator's ID: 0894830011

5. Transporter 1 Company Name: Mr. Frank | 6. US EPA ID Number: ILD069506160 | C. State Transporter's ID: 0079 | D. Transporter's Phone: 312/596-3377

7. Transporter 2 Company Name | 8. US EPA ID Number | E. State Transporter's ID | F. Transporter's Phone

9. Designated Facility Name and Site Address: American Chemical Service
420 S. Colfax Ave.
Griffith, IN 46319 | 10. US EPA ID Number: IND016360265 | G. State Facility's ID: 9180890002 | H. Facility's Phone: (219) 768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a. Flammable Liquid N.O.S. UN 1993	001	DT	00200	Gal	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the presents and future threat to human health and the environment.

GENERATOR

Printed/Typed Name: C.F. Getz | Signature | Month 10 | Day 14 | Year 87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: RICH WHITE | Signature | Month 10 | Day 14 | Year 87 | Date

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Month | Day | Year | Date

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted item 19.

Printed/Typed Name: F DUNFEE | Signature: F Dunfee | Month 10 | Day 14 87

IN 100802

EPA Form 8700-22A (Rev. 11-85) UHWM 2/LP2

gm

T.S.D. DETACH AND RETAIN THIS COPY

012232

Division of Land Pollution Control - Manifest
Indiana State Board of Health
P.O. Box 7035
Indianapolis, IN 46207-7035

DO NOT WRITE IN THIS SPACE

Please print or type. (Form designed for use on elite (12-pitch) typewriter)

Form Approved OMB No. 2000 0404 Expires 7 31 86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. / Manifest Document No: ILD005162052

2. Page 1 of

Information in the shaded areas is not required by Federal law

3. Generator's Name: Whirlpool Kitchens, Inc. - St. Charles Divs.

4. Generator's Address: 1611 E. Main Street, St. Charles, IL 60174 (312) 584-3800

A. State Manifest Document Number: IN 100801

B. State Generator's ID: 0894830011

5. Transporter 1 Company Name: Mr. Frank

6. US EPA ID Number: ILD069506160

C. State Transporter's ID: 0079

D. Transporter's Phone: 312/596-3377

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address: American Chemical Service, 420 S. Colfax Ave., Griffith, IN 46319

10. US EPA ID Number: IND016350265

G. State Facility's ID: 91808900002

H. Facility's Phone: 219/768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
GENERATOR a. Flammable Liquid N.O.S. UN 1993	001	TT	1155	Gal	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

Printed/Typed Name	Signature	Month	Day	Year
C.F. Getz		04	16	87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date: Month	Day	Year
GARY DAVEY		04	17	87

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date: Month	Day	Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name	Signature	Month	Day	Year
T DUNFEE	T Dunfee			04 15 87

IN 100801

EPA Form 8700-22A (Rev. 11-85) UHWM 2/LP2

2 NRTSOM

T.S.D. DETACH AND RETAIN THIS COPY

012231

Division of Land Pollution Control - Manifest
Indiana State Board of Health
P.O. Box 7035
Indianapolis, IN 46207-7035

DO NOT WRITE IN THIS SPACE

Please print or type. (Form designed for use on elite (12-pitch) typewriter) Form Approved OMB No. 2000 0404 Expires 7 31 86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: ILD005162052
Manifest Document No.:
2. Page 1 of 1
Information in the shadad areas is not required by Federal law

3. Generator's Name: Whirlpool Kitchens, Inc. - St. Charles Div.
1611 E. Main Street
St. Charles, IL 60174
Generator's Phone: (312) 584-3800

A. State Manifest Document Number: IN 100800
B. State Generator's ID: 0894830011

5. Transporter 1 Company Name: Mr. Frank
6. US EPA ID Number: ILD069506160
C. State Transporter's ID: 0079
D. Transporter's Phone: 312/596-3377

7. Transporter 2 Company Name:
8. US EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address: American Chemical Service
420 S. Colfax Ave.
Griffith, IN 46319
10. US EPA ID Number: IND016360265
G. State Facility's ID: 91808900002
H. Facility's Phone: 219/768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a. WASTE Flammable Liquid N.O.S. ~~N.O.S.~~ UN 1993	001	TT	1250	Gal	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

Printed/Typed Name: C.F. Getz
Signature: [signature]
Month Day Year: 09 / 10 / 87

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JOE WEBER
Signature: [signature]
Date: 09 / 10 / 87

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Date: Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: DUNFEE
Signature: [signature]
Month Day Year: 08 / 12 / 87

IN 100800

EPA Form 8700-22A (Rev. 11-85) UHWM 2/LP2

T.S.D. DETACH AND RETAIN THIS COPY

212R TSD

012230

Division of Land Pollution Control - Manifest
Indiana State Board of Health
P.O. Box 7035
Indianapolis, IN 46207-7035

DO NOT WRITE IN THIS SPACE

Please print or type. (Form designed for use on elite (12-pitch) typewriter)

Form Approved OMB No. 2000 0404 Expires 7 31 86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I L D0 05 1 62 0 52 — Manifest Document No. 6 — 2. Page 1 of 1 — Information in the shaded areas is not required by Federal law

3. Generator's Name
WHIRLPOOL KITCHENS, INC./ST. CHAS. DIV.
1611 EAST MAIN STREET
ST. CHARLES, ILLINOIS 60174

4. Generator's Phone 312-584-3800

A. State Manifest Document Number IN 100799

B. State Generator's ID 0894030011

C. State Transporter's ID 0079

D. Transporter's Phone 312-596-3377

E. State Transporter's ID

F. Transporter's Phone

5. Transporter 1 Company Name MR. FRANK — 6. US EPA ID Number I L D0 695 760 160

7. Transporter 2 Company Name — 8. US EPA ID Number

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
420 SOUTH COLFAX AVENUE
GRIFFITH, INDIANA 46319 IND016360265

10. US EPA ID Number

G. State Facility's ID 9180890002

H. Facility's Phone 219-768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE FLAMMABLE LIQUID N.O.S. UN 1993	001	TT	500	GAL	D001
b.					
c.					
d.					

1500 Gal

J. Additional Descriptions for Materials Listed Above — K.

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

Printed/Typed Name C. F. GETZ — Signature — Month 06 Day 12 Year 87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name JOSEPH L KOENIG — Signature Joseph S Koenig — Date Month 6 Day 12 Year 87

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Date Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in 19
Printed/Typed Name E DUNFEE — Signature T Dunfee — Month 06 Day 12 Year 87

IN 100799

EPA Form 8700-22A (Rev. 11-85) — UHWM 2/LP2

all B
210RTSO

T.S.D. DETACH AND RETAIN THIS COPY

012224

Division of Land Pollution Control - Manifest
Indiana State Board of Health
P.O. Box 7035
Indianapolis, IN 46207-7035

DO NOT WRITE IN THIS SPACE

Please print or type. (Form designed for use on elite (12-pitch) typewriter)

Form Approved OMB No. 2000 0404 Expires 7 31 86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. IL D 9 05 16 2 05 2 — Manifest Document No. 5

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law

3. Generator's Name WHIRLPOOL KITS. INC./ST. CHAS. DIV.
1611 EAST MAIN STREET
ST. CHARLES, ILLINOIS 60174

A. State Manifest Document Number IN 100798

4. Generator's Phone

B. State Generator's ID 089483001

5. Transporter 1 Company Name MR. FRANK — 6. US EPA ID Number I L D 0 6 9 5 0 6 1 6 0

C. State Transporter's ID 0079

D. Transporter's Phone 312-596-3377

7. Transporter 2 Company Name — 8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address AMERICAN CHEMICAL SERVICE
420 S. COLFAX AVENUE
GRIFFITH, INDIANA 46319 I N D 1 6 3 6 0 2 6 5 — 10. US EPA ID Number

G. State Facility's ID 9180890002

H. Facility's Phone 219-768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a. WASTE FLAMMABLE LIQUID N.O.S. UN 1993	001	TT	1300	GAL.	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

1300

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully an... nd are classified, packed, marked, and labeled, and are in all respects in proper condition for transport b... utional government regulations.

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

GENERATOR

Printed/Typed Name C. F. GETZ — Signature — Month 0 4 Day 1 5 Year 8 7

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials — Date

Printed/Typed Name RICH WHITE — Signature — Month 0 4 Day 1 5 Year 8 7

18. Transporter 2 Acknowledgement of Receipt of Materials — Date

Printed/Typed Name — Signature — Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted item 19.

Printed/Typed Name EDWIFEE — Signature — Month 04 Day 15 Year 87

IN 100798

EPA Form 8700-22A (Rev. 11-85) UHWM 2/LP2

T.S.D. DETACH AND RETAIN THIS COPY

212RT50 B
012220

Division of Land Pollution Control - Manifest
Indiana State Board of Health
P.O. Box 7035
Indianapolis, IN 46207-7035

DO NOT WRITE IN THIS SPACE

Please print or type. (Form designed for use on elite (12-pitch) typewriter)

Form Approved OMB No. 2000 0404 Expires 7 31 86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. ILD 0 0 5 1 6 2 0 5 2 — Manifest Document No. — 2. Page 1 of 1 — Information in the shaded areas is not required by Federal law

3. Generator's Name
Whirlpool Kitchens, Inc. St. Chas. Div.
1611 East Main Street
St. Charles, Illinois
312-584-3800

4. Generator's Mailing Address

A. State Manifest Document Number: IN 100797

B. State Generator's ID: 0894830011

5. Transporter 1 Company Name: MR. FRANK — 6. US EPA ID Number: I L D 0 6 9 5 0 6 1 6 0 — C. State Transporter's ID: 0079 — D. Transporter's Phone: 312-596-3377

7. Transporter 2 Company Name — 8. US EPA ID Number — E. State Transporter's ID — F. Transporter's Phone

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
420 S. Colfax Avenue
Griffith, In. 46319

10. US EPA ID Number: I N D 0 1 6 3 6 0 2 6 5 — G. State Facility's ID: 91808900002 — H. Facility's Phone: 219-768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a. WASTE FLAMMABLE LIQUID N.O.S. UN 1993	01	TT	01155	GAL.	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

GENERATOR — Printed/Typed Name: C.F. GETZ — Signature — Month 02 Day 19 Year 87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: RICH WITT — Signature — Date: Month 02 Day 19 Year 87

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Date: Month Day Year

FACILITY

19. Discrepancy Indication Space
EDUNFEE

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature — Month 02 Day 19 Year 87

EPA Form 8700-22A (Rev. 11-85) — UHWM 2/LP2

T.S.D. DETACH AND RETAIN THIS COPY

IN 100797

205RT50 B
012221

Division of Land Pollution Control - Manifest
Indiana State Board of Health
P.O. Box 7035
Indianapolis, IN 46207-7035

DO NOT WRITE IN THIS SPACE

Please print or type. (Form designed for use on elite (12-pitch) typewriter) Form Approved OMB No. 2000 0404 Expires 7 31 88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I L D 0 0 5 1 6 2 0 5 2 — Manifest Document No.

2. Page 1 of — Information in the shaded areas is not required by Federal law

3. Generator's Name: Whirlpool Kitchens, Inc. - St. Charles Div.
1611 E. Main Street
St. Charles, IL 60174

4. Generator's Phone: 312 584-3800

A. State Manifest Document Number: IN 093006

B. State Generator's ID:

5. Transporter 1 Company Name: Strand Trucking

6. US EPA ID Number: I L D 0 0 0 6 4 6 8 1 0

C. State Transporter's ID:

D. Transporter's Phone: 312/385-8

7. Transporter 2 Company Name:

8. US EPA ID Number:

E. State Transporter's ID:

F. Transporter's Phone:

9. Designated Facility Name and Site Address:
American Chemical Service
420 S. Colfax Ave.
Griffith, IN.. 46319

10. US EPA ID Number: I N D D 1 6 3 6 0 2 6 5

G. State Facility's ID:

H. Facility's Phone:

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. Waste Flamable Liquid N.O.S. UN 1993	1	D M	1 7 0 5	Gal	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

GENERATOR

Printed/Typed Name: C.F. Getz — Signature — Month 1 2 Day 1 2 Year 8 7

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Month 1 2 Day 1 2 Year 8 7 — Date

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Month Day Year — Date

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.

Printed/Typed Name — Signature — Month 1 2 Day 1 2 Year 8 7

IN 093006

EPA Form 8700-22A (Rev. 11-85) UHWM 2/LP2

T.S.D. DETACH AND RETAIN THIS COPY

31-204R T50

012220

Division of Land Pollution Control - Manifest
Indiana State Board of Health
P.O. Box 7035
Indianapolis, IN 46207-7035

DO NOT WRITE IN THIS SPACE

Please print or type. (Form designed for use on elite (12-pitch) typewriter)

Form Approved OMB No. 2000 0404 Expires 7 31 86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I L D 0 5 1 6 2 0 5 2 — Manifest Document No

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law

3. Generator's Name: Whirlpool Kitchens, Inc.-St. Charles
1611 E. Main Street
St. Charles, IL 60174

4. Generator's Phone: (312) 584-3800

A. State Manifest Document Number: IN 100804

B. State Generator's ID:

5. Transporter 1 Company Name: Mr. Frank, Inc.

6. US EPA ID Number: I L D 0 6 9 5 0 6 1 6 0

C. State Transporter's ID: 0071

D. Transporter's Phone: (312) 596-3377

7. Transporter 2 Company Name:

8. US EPA ID Number:

E. State Transporter's ID:

F. Transporter's Phone:

9. Designated Facility Name and Site Address:
American Chemical Service
420 S. Colfax Ave.
Griffith, IN 46319

10. US EPA ID Number: I N D 0 1 6 3 6 0 2 6 5

G. State Facility's ID:

H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. Waste Flammable Liquid N.O.S. UN 1993	001	T	00200	Gal.	D001
b.					
c.					
d.					

GENERATOR

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment

Printed/Typed Name: C.F. Getz — Signature — Month Day Year: 01 11 88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: JOE WEBER — Signature — Month Day Year: 01 11 88

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: F DUNFEE — Signature — Month Day Year: 01 11 88

IN 100804

EPA Form 8700-22A (Rev. 11-85) — UHWM 2/LP2

T.S.D. DETACH AND RETAIN THIS COPY

0015067

STATE OF ILLINOIS ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0610
LPC 62 8/81

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) **EPA Form 8700-22 (3-84)** Form Approved. OMB No. 2000-0404. Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I L D 0 0 5 1 6 2 0 5 2 — Manifest Document No. 0 0 0 0 1

2. Page 1 of 1

Information in the shaded areas is not required by Federal law, but is required by Illinois law.

3. Generator's Name and Mailing Address
ST. CHARLES MFG. CO.
1611 EAST MAIN STREET
ST. CHARLES, ILLINOIS 60174

4. Generator's Phone (312) 548-3800

A. Illinois Manifest Document Number IL 1188723

B. Illinois Generator's ID 0 8 9 4 8 3 0 0 1 1

5. Transporter 1 Company Name
MR. FRANK

6. US EPA ID Number I L D 0 6 9 5 0 6 1 6 0

C. Illinois Tranporter's ID 0 0 1 7 9

D. (312) 596-3377 Transporter's Phone

7. Transporter 2 Company Name

8. US EPA ID Number

E. Illinois Transporter's ID

F. ( ) Transporter's Phone

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
420 SOUTH COLFAX AVENUE
GRIFFITH, INDIANA 46319

10. US EPA ID Number I N D 0 1 6 3 6 0 2 6 5

G. Illinois Facility's ID 9 1 8 0 8 9 0 0 0 1 2

H. Facility's Phone (312) 768-3400

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
GENERATOR a.	WASTE SOLVENTS N.O.S. FLAMMABLE LIQUID	X	1	T T	003000	1	EPA HW Number D001 / Authorization Number 9206511
b.	I.D. # N.A. 1993						EPA HW Number / Authorization Number
c.							EPA HW Number / Authorization Number
d.							EPA HW Number / Authorization Number

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, and Illinois regulations.

Printed/Typed Name: ST. CHARLES MFG. CO. - JEFF LANDER — Signature: J. L. Lander — Date: Month 03 Day 18 Year 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Moe Wornhoff — Signature: Moe Wornhoff — Date: Month 3 Day 18 Year 85

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name — Signature — Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: EDWARDS — Signature — Date: Month 3 Day 18 Year 85

IN ILLINOIS: 217 / 782-3637 — 24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV. 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½ Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

IBK 7-63 — 038010

STATE OF ILLINOIS ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0610

LPC 62 8/81

Please print or type. Hazardous (Form designed for use on elite (12-pitch) typewriter.) **EPA Form 8700-22 (3-84)** Form Approved. OMB No. 2000-0404. Expires 7-31-86

UNIFORM ~~HAZARDOUS~~ WASTE MANIFEST

1. Generator's US EPA ID No. ILD005162052 Manifest Document No. 0003

2. Page 1 of 1

Information in the shaded areas is not required by Federal law, but is required by Illinois law.

3. Generator's Name and Mailing Address
ST CHARLES MFG. CO.
1611 EAST MAIN STREET
ST. CHARLES, ILLINOIS

4. Generator's Phone ( ) 312-584-3800

A. Illinois Manifest Document Number IL 1188724

B. Illinois Generator's ID 0 8 8 4 8 3 0 0 1 1

5. Transporter 1 Company Name
MR. FRANK

6. US EPA ID Number ILD069506160

C. Illinois Tranporter's ID 0079

D. 312 596-3377 Transporter's Phone

7. Transporter 2 Company Name

8. US EPA ID Number

E. Illinois Transporter's ID

F. ( ) Transporter's Phone

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
420 SOUTH COLFAX AVENUE
GRIFFITH, INDIANA 46319

10. US EPA ID Number IND016360263

G. Illinois Facility's ID 9 0 8 0 8 9 0 0 0 2

H. Facility's Phone 312- 769-3400

GENERATOR	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	X WASTE SOLVENTS N.O.S. ~~N.O.S.~~ FLAMMABLE		1	TT	1600-	1	EPA HW Number D001 Authorization Number 020651
b.	N. A. LIQUID I. D. # R. A. 1993						EPA HW Number Authorization Number
c.							EPA HW Number Authorization Number
d.							EPA HW Number Authorization Number

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, and Illinois regulations.

Printed/Typed Name: ST CHARLES MFG. CO. / JEFF LANIER
Signature: J R Lanier
Date: Month Day Year 10 5 02 85

TRANSPORTER			
17. Transporter 1 Acknowledgement of Receipt of Materials	Printed/Typed Name: RICH WHITE	Signature: R L White	Date: Month Day Year 10 5 02 85
18. Transporter 2 Acknowledgement or Receipt of Materials	Printed/Typed Name:	Signature:	Date: Month Day Year

FACILITY			
19. Discrepancy Indication Space	Hazardous		
20. Facility Owner or Operator: Certification of receipt of ~~hazardous~~ materials covered by this manifest except as noted in Item 19.	Printed/Typed Name: EDUNFEE	Signature: ED Unfee	Date: Month Day Year 10 16 85

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637 OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV. # 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½ Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center

FACILITY COPY - PART 3

212 R T-50

038020

STATE OF ILLINOIS ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0610

LPC 62 8/81

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) **EPA Form 8700-22 (3-84)** Form Approved OMB No. 2000-0404. Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I L D 0 0 5 1 6 2 0 5 2 Manifest Document No. 0 0 0 5

2. Page 1 of 1

Information in the shaded areas is not required by Federal law, but is required by Illinois law.

GENERATOR

3. Generator's Name and Mailing Address
ST CHARLES MFG. CO.
1611 EAST MAIN STREET
ST. CHARLES, ILLINOIS (312-584-3800)

4. Generator's Phone ( )

A. Illinois Manifest Document Number IL 1188727

B. Illinois Generator's ID 0 8 9 4 8 3 0 0 1 1

5. Transporter 1 Company Name
MR. FRANK INC

6. US EPA ID Number I L D 0 6 9 5 0 6 1 6 0

C. Illinois Tranporter's ID 0 0 7 9

D. 312 596-3377 Transporter's Phone

7. Transporter 2 Company Name

8. US EPA ID Number

E. Illinois Transporter's ID

F. ( ) Transporter's Phone

9. Designated Facility Name and Site Address
AMERICAN ~~BIOCOSMOKER~~ CHEM SERVICE
420 S. COLFAX AVENUE
GRIFFITH, IN 46319

10. US EPA ID Number I N D 0 1 6 3 6 0 2 6 5

G. Illinois Facility's ID 0 8 0 8 9 0 0 0 0 2

H. Facility's Phone (312) 768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a. X WASTE SOLVENTS N.O.S. FLAMMABLE		1	TT	01320	1	EPA HW Number D001 / Authorization Number 9206511
b. LIQUID I. D. # N. A. 1993						EPA HW Number / Authorization Number
c.						EPA HW Number / Authorization Number
d.						EPA HW Number / Authorization Number

J. Additional Descriptions for Materials Listed Above
WASTE SOLVENTS

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
00 SOP

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, and Illinois regulations.

Printed/Typed Name: ST CHARLES MFG. CO. / J. R. LANIER — Signature: J. R. Lanier — Date: Month 6 Day 21 Year 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: MICHAEL A. PFEFFER — Signature: Michael A. Pfeffer — Date: Month 06 Day 21 Year 85

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name — Signature — Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: FOWLER — Signature: [signature] — Date: Month 06 Day 21 Year 85

IN ILLINOIS: 217 / 782-3637 "24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS" OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV. # 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½ Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center

FACILITY COPY - PART 3

205 E T-X 50

U38021

STATE OF ILLINOIS ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0610

LPC 62 8/81

Please print or type. (Form designed for use on elite (12-pitch) typewriter) **EPA Form 8700-22 (3-84)** Form Approved. OMB No. 2000-0404. Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: ILD005162052 — Manifest Document No.: 0000

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law, but is required by Illinois law.

3. Generator's Name and Mailing Address:
ST CHARLES MFG. CO.
1611 EAST MAIN STREET
ST CHARLES, ILLINOIS 60174

4. Generator's Phone (312) 584-3800

A. Illinois Manifest Document Number: IL 1188731

B. Illinois Generator's ID: 0894830011

5. Transporter 1 Company Name: MR FRANK INC

6. US EPA ID Number: ILD069506160

C. Illinois Tranporter's ID: 0079

D. (312) 596-3377 Transporter's Phone

7. Transporter 2 Company Name:

8. US EPA ID Number:

E. Illinois Transporter's ID:

F. ( ) Transporter's Phone

9. Designated Facility Name and Site Address:
AMERICAN CHEM. SERVICE
420 S. COLFAX AVENUE
GRIFFITH, IN. 46319

10. US EPA ID Number: IND016360265

G. Illinois Facility's ID: 9180890002

H. Facility's Phone: (312) 768-3400

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	X	FLAMMABLE LIQUID N.O.S. FLAMMABLE UN1993 WASTE SOLVENTS N.O.S. FLAMMABLE	001	TT	01300	1	EPA HW Number: D001; Authorization Number: 920651
b.		[redacted]					EPA HW Number: ; Authorization Number:
c.							EPA HW Number: ; Authorization Number:
d.							EPA HW Number: ; Authorization Number:

J. Additional Descriptions for Materials Listed Above: WASTE SOLVENTS

K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information:

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, and Illinois regulations.

Printed/Typed Name: ST CHARLES MFG. CO. - JEFF R. LANDER — Signature: J R Lander — Date: Month 08 Day 01 Year 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: MICHAEL A. PFEIFER — Signature: Michael A. Pfeifer — Date: Month 08 Day 01 Year 85

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name: — Signature: — Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: FDUNFEE — Signature: [signature] — Date: Month 8 Day 1 Year 85

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637 OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV.# 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½ Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

211 RT-50

008022

STATE OF ILLINOIS ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0610

LPC 62 8/81

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) EPA Form 8700-22 (3-84) Form Approved. OMB No. 2000-0404 Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. ILD005162052 Manifest Document No. 00011

2. Page 1 of 1

Information in the shaded areas is not required by Federal law, but is required by Illinois law.

3. Generator's Name and Mailing Address
ST CHARLES MFG. CO.
1611 EAST MAIN STREET
ST. CHARLES, ILLINOIS 60174

4. Generator's Phone (312) 584-3800

A. Illinois Manifest Document Number IL 1188732

B. Illinois Generator's ID 0894830011

5. Transporter 1 Company Name MR. FRANK

6. US EPA ID Number ILD069506160

C. Illinois Tranporter's ID 0079

D. 312 596-3377 Transporter's Phone

7. Transporter 2 Company Name

8. US EPA ID Number

E. Illinois Transporter's ID

F. ( ) Transporter's Phone

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
420 SOUTH COLFAX AVENUE
GRIFFITH, INDIANA 46319

10. US EPA ID Number IND016360265

G. Illinois Facility's ID 9180890002

H. Facility's Phone (312) 768-3400

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a.	X	FLAMMABLE LIQUID N.O.S.	1	TT	01200	1	EPA HW Number D001 / Authorization Number
b.		FLAMMABLE UN 1993					EPA HW Number / Authorization Number
c.							EPA HW Number / Authorization Number
d.							EPA HW Number / Authorization Number

J. Additional Descriptions for Materials Listed Above Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Sec.3002(b) or RCRA, I also certify that I have a program in place to reduce the volume and toxicicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the enviroment.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, and Illinois regulations.

Printed/Typed Name ST. CHARLES MFG. CO./J.R. LANDER Signature J R Lander Date Month Day Year 9 12 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name JOE WEBER American Chemical Service Signature Joe Weber Date Month Day Year 9 12 85

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name Signature Date Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name FDUNFEE Signature F Dunfee Date Month Day Year 9 12 85

IN ILLINOIS: 217 / 782-3637 "24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS" OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV.# 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½ Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

211E T-50 13200 DN 1 Cl.

008623

STATE OF ILLINOIS ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0610

LPC 62 8/81

Please print or type. (Form designed for use on elite (12-pitch) typewriter) **EPA Form 8700-22 (3-84)** Form Approved. OMB No. 2000-0404. Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I L D 0 0 5 1 6 2 0 5 2 — Manifest Document No. 0 0 0 1 4 6

2. Page 1 of 1

Information in the shaded areas is not required by Federal law, but is required by Illinois law.

3. Generator's Name and Mailing Address
ST CHARLES MFG. CO.
1611 EAST MAIN STREET ST CHARLES, ILLINOIS 60174

4. Generator's Phone (312-)584-3800

A. Illinois Manifest Document Number IL-1188735

B. Illinois Generator's ID 0 8 9 4 8 3 0 0 1 1

5. Transporter 1 Company Name
MR. FRANK INC

6. US EPA ID Number I L D 0 6 9 5 0 6 1 6 0 0

C. Illinois Tranporter's ID 0 0 7 9

D. (312) 596-3377 Transporter's Phone

7. Transporter 2 Company Name

8. US EPA ID Number

E. Illinois Transporter's ID

F. ( ) Transporter's Phone

9. Designated Facility Name and Site Address
AMERICAN CHEM. SERVICE
420 S. COLFAX AVENUE
GRIFFITH, IN. 46319

10. US EPA ID Number I N D o 1 6 3 6 0 2 6 5

G. Illinois Facility's ID 9 1 8 0 8 9 0 0 0 2

H. Facility's Phone 312) 768-3400

GENERATOR

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	WASTE FLAMMABLE LIQUID FLAMMABLE LIQUID N. O. S. UN 1993	X	1	TT	01265	1	EPA HW Number / Authorization Number
b.	FLAMMABLE UN 1993						EPA HW Number / Authorization Number
c.							EPA HW Number / Authorization Number
d.							EPA HW Number / Authorization Number

J. Additional Descriptions for Materials Listed Above: Unless I am a small quantity generator who has been exempted by statue of regulation from the duty to make a waste minimization certification under section 3002(b) of RCRA, I also certify that I have a program in Place to reduce the volume and toxicity of waste generated to the degree I have determined to be ecomically practicable and I have selected the method of treatment, storage or disposal currently available to me which minimizes the present and future threat to human health and the environment.

K. Handling Codes for Wastes Listed Above: 1 - CALLOUS

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, and Illinois regulations.

Printed/Typed Name	Signature	Date (Month Day Year)
ST. CHARLES MFG. CO. / J.R. LANIER	J. R. Lanier	10 23 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)
AMERICAN CHEMICAL SERVICE RICH WUITE		10 23 85

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name	Signature	Date (Month Day Year)
ED WEEK		10 23 85

IN ILLINOIS: 217 / 782-3637 "24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS" OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV. # 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½, Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

210 R T-50

UJ8024

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0610

LPC 62 8/81

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) EPA Form 8700-22 (3-84) Form Approved. OMB No. 2000-0404. Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: I L D 0 0 5 1 6 2 0 5 2 — Manifest Document No.: 0 0 0 1 7

2. Page 1 of 1

Information in the shaded areas is not required by Federal law, but is required by Illinois law.

3. Generator's Name and Mailing Address: ST CHARLES MFG. CO. 1611 E. MAIN STREET ST CHARLES, ILLINOIS 60174

4. Generator's Phone (312) 584-3800

A. Illinois Manifest Document Number: IL 1188738

B. Illinois Generator's ID: 0 8 9 4 8 3 0 0 1 1

5. Transporter 1 Company Name: MR. FRANK

6. US EPA ID Number: I L D 0 6 9 5 0 6 1 6 0

C. Illinois Transporter's ID: 0 0 7 9

D. (312) 596-3377 Transporter's Phone

7. Transporter 2 Company Name

8. US EPA ID Number

E. Illinois Transporter's ID

F. ( ) Transporter's Phone

9. Designated Facility Name and Site Address: AMERICAN CHEM. SERVICE 420 S. COLFAX AVENUE GRIFFITH, IN. 46319

10. US EPA ID Number: I N D 0 1 6 3 6 0 2 6 5

G. Illinois Facility's ID: 0 1 8 0 8 9 0 0 0 2

H. Facility's Phone: (312) 768-3400

HM	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	L. Waste No.
a. X	WASTE FLAMMABLE LIQUID N.O.S. FLAMMABLE LIQUID UN 1993	001	TT	01300	1	EPA HW Number / Authorization Number
b.	~~FLAMMABLE UN 1993~~					EPA HW Number / Authorization Number
c.						EPA HW Number / Authorization Number
d.						EPA HW Number / Authorization Number

J. Additional Descriptions for Materials Listed Above UNLESS I AM A SMALL QUANITY generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under section 3002(b) of RCRA Ialso certify that I have a program in place to reduce the volume and toxicaty of waste generated to the degree I have determined ~~XXXXXXXXXXXXXXXXXXXXXXXXXX~~ to be economically practicable and I have selected the methed of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment,

K. Handling Codes for Wastes Listed Above

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, and Illinois regulations.

Printed/Typed Name: ST CHARLES MFG. CO. / J R LANDER — Signature: Jeff R. Lander — Date Month Day Year: 1 2 05 85

17. Transporter 1: Acknowledgement of Receipt of Materials

Printed/Typed Name: JOE WEBER AMERICAN CHEMICAL SERVICE — Signature: J. Weber — Date Month Day Year: 12 5 85

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name — Signature — Date

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this m Item 19.

Printed/Typed Name: FDUNFEE — Signature

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMB

IN ILLINOIS: 217 / 782-3637

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER

REV. # 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½ Section 21, that this information be submitted to the Ac or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and Center

FACILITY COPY - PART 3

ation is required

038025

STATE OF ILLINOIS ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0610

LPC 62 8/81

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) EPA Form 8700-22 (3-84) Form Approved. OMB No. 2000-0404. Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. ILD005162052 Manifest Document No. 00018

2. Page 1 of 1

Information in the shaded areas is not required by Federal law, but is required by Illinois law.

3. Generator's Name and Mailing Address
ST CHARLES MFG. CO.
1611 EAST MAIN STREET
ST. CHARLES, ILLINOIS 60174

4. Generator's Phone (312) 584-3800

A. Illinois Manifest Document Number 1188739

B. Illinois Generator's ID 0894830011

C. Illinois Tranporter's ID 0079

D. (312) 596-3377 Transporter's Phone

E. Illinois Transporter's ID

F. ( ) Transporter's Phone

5. Transporter 1 Company Name MR. FRANK

6. US EPA ID Number IL069506160

7. Transporter 2 Company Name

8. US EPA ID Number

9. Designated Facility Name and Site Address
AMERICAN CHEM. SERVICE
420 SOUTH COLFAX AVENUE
GRIFFITH, IN. 46319

10. US EPA ID Number IND016360265

G. Illinois Facility's ID 9180890002

H. Facility's Phone (312) 768-3400

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	X	WASTE FLAMMABLE LIQUID N.O.S. FLAMMABLE LIQUID UN1993	1	TT	01430	1	EPA HW Number D001 Authorization Number
b.		[redacted]					EPA HW Number Authorization Number
c.							EPA HW Number Authorization Number
d.							EPA HW Number Authorization Number

J. Additional Descriptions for Materials Listed Above: UNLESS I AM A SMALL QUANTITY [redacted] GENERATOR WHO HAS BEEN EXEMPTED BY STATUTE OR REGULATION FROM THE DUTY TO MAKE A WASTE MINIMIZATEION CERTICATION UNDER SECTION 3002(b) of RCRA, I [redacted] ALSO CERTIFY THAT I HAVE A PROGRAM IN PLACE TO REDUCE THE VOLUME AND TOXCITY OF WASTE GENERATED TH THE DEGREE I HAVE DETERMINED TO BE ECONOMICALLY PRACTICABLE AND I HAVE SELECTED THE METHOD OF TREATMENT STORAGE, OR [redacted] DISPOSAL CURRENTLY AVAILABLE TO ME WHICH MINIMIZES THE PRESENT AND FURTURE THREAT TO HUMAN HEALTH AND THE ENVIRONMENT.

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, and Illinois regulations.

Printed/Typed Name	Signature	Date Month Day Year
ST CHARLES MFG CO / J. R. LANDER	J. R. Lander	1 10 86

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month Day Year
RICH WUITE [redacted]	[signature]	1 22 86

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name	Signature	Date Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name	Signature	Date Month Day Year
F PUNFEE	[signature]	1 12 86

"24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS"

IN ILLINOIS: 217 / 782-3637 OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV.# 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½ Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

210K T-50

011899

STATE OF ILLINOIS ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0610
LPC 62 8/81

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) EPA Form 8700-22 (3-84) Form Approved. OMB No. 2000-0404 Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: ILD 005162052 — Manifest Document No.: 0021
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law, but is required by Illinois law.

3. Generator's Name and Mailing Address:
ST. CHARLES MFG. CO.
1611 EAST MAIN STREET
ST. CHARLES, ILLINOIS 60174
312-584-3800

4. Generator's Phone ( )

A. Illinois Manifest Document Number: IL 1533601
B. Illinois Generator's ID: 0894830011
C. Illinois Transporter's ID: 0079
D. (312) 596-3377 Transporter's Phone
E. Illinois Transporter's ID
F. Transporter's Phone
G. Illinois Facility's ID: 9180890002
H. Facility's Phone: (312) 768-3400

5. Transporter 1 Company Name: MR. FRANK, INC.
6. US EPA ID Number: ILD 069506160
7. Transporter 2 Company Name:
8. US EPA ID Number:
9. Designated Facility Name and Site Address:
AMERICAN CHEMICAL SERVICE
420 SOUTH COLFAX AVENUE
GRIFFITH, INDIANA 46319
10. US EPA ID Number: IND 016360265

GENERATOR

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a.	WASTE FLAMMABLE LIQUID N.O.S. UN 1993 FLAMMABLE LIQUID WASTE SOLVENTS n.o.s	X	001	TT	1200	1	EPA HW Number: D001 Authorization Number:
b.							EPA HW Number: Authorization Number:
c.							EPA HW Number: Authorization Number:
d.							EPA HW Number: Authorization Number:

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above In Item #14: 1 = Gallons 2 = Cubic Yards

15. Special Handling Instructions and Additional Information
IF WASTE LISTED IN ITEM #11 (a-d) IS UNDELIVERABLE FOR ANY REASON, RETURN TO GENERATOR.

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and Illinois regulations.

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

Printed/Typed Name: JEFF R. LANDER — Signature: Jeff R. Lander — Date: Month 03 Day 05 Year 86

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JACK McCLEVERTY — Signature: [signature] — Date: Month 03 Day 05 Year 86

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: — Signature: — Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.
Printed/Typed Name: R Roshack — Signature: R Roshack — Date: Month 03 Day 05 Year 86

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV. #6

GENERATOR COPY – PART 1 - DO NOT REMOVE PART 1 FROM SET UNTIL COMPLETED.

This Agency is authorized to require pursuant to Illinois Revised Statutes, 1983, Chapter 111½ Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

211 RT-501 1900

STATE OF ILLINOIS ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0610

LPC 62 8/81

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) **EPA Form 8700-22 (3-84)** Form Approved. OMB No. 2000-0404. Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. ILD 005162052 — Manifest Document No. 0029 — 2. Page 1 of 1 — Information in the shaded areas is not required by Illinois law.

3. Generator's Name and Mailing Address
ST CHARLES MFG. CO.
1611 EAST MAIN STREET
ST CHARLES, ILLINOIS 60174

4. Generator's Phone (312-584-3800

A. Illinois Manifest Document Number 1533609

B. Illinois Generator's ID 0 8 9 1 4 8 3 0 0 1 1

5. Transporter 1 Company Name MR FRANK INC. — 6. US EPA ID Number ILD 069506160 — C. Illinois Transporter's ID 0 0 7 9 — D. (312) 596-3377 Transporter's Phone

7. Transporter 2 Company Name — 8. US EPA ID Number — E. Illinois Transporter's ID — F. Transporter's Phone

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
420 SOUTH COLFAX AVENUE
GRIFFITH, IND. 46319

10. US EPA ID Number IND016360265

G. Illinois Facility's ID 9 1 8 0 8 9 0 0 0 2

H. Facility's Phone (312) 768-3400

GENERATOR

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a.	~~WASTE FLAMMABEE LIQUID N.O.S.~~ FLAMMABLE LIQUID ~~N.O.S.~~ UN 1993 WASTE SOLVENTS ~~N.O.S.~~	X	001	TT	1500	1	EPA HW Number D001 Authorization Number
b.							EPA HW Number Authorization Number
c.							EPA HW Number Authorization Number
d.							EPA HW Number Authorization Number

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above In Item #14
1 = Gallons 2 = Cubic Yards

15. Special Handling Instructions and Additional Information
IF WASTE LISTED IN ITEM # 11 (a-d) IS UNDELIVERALBE FOR ANY REASON, RETURN TO GENERATOR.

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and Illinois regulations.

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

Printed/Typed Name T. JEFF LANIER — Signature J. R. Lanier — Date Month Day Year 042386

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name JOE WEBER — Signature Joe Weber — Date Month Day Year 042386

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Date Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name P DUNFEE — Signature — Date Month Day Year 42386

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV #6

GENERATOR COPY – PART 1 - DO NOT REMOVE PART 1 FROM SET UNTIL COMPLETED.

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½ Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

212ET50

011901

STATE OF ILLINOIS ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0610

LPC 62 8/81

Please print or type (Form designed for use on elite (12-pitch) typewriter.) EPA Form 8700-22 (3-84) Form Approved. OMB No. 2000-0404. Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. ILD 005162052 Manifest Document No. 30 [redacted]

2. Page 1 of 1

Information in the shaded areas is not required by Federal law, but is required by Illinois law.

3. Generator's Name and Mailing Address
ST. CHARLES MFG. CO.
1611 EAST MAIN STREET
ST. CHARLES, ILLINOIS 60174

4. Generator's Phone (312-584-3800

A. Illinois Manifest Document Number IL 1533622

B. Illinois Generator's ID 0 8 9 4 8 3 0 0 1 1

5. Transporter 1 Company Name MR. FRANK, INC.

6. US EPA ID Number ILD 069506160

C. Illinois Transporter's ID 0 0 7 1 9

D. (312) 596-3377 Transporter's Phone

7. Transporter 2 Company Name

8. US EPA ID Number

E. Illinois Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
420 SO. COLFAX AVENUE
GRIFFITH, INDIANA 46319

10. US EPA ID Number IND016360265

G. Illinois Facility's ID 9 1 8 0 8 9 0 0 0 2

H. Facility's Phone (312) 768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a.	X	WASTE FLAMMABLE LIQUID ~~FLAMMABLE LIQUID~~ N.O.S., FLAMMABLE ~~WASTE SOLVENT N.O.S.~~ ~~WASTE FLAMMABLE LIQUID~~ LIQUID UN 1993	001	TT	01400	1	EPA HW Number D001 Authorization Number
b.		~~N.O.S. UN 1993~~					EPA HW Number Authorization Number
c.							EPA HW Number Authorization Number
d.							EPA HW Number Authorization Number

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above In Item #14
1 = Gallons 2 = Cubic Yards

15. Special Handling Instructions and Additional Information
IF WASTE LISTED IN ITEM # 11 (a-B) IS UNDELIVERABLE FOR ANY REASON, RETURN TO GENERATOR.

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and Illinois regulations.

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

Printed/Typed Name: CEE GETZ Signature: Cee Getz Date: Month Day Year 10 21 86

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JOE WEBER Signature: Joe Weber Date: Month Day Year 10 21 86

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: Signature: Date: Month Day Year

19. Discrepancy Indication Space
204R - T-50

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.
Printed/Typed Name: FDUNFEE Signature: F Dunfee Date: Month Day Year 10 21 86

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV #6

GENERATOR COPY – PART 1 - DO NOT REMOVE PART 1 FROM SET UNTIL COMPLETED.

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½ Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

011902

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE *(Form designed for use on elite (12-pitch) typewriter.)* *Form Approved. OMB No. 2050-0039. Expires 9-30-91*

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: I.L.D.0.6.7.9.3.9.1.0.3 — Manifest Document No.: 0.0.0.2.1
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address: WHIRLWIND TROTELLER SERVICE, 4270 LEE AVE, GURNEE, IL 60031
4. Generator's Phone (312)

A. State Manifest Document Number: INA 0335029
B. State Generator's ID:
C. State Transporter's ID: 1575
D. Transporter's Phone: 219-462-4181
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID:
H. Facility's Phone: 219-924-4370

5. Transporter 1 Company Name: LANDGREBE MOTOR TRANSIT
6. Use EPA ID Number: IND0.0.9.3.4.2.3.2.4
7. Transporter 2 Company Name:
8. Use EPA ID Number:
9. Designated Facility Name and Site Address: AMERICAN CHEMICAL SERVICE, 420 S. COLFAX AVE, GRIFFITH, IN 46319-1372
10. Use EPA ID Number: IND0.1.4.3.6.4.2.6.5

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. FLAMMABLE LIQUID N.O.S. FLAMMABLE UN 1993	01.1	DM	20.0.0	4	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: WASTE SOLVENTS
K. Handling Codes for Wastes Listed Above: 1 = GALLONS

15. Special Handling Instructions and Additional Information:

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Leonard Ciskowski — Signature: [signature] — Date: Month 03 Day 28 Year 89

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: STEVEN WYPYSZCZAK — Signature: Steven Wypyszczak — Date: Month 03 Day 28 Year 89

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: Michael YURECHKO — Signature: Michael Yurechko — Date: Month 03 Day 29 Year 89

19. Discrepancy Indication Space:

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: STEVE KULAVICK — Signature: Steve Kulavick — Date: Month 03 Day 29 Year 89

GENERATOR / TRANSPORTER / FACILITY

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0335029

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

10-204TCT50 3/29
1-204TCT50 3/29 (20)

COPY 5. TSD COPY

0016516

STATE OF MICHIGAN

WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS) ☐ Act 136 Waste ☐ Other MI 0226307

002430

IDENTIFICATION

Generator's Name	Primary Transporter's Name	Treatment, Storage or Disposal Facility
White Cloud Products	Valley City Refuse Disposal, Inc.	American Chemical Service, Inc.
Site Address: 1341 East Pine Hill, White Cloud, MI 49349	Transporters Address: 2650 Thornwood, Wyoming, MI 49509	Facility Address: 420 S. Colfax, Griffith, IN 46319
Phone Number: (616) 689-6663	Phone Number: (616) 538-8499	Phone Number: (219) 924-4370
Generator's Site EPA I.D. Number: MID 045 888 450	Transporter's EPA I.D. Number: MID 055 855 373	Facility Site EPA I.D. Number: IND 016 360-265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES — WASTE INFORMATION

LOT NO	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name).	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container No.	Container Type	Form Solid	Form Liquid	Form Gas	Form Sludge	Total Weight or Volume	Units	Hazardous or Liquid Waste Number
1.	Waste Paint Thinning Compound	Flammable	1142	07	4	Dr		X			220	gal	D001
2.													
3.													
4.													
5.													
6.													

COMMENTS

Include Safety precautions and special handling instructions.

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or 1969 PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature: Norman A. Ehlert. ①

Date Shipped MO. DAY YEAR: 082582

TRANSPORTER COMPLETES

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No. No. 1 640

Subsequent Transporter Vehicle I.D. No's

Transporter Signature: Russell Heninger ②

Subsequent transporter(s) signature(s) ③

Date(s) Received: 082582

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF COMPLETES

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature: F Dunfee ④

Facility Site EPA I.D. Number: IND016360265

☒ Accepted ☐ Rejected

Date Received: 82782

Describe any significant discrepancies between manifest and shipment.

Was a Surcharge Assessed? ☐ Yes ☒ No

SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 800—292-4706 OR OUT-OF-STATE AT 517—373-7660 AND THE NATIONAL RESPONSE CENTER AT —424-8802 24 HOURS PER DAY.

TO 210 FT-50 GKM 8-27-82

TSDF COPY

DISPOSAL MANIFEST ☒ Act 64 Waste (HAZARDOUS) ☐ Act 136 Waste (OTHER) MI 0003094

006255

IDENTIFICATION

Generator's Name	Primary Transporter's Name	Treatment, Storage or Disposal Facility
White Cloud Products, Inc.	Valley City Refuse Disposal, Inc.	American Chemical Service, Inc.
Site Address: 1341 East Pine Hill, White Cloud, MI 49349	Transporters Address: 2650 Thornwood, S.W., Wyoming, MI 49509	Facility Address: 420 S. Colfax, Griffith, IN 46319
Phone Number: (616) 689-6663	Phone Number: (616) 538-8499	Phone Number: (219) 924-4370
Generator's Site EPA I.D. Number: MID 045 888 450	Transporter's EPA I.D. Number: MID 055 855 373	Facility Site EPA I.D. Number: IND 016 360 265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES — WASTE INFORMATION

LOT NO.	U.S. D.O.T. Shipping Name	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container No.	Container Type	Form Solid	Form Liquid	Form Gas	Form Sludge	Weight or Volume	Units	Hazardous Waste Number
1.	Compound Paint Thinning Liquid	Flammable Liquid	1142	07	6	Dr		X			300	Gal	D001
2.													
3.													
4.													
5.													
6.													

COMMENTS

Include Safety precautions and special handling instructions.

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature: ① Marian Mathews

Date Shipped MO. DAY YEAR:

TRANSPORTER COMPLETES

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No. No. 1 H-830910

Subsequent Transporter Vehicle I.D. No's

Transporter Signature: ② Russell L Heminger

Subsequent transporter(s) signature(s): ③

Date(s) Received: 082382

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF COMPLETES

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature: ④ [signature]

Facility Site EPA I.D. Number: IND 016 360 265

☒ Accepted ☐ Rejected

Date Received: 9 1 83

Describe any significant discrepancies between manifest and shipment.

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM AT 800—294-4706, 24 HOURS PER DAY AND THE NATIONAL RESPONSE CENTER AT 800—424-8802

To 204 RT-50 Gal 9.1.83 TSDF COPY

006256

White Cloud Products, Inc.	Primary Transporter's Name: Valley City Refuse Disposal, Inc.	Treatment, Storage or Disposal Facility: American Chemical Service, Inc.
Site Address: 1341 East Pine Hill, White Cloud, MI 49349	Transporters Address: 2650 Thornwood, S.W., Wyoming, MI 49509	Facility Address: 420 S. Colfax, Griffith, IN 46319
Phone Number: (616) 689-6663	Phone Number: (616) 538-8499	Phone Number: (219) 924-4370
Generator's Site EPA I.D. Number: MID 045 888 450	Transporter's EPA I.D. Number: MID 055 855 373	Facility Site EPA I.D. Number: IND 016 360 265

IDENTIFICATION

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES

WASTE INFORMATION

LOT NO.	U.S. D.O.T. Shipping Name	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container No.	Container Type	Form Solid	Form Liquid	Form Gas	Form Sludge	Weight or Volume	Units	Hazardous Waste Number
1.	Compound Paint Thinning Liquid	Flammable Liquid	1142	07	11	Dr		X			550	Gal	D001
2.													
3.													
4.													
5.													
6.													

COMMENTS

Include Safety precautions and special handling instructions.

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or PA136. I further understand that this manifest may be used in administrative and court proceedings.

Genarator Signature: ① Norman R. Ehlert

Date Shipped: MO. DAY YEAR

TRANSPORTER COMPLETES

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No.: No. 1 640

Subsequent Transporter Vehicle I.D. No's:

Transporter Signature: ② Arnold Dykstra

Subsequent transporter(s) signature(s): ③

Date(s) Received: 04 04 83

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF COMPLETES

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature: ④ [signature]

Facility Site EPA I.D. Number: IND 016 360 265

X ☐ Accepted ☐ Rejected

Date Received: 4 5 83

Describe any significant discrepancies between manifest and shipment.

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM AT 800—294-4706, 24 HOURS PER DAY AND THE NATIONAL RESPONSE CENTER AT 800—424-8802

TSDF COPY

TO 125ET-63 GRM 4-25-83

STATE OF MICHIGAN

R 4896 Rev. 8/81

WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS) ☐ Act 136 Waste ☐ Other MI 0325273

GENERATOR COMPLETES

IDENTIFICATION

Generator's Name	Primary Transporter's Name	Treatment, Storage or Disposal Facility
White Cloud Products, Inc.	Valley City Refuse Disposal, Inc.	American Chemical Service, Inc.
Site Address	**Transporters Address**	**Facility Address**
1341 East Pine Hill White Cloud, MI 49349	2650 Thornwood, S.W. Wyoming, MI 49509	420 S. Colfax Griffith, IN 46319
Phone Number	**Phone Number**	**Phone Number**
(616 689-6663	(616) 538-8499	(219) 924-4370
Generator's Site EPA I.D. Number	**Transporter's EPA I.D. Number**	**Facility Site EPA I.D. Number**
MID 045 888 450	MID 055 855 373	IND 016 360 265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

WASTE INFORMATION

LOT NO.	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name).	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container No.	Container Type	Form: Solid	Form: Liquid	Form: Gas	Form: Sludge	Total Weight or Volume	Units	Hazardous or Liquid Waste Number
1.	Compound Paint Thinning Liquid	Flammable Liquid	1142	07	3	DR		X			165	Gal	D001
2.													
3.													
4.													
5.													
6.													

COMMENTS

Include Safety precautions and special handling instructions.

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or 1969 PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature: ① Marian Mathews

Date Shipped MO. DAY YEAR: 1,1,1,6,8,3

TRANSPORTER COMPLETES

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No. No. 1 H-830910

Subsequent Transporter Vehicle I.D. No's

Transporter Signature: ②

Subsequent transporter(s) signature(s): ③

Date(s) Received: 1,1,1,6,8,3

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF COMPLETES

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature: ④

Facility Site EPA I.D. Number: IND 016 360 265

☒ Accepted ☐ Rejected

Date Received: 1,1,1,8,8,3

Describe any significant discrepancies between manifest and shipment.

Was a Surcharge Assessed? ☐ Yes ☒ No

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 800—292-4706 OR OUT-OF-STATE AT 517—373-7660 AND THE NATIONAL RESPONSE CENTER AT 800—424-8802 24 HOURS PER DAY.

TO WASTE TECH BRM 11/21/83 TSDF COPY

11900

WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS) ☐ Act 136 Waste ☐ Other **MI 0286435**

IDENTIFICATION

Generator's Name	Primary Transporter's Name	Treatment, Storage or Disposal Facility
White Cloud Products, Inc.	Valley City Refuse Disposal, Inc.	American Chemical Service, Inc.
Site Address	**Transporters Address**	**Facility Address**
1341 East Pine Hill White Cloud, MI 49349	2650 Thornwood, S.W. Wyoming, MI 49509	420 S. Colfax Griffith, IN 46319
Phone Number	**Phone Number**	**Phone Number**
(616) 689-6663	(616) 538-8499	(219) 924-4370
Generator's Site EPA I.D. Number	**Transporter's EPA I.D. Number**	**Facility Site EPA I.D. Number**
MID 045 888 450	MID 055 855 373	IND 016 360 265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES — WASTE INFORMATION

LOT NO.	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name).	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container No.	Container Type	Form Solid	Form Liquid	Form Gas	Form Sludge	Total Weight or Volume	Units	Hazardous or Liquid Waste Number
1.	Waste Paint	Flammable Liquid	1263	08	1	DR		X			55	GAL	D001
2.	Waste Compound Paint Thinning Liquid	Flammable Liquid	1142	08	2	DR		X			110	GAL	D001
3.													
4.													
5.													
6.													

COMMENTS

Include Safety precautions and special handling instructions.

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or 1969 PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature ① Norman Ehlert

Date Shipped MO. DAY YEAR 020884

TRANSPORTER COMPLETES

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No. No. 1 H830366

Subsequent Transporter Vehicle I.D. No's

Transporter Signature ② Jack Pusto

Subsequent transporter(s) signature(s) ③

Date(s) Received 020884

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF COMPLETES

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature ④ [signature]

Facility Site EPA I.D. Number IND 016 360 265

☒ Accepted ☐ Rejected

Date Received 020984

Describe any significant discrepancies between manifest and shipment.

Was a Surcharge Assessed? ☐ Yes ☒ No

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 800—292-4706 OR OUT-OF-STATE AT 517—373-7660 AND THE NATIONAL RESPONSE CENTER AT 800—424-8802 24 HOURS PER DAY.

TSDF COPY

To 204 F T-50 GRM 2.9.84

006618

STATE OF MICHIGAN

WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS) ☐ Act 136 Waste ☐ Other

MI 0286696

IDENTIFICATION

Generator's Name	Primary Transporter's Name	Treatment, Storage or Disposal Facility
White Cloud Products, Inc.	Valley City Refuse Disposal, Inc.	American Chemical Service, Inc.
Site Address	**Transporters Address**	**Facility Address**
1341 East Pine Hill White Cloud, MI 49349	2650 Thornwood, S.W. Wyoming, MI 49509	420 S. Colfax Griffith, IN 46319
Phone Number	**Phone Number**	**Phone Number**
(616) 689-6663	(616) 538-8499	(219) 924-4370
Generator's Site EPA I.D. Number	**Transporter's EPA I.D. Number**	**Facility Site EPA I.D. Number**
MID 045 888 450	MID 055 855 373	IND 016 360 265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES

WASTE INFORMATION

LOT NO.	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name).	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container No.	Container Type	Form: Solid	Form: Liquid	Form: Gas	Form: Sludge	Total Weight or Volume	Units	Hazardous or Liquid Waste Number
1.	Waste Compound Paint Thinning Liquid	Flammable Liquid	1142	08	4	DR		X			220	Gal	D001
2.													
3.													
4.													
5.													
6.													

COMMENTS

Include Safety precautions and special handling instructions.

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately raport all information requested by the manifest constitutes a violation of 1979 PA64 and/or 1969 PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature ① Norman Ehlert — Date Shipped MO. DAY YEAR: 07 25 84

TRANSPORTER COMPLETES

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I furthar certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No. 1 H8309 1 D

Subsequent Transporter Vehicle I.D. No's

Transporter Signature ② Jack Ruder — Date(s) Received: 07 25 84

Subsequent transporter(s) signature(s) ③

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF COMPLETES

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature ④ — ☒ Accepted ☐ Rejected — Date Received: 7 27 84

Facility Site EPA I.D. Number

Describe any significant discrepancies between manifest and shipment.

Was a Surcharge Assessed? ☐ Yes ☐ No

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 800—292-4706 OR OUT-OF-STATE AT 517—373-7660 AND THE NATIONAL RESPONSE CENTER AT 800—424-8802 24 HOURS PER DAY.

TSDF COPY

204R T-50

02219

DNR

MICHIGAN DEPARTMENT OF NATURAL RESOURCES

DO NOT WRITE IN THIS SPACE
ATT. ☐ DIS. ☐ REJ. ☐

Required under authority of Act 64, P.A. 1979, as amended and Act 136, P.A. 1969.

Failure to file is punishable under section 299.548 MCL or Section 10 of Act 136, P.A. 1969.

Please print or type. (Form designed for use on elite (12-pitch) typewriter)

Form Approved OMB No. 2000-0404 Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. H I D 0 4 5 8 8 8 4 5 0 — Manifest Document No. 3 5 8 9 2

2. Page 1 of 1

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
White Cloud Products, Inc.
1341 East Pine Hill, White Cloud, MI 49349

4. Generator's Phone (616) 689-6663

A. State Manifest Document Number: MI 0535892

B. State Generator's ID:

5. Transporter 1 Company Name: Valley City Refuse Disposal, Inc.

6. US EPA ID Number: M I D 0 5 5 8 5 5 3 7 3

C. State Transporter's ID:

D. Transporter's Phone:

7. Transporter 2 Company Name:

8. US EPA ID Number:

E. State Transporter's ID:

F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Service, Inc.
420 S. Colfax, P.O. Box 190
Griffith, IN 46319

10. US EPA ID Number: I N D 0 1 6 3 6 0 2 6 5

G. State Facility's ID:

H. Facility's Phone: (219) 924-4370

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER). HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.	NH
a.	X Waste Paint Flammable Liquid UN1263	2	DM	110	G	D001	H
b.	X Paint related material Flammable Liquid UN1263	4	DM	220	G	D001	H
c.							
d.							

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, including applicable state regulations.

GENERATOR

Printed/Typed Name: NORMAN EHLERT
Signature: Norman Ehlert
Date: Month 12 Day 16 Year 87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jim Reitsma
Signature: Jim Reitsma
Date: Month 12 Day 16 Year 87

18. Transporter 2 Acknowledgement or Receipt of Materials
Printed/Typed Name:
Signature:
Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: FRANK PRICE
Signature: Frank Price
Date: Month 12 Day 17 Year 87

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOURS PER DAY.

EPA Form 8700-22 (3-84)

PR 5110 Rev. 7/84

TSDF COPY 204R T-50 V

006620

DNR
MICHIGAN DEPARTMENT OF NATURAL RESOURCES

DO NOT WRITE IN THIS SPACE
ATT. ☐ DIS. ☐ REJ. ☐

Required under authority of Act 64, P.A. 1979, as amended and Act 136, P.A. 1969.

Failure to file is punishable under section 299.548 MCL or Section 10 of Act 136, P.A. 1969.

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved OMB No 2000-0404 Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MIG045888450 Manifest Document No. 79770
2. Page 1 of 1

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
WHITE CLOUD PRODUCTS
1341 EAST PINE HILL, WHITE CLOUD, MI 49349

4. Generator's Phone (616) 689-6663

A. State Manifest Document Number MI 0579770
B. State Generator's ID

5. Transporter 1 Company Name: VALLEY CITY REFUSE DISPOSAL, INC.
6. US EPA ID Number: MID055855373
C. State Transporter's ID
D. Transporter's Phone (616) 538-8499

7. Transporter 2 Company Name
8. US EPA ID Number
E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE, INC.
420 S. COLFAX, P.O. BOX 190
GRIFFITH, IN 46319

10. US EPA ID Number: IND016360265
G. State Facility's ID
H. Facility's Phone (219) 924-4370

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER). HM		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.	N/H
a.	X	WASTE PAINT FLAMMABLE LIQUID UN1263	5	DM	275	G	D001	H
b.								
c.								
d.								

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, including applicable state regulations.

Printed/Typed Name: MICHAEL E. FINCH
Signature: Michael E. Finch
Date: Month Day Year 04 16 85

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Roger Norton
Signature: Roger Norton
Date: Month Day Year 04 16 85

18. Transporter 2 Acknowledgement or Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: FRANK PRICE
Signature: Frank Price
Date: Month Day Year 4 18 85

GENERATOR

TRANSPORTER

FACILITY

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOURS PER DAY.

EPA Form 8700-22 (3-84)

PR 5110 Rev. 7/84

TSDF COPY 204 E T-50 ✓

009189

DNR
MICHIGAN DEPARTMENT
OF NATURAL RESOURCES

DO NOT WRITE IN THIS SPACE
ATT. ☐ DIS. ☐ REJ. ☐

Required under authority of Act 64, P.A. 1979, as amended and Act 136, P.A. 1969.

Failure to file is punishable under section 299.548 MCL or Section 10 of Act 136, P.A. 1969.

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) Form Approved OMB No 2000-0404 Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MID045888450 Manifest Document No. 26710
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
White Cloud Products
1341 East Pine Hill, White Cloud, MI 49349
4. Generator's Phone (6166) 689-6663

A. State Manifest Document Number MI 0626710
B. State Generator's ID

5. Transporter 1 Company Name: ValleyCityRefuseDisposal, Inc.
6. US EPA ID Number: MID055855373
C. State Transporter's ID
D. Transporter's Phone (616)538-8499

7. Transporter 2 Company Name
8. US EPA ID Number
E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Services, Inc.
420 S. Colfax
Griffith, IN 46319
10. US EPA ID Number: IND016360265
G. State Facility's ID
H. Facility's Phone (219) 924-4370

GENERATOR

11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER). HM		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.	N/H
a. H	Waste Paint Related Material Flammable Liquid NA1263	9	DR	100	G	D001	H
b.							
c.							
d.							

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, including applicable state regulations.

Printed/Typed Name: Michael E. French
Signature: Michael E. French
Date: Month Day Year

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Arnold Dykstra
Signature: Arnold Dykstra
Date: Month Day Year 07 03 85

18. Transporter 2 Acknowledgement or Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Harrold F. Schmidt
Signature: Harrold F. Schmidt
Date: Month Day Year 07 03 85

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4708 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOURS PER DAY.

EPA Form 8700-22 (3-84)

TSDF COPY

PR 5110 Rev. 7/84

009190

DEPARTMENT
NATURAL RESOURCES

DO NOT WRITE IN THIS SPACE
ATT. ☐ DIS. ☐ REJ. ☐

Required under authority of Act 64, P.A. 1979, as amended and Act 136, P.A. 1969.

Failure to file is punishable under section 299.548 MCL or Section 10 of Act 136, P.A. 1969.

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved OMB No 2000-0404 Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: MID045888450 — Manifest Document No.: 26730
2. Page 1 of 1

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address: WHITE CLOUD PRODUCTS, 1341 EAST PINE HILL, WHITE CLOUD, MI 49349
4. Generator's Phone (616) 689-6663

A. State Manifest Document Number: MI 0626730
B. State Generator's ID:

5. Transporter 1 Company Name: VALLEY CITY REFUSE DISPOSAL, INC.
6. US EPA ID Number: MID055855373

C. State Transporter's ID:
D. Transporter's Phone: (616) 538-8499

7. Transporter 2 Company Name:
8. US EPA ID Number:

E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address: AMERICAN CHEMICAL SERVICES, INC., 420 S. COLFAX, P.O. Box 190, GRIFFITH, IN 46319
10. US EPA ID Number: IND016360265

G. State Facility's ID:
H. Facility's Phone: (219) 924-4370

GENERATOR

11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER).	HM		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.	N/H
a.	X	WASTE PAINT RELATED MATERIAL FLAMMABLE LIQUID NA1263	6	DM	300	G	D001	H
b.								
c.								
d.								

J. Additional Descriptions for Materials Listed Above:

K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information:

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, including applicable state regulations.

Printed/Typed Name: Michael E Finch — Signature: Michael E Finch — Date: Month Day Year: 07 24 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Arnold Dykstra — Signature: Arnold Dykstra — Date: Month Day Year: 07 24 85

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name: — Signature: — Date: Month Day Year:

FACILITY

19. Discrepancy Indication Space:

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: FRANK PRICE — Signature: ~~Frank~~ P Frank Price — Date: Month Day Year: 7 26 85

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOURS PER DAY.

EPA Form 8700-22 (3-84)

TSDF COPY

204 T-50 009191

PR 5110 Rev. 7/84

DNR
...GAN DEPARTMENT
NATURAL RESOURCES

DO NOT WRITE IN THIS SPACE
ATT. ☐ DIS. ☐ REJ. ☐

Required under authority of Act 64, P.A. 1979, as amended and Act 136, P.A. 1969.

Failure to file is punishable under section 299.548 MCL or Section 10 of Act 136, P.A. 1969.

Please print or type.

Form Approved OMB No 2000-0404 Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MID045888450 Manifest Document No. 04109

2. Page 1 of 1

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
WHITE CLOUD PRODUCTS
1341 East Pine Hill, White Cloud, MI 49349

4. Generator's Phone (616) 689-6663

A. State Manifest Document Number MI 0704109

B. State Generator's ID

5. Transporter 1 Company Name VALLEY CITY REFUSE DISPOSAL, INC.

6. US EPA ID Number MID055855373

C. State Transporter's ID

D. Transporter's Phone (616) 538-8499

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE, INC.
420 S. Colfax, P.O. Box 190
Griffith, IN 46319

10. US EPA ID Number IND016360265

G. State Facility's ID

H. Facility's Phone (219) 924-4370

11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER).	HM		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.	N/H
a.	X	WASTE PAINT RELATED MATERIAL Flammable Liquid NA1263	008	DM	00440	G	D001	H
b.								
c.								
d.								

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above a/ / b/ / c/ / d/ /

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable International and national government regulations.

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage or disposal currently available to me which minimizes the present and future threat to human health and the environment.

Printed/Typed Name	Signature	Date Month Day Year
Norm Ehlert	Norm Ehlert (ec)	10 30 85

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month Day Year
Ronald L. Cheyne	Ronald L Cheyne	10 30 85

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name	Signature	Date Month Day Year

19. Discrepancy Indication Space
1 Drum Solid

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name	Signature	Date Month Day Year
G R MURPHY	[signature]	11 06 85

GENERATOR

TRANSPORTER

FACILITY

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOURS PER DAY.

EPA Form 8700-22 (Rev. 4-85)

TSDF COPY

6-123 F T-63
2-204 F

PR 5110
Rev. 4/85

009192

DNR
MICHIGAN DEPARTMENT OF NATURAL RESOURCES

DO NOT WRITE IN THIS SPACE
ATT. ☐ DIS. ☐ REJ. ☐

Required under authority of Act 64, P.A. 1979, as amended and Act 136, P.A. 1969.

Failure to file is punishable under section 299.548 MCL or Section 10 of Act 136, P.A. 1969.

Please print or type.

Form Approved. OMB No. 2000-0404 Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MID045888450 Manifest Document No. 2869 1
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
WHITE CLOUD PRODUCT
1341 East Pine Hill, White Cloud, MI 49349
4. Generator's Phone (616) 689-6663

A. State Manifest Document Number MI 0828691
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone (616) 538-8499
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone (219) 924-4370

5. Transporter 1 Company Name: VALLEY CITY REFUSE DISPOSAL, INC.
6. US EPA ID Number: MID055885537
7. Transporter 2 Company Name
8. US EPA ID Number
9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE, INC.
420 S. Colfax, P.O. Box 190
Griffith, IN 46319
10. US EPA ID Number: IND016360265

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER). HM		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	15. Waste No.	
a.	X	Waste Paint Related Material Flammable Liquid NA1263	1	K DM	250	G	D001	
b.								
c.								
d.								

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above
a/ b/ c/ d/

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable International and national government regulations.

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage or disposal currently available to me which minimizes the present and future threat to human health and the environment.

GENERATOR

Printed/Typed Name: NORMAN R. EHLERT
Signature: Norman R. Ehlert
Date: Month 09 Day 19 Year 86

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Roger Norton
Signature: Roger Norton
Date: Month 09 Day 18 Year 86

18. Transporter 2 Acknowledgement or Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

FACILITY

19. Discrepency Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: MURPHY
Signature
Date: Month 09 Day 19 Year 86

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOURS PER DAY.

EPA Form 8700-22 (Rev. 4-85)

TSDF COPY

204 E TSO 011616

PR 5110 Rev. 4/85

Division of Land Pollution Control - Manifest
Indiana State Board of Health
P.O. Box 7035
Indianapolis, IN 46207-7035

DO NOT WRITE IN THIS SPACE

Please print or type. (Form designed for use on elite (12-pitch) typewriter) Form Approved OMB No. 2000 0404 Expires 7 31 86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No: MI0045888450 — Manifest Document No.: 35333

2. Page 1 of 1

Information in the shaded areas is not required by Federal law

3. Generator's Name
WHITE CLOUD PRODUCTS
1341 East Pine Hill, White Cloud, MI 49349

4. Generator's Phone (616) 689-6663

A. State Manifest Document Number: IN 035333

B. State Generator's ID

5. Transporter 1 Company Name: VALLEY CITY REFUSE DISPOSAL, INC.

6. US EPA ID Number: MID055855373

C. State Transporter's ID

D. Transporter's Phone: 616 538-8499

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
420 S. Colfax
Griffith, IN 46319

10. US EPA ID Number: IND016360265

G. State Facility's ID

H. Facility's Phone: 219 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE PAINT RELATED MATERIAL Flammable Liquid NA1263	14	DM	770	G	0001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, end labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

Printed/Typed Name: Phil Vincent — Signature: Phil Vincent — Month Day Year: 11-25-86

17. Transporter 1 Acknowledgement of Receipt of Materials — Date

Printed/Typed Name: Bruce E Lemon — Signature: Bruce E Lemon — Month Day Year: 11 25 86

18. Transporter 2 Acknowledgement of Receipt of Materials — Date

Printed/Typed Name — Signature — Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted item 19

Printed/Typed Name: Harold F Schmidt — Signature: Harold F Schmidt — Month Day Year: 11 25 86

GENERATOR — TRANSPORTER — FACILITY

IN 035333

EPA Form 8700-22A (Rev. 11-85) UHWM 2/LP2

T.S.D. DETACH AND RETAIN THIS COPY.

onul 14-12355-F63

011617

Division of Land Pollution Control - Manifest
Indiana State Board of Health
P.O. Box 7035
Indianapolis, IN 46207-7035

DO NOT WRITE IN THIS SPACE

Please print or type. (Form designed for use on elite (12-pitch) typewriter) Form Approved OMB No. 2000 0404 Expires 7 31 86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: MID045888450
Manifest Document No.: 99018
2. Page 1 of 1
Information in the shaded areas is not required by Federal law

3. Generator's Name
WHITE CLOUD PRODUCTS
1841 East Pine Hill, White Cloud, MI 49349

A. State Manifest Document Number: IN 099018

4. Generator's Phone (616) 689-6663

B. State Generator's ID

5. Transporter 1 Company Name: VALLEY CITY REFUSE DISPOSAL, INC.
6. US EPA ID Number: MID055855373

C. State Transporter's ID
D. Transporter's Phone (616) 538-8499

7. Transporter 2 Company Name
8. US EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE, INC.
420 S. Colfax, P.O. Box 190
Griffith, IN 46319-0190

10. US EPA ID Number: IND016360265

G. State Facility's ID
H. Facility's Phone (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a. WASTE PAINT RELATED MATERIAL (IGNITABLE) Flammable Liquid NA1263		DM		G	D001
b.					
c.					
d.					

400

J. Additional Descriptions for Materials Listed Above

K. Han

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

Printed/Typed Name | Signature | Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials | Date

Printed/Typed Name: [illegible] | Signature: [illegible] | Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials | Date

Printed/Typed Name | Signature | Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.

Printed/Typed Name: Milt Popa | Signature: Milt Popa | Month Day Year 8 17

IN 099018

EPA Form 8700-22A (Rev. 11-85) UHWM 2/LP2

T.S.D. DETACH AND RETAIN THIS COPY

MRK 8-12GR T63B

012220

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MID045888450 Manifest Document No. 59133

2. Page 1 of 1

Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
WHITE CLOUD PRODUCTS
1841 East Pine Hill, White Cloud, MI 49349

4. Generator's Phone (616) 689-6663

A. State Manifest Document Number INA 0159133

B. State Generator's ID

5. Transporter 1 Company Name VALLEY CITY REFUSE DISPOSAL, INC.

6. Use EPA ID Number MID981956063

C. State Transporter's ID

D. Transporter's Phone (616) 235-1500

7. Transporter 2 Company Name

8. Use EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Service
420 S. Colfax, P.O. Box 190
Griffith, IN 46319-0190

10. Use EPA ID Number IND016360265

G. State Facility's ID

H. Facility's Phone (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	Waste No.
a. WASTE PAINT RELATED MATERIAL (Ignitible) Flammable Liquid NA1263	3	DM	165	G	[illegible]
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name	Signature	Month	Day	Year
NORMAN EHLERT	Norman P. Ehlert	9	13	87

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Roger Norton	Roger Norton	09	13	87

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.

Printed/Typed Name	Signature	Month	Day	Year
MILTON POPA	Milton Popa	9	17	87

GENERATOR

TRANSPORTER

FACILITY

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424 8802 or 202/426-2675.

INA 0159133

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865 3-1237-T-63 9/18/87 M

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

012221

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. M·I·D·0·4·5·8·8·8·4·5·0	Manifest Document No. 5·9·1·4·6	2. Page 1 of 1	Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

GENERATOR

3. Generator's Name and Mailing Address
WHITE CLOUD PRODUCTS
1841 East Pine Hill, White Cloud, MI 49349

A. State Manifest Document Number: INA 0159146

4. Generator's Phone (616) 689-6663

B. State Generator's ID

5. Transporter 1 Company Name: VALLEY CITY REFUSE DISPOSAL, INC.

6. US EPA ID Number: M·I·D·9·8·1·9·5·6·0·6·3

C. State Transporter's ID

D. Transporter's Phone (616) 235-1500

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Service
420 S. Colfax, P.O. Box 190
Griffith, IN 46319-0190

10. US EPA ID Number: I·N·D·0·1·6·3·6·0·2·6·5

G. State Facility's ID

H. Facility's Phone (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt./Vol.	Waste No.
a. WASTE PAINT RELATED MATERIAL (Ignitible) Flammable Liquid, NA 1263	3	DM	165	G	
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name	Signature	Date Month	Day	Year
PAT KRAMER		12	22	87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year
Earl W. Coons	Earl W. Coons	12	22	87

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name	Signature	Date Month	Day	Year
Harold F. Schmidt	Harold F. Schmidt	12	22	87

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865 3-204R T-50 11/3/87 gm

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/126-2675.

INA 0159146

012222

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0179681

WASTE GENERATOR

Authorization Number 997410

Batavia Coatings & Chemicals Div.
Whittaker Corporation (Company Name)
1500 Lathem Street (Address)
Batavia, (City) Illinois (State) 60510 (Zip)
0890100005 G (Generator Number)

WASTE HAULER(S)

(1) Mr. Frank (Hauler Name) 201 W. 155th Street (Hauler Address) S.W.H. Registration Number 0079018

(2) (Hauler Name) (Hauler Address) S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) 420 S. Colfax (Address) 91808902 (Site Number)
Griffith (City) Indiana (State) (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Solvent

WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Waste Solvents

HAZARD CLASS: Flammable

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 9/11/80

Charles Falanto (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 005000 (GALLONS) CU. YDS. (Circle One)

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER _____ (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Bruce D. Eley - Driver (Authorized Signature) DATE: 9/11/80

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

(Authorized Signature) DATE: 9/11/80

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS, 217 / 782-3637 — 24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS, 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

00[illegible]113

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0179683

WASTE GENERATOR

Authorization Number 922410

BATAVIA COATINGS CHEM DIV WHITTAKER CORP. (Company Name) 1500 LATHEM ST. (Address)

BATAVIA (City) ILL (State) 60510 (Zip)

0890100005G (Generator Number)

WASTE HAULER(S)

(1) MR FRANK. (Hauler Name) 20114 455N ST. (Hauler Address) S.W.H. Registration Number 0019023

(2) _____ (Hauler Name) S. HOLLAND ILL. (Hauler Address) S.W.H. Registration Number _____

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) 420 S. COLFAX (Address) 91808902 (Site Number)

GRIFFITH (City) INDIANA (State) _____ (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENT WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: WASTE SOLVENT HAZARD CLASS: FLAMMABLE

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 10/29/80. [signature] (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 00500 0 (1 GALLONS / 2 CU. YDS.) (Circle One) 1

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER _____ (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) DATE 10/29/80

(2) _____ (Authorized Signature) DATE ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

[signature] (Authorized Signature) DATE 10/29/80

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

000100

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0179684

WASTE GENERATOR

BATAVIA COATINGS & CHEM. DIV.
WHITTAKER CORPORATION (Company Name) — 1500 LATHEM ST (Address)
BATAVIA (City) — Ill. (State) — 60510 (Zip)

Authorization Number 997410

089 0100005 G (Generator Number)

WASTE HAULER(S)

(1) MR FRANK (Hauler Name) — 201 W. 155th ST. (Hauler Address) — S.W.H. Registration Number 0029019

(2) _____ (Hauler Name) — SOUTH HOLLAND, Ill. (Hauler Address) — S.W.H. Registration Number _____

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERV - 420 S COLFAX (Facility Name) (Address) — 91808902 (Site Number)
GRIFFITH (City) — INDIANA (State) — _____ (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENT. WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: WASTE SOLVENT.

HAZARD CLASS: FLAMMABLE

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 10/31/80. — [signature] (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 004500 (47–52) — 1 GALLONS / 2 CU. YDS. (Circle One) 1 (53)

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER _____ (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) DATE: 10/31/80 (54–59)

(2) _____ (Authorized Signature) DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

[signature] (Authorized Signature) DATE: 10/31/80 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

0000101

STATE OF ILLINOIS ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0610

LPC 62 8/81

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) **EPA Form 8700-22 (3-84)** Form Approved. OMB No. 2000-0404. Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: I L D 0 9 5 3 0 9 6 4 7 — Manifest Document No.: 0 0 0 0

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law, but is required by Illinois law.

GENERATOR

3. Generator's Name and Mailing Address
Batavia Coatings Division/Whittaker Corporation
1500 Lathem Street, Batavia, Illinois 60510

4. Generator's Phone (312) 879-6800

A. Illinois Manifest Document Number: IL 1221126

B. Illinois Generator's ID: 0 8 9 0 1 0 5 0 0 5

5. Transporter 1 Company Name: Mr. Frank, Inc.

6. US EPA ID Number: I L D 0 6 9 5 0 6 1 6 0

C. Illinois Tranporter's ID: 0079

(312) 596-3377 Transporter's Phone

7. Transporter 2 Company Name

8. US EPA ID Number

E. Illinois Transporter's ID: 0 0 7 9

F. Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Service
420 South Colfax
Griffith, Indiana 46319

10. US EPA ID Number: I N D 0 1 6 3 6 0 2 6 5

G. Illinois Facility's ID: 9 1 8 0 8 9 0 0 0 2

H. Facility's Phone: (312 768-3400

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	Waste Solvent Liquid Flammable UN 1993	X	001	TT	04,000	1	EPA HW Number: F005 Authorization Number: 000000
b.							EPA HW Number Authorization Number
c.							EPA HW Number Authorization Number
d.							EPA HW Number Authorization Number

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above
In Item #14: 1 = Gallons
2 = Cubic Yards

15. Special Handling Instructions and Additional Information
If waste solvent in item 11 is undeliverable for any reason - return to generator.

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, and Illinois regulations.

Printed/Typed Name: N. B. Ballingall — Signature — Date: Month Day Year 01 10 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: John Van Vlymen — Signature — Date: Month Day Year 01 10 85

18. Transporter 2 Acknowledgement or Receipt of Materials
Printed/Typed Name — Signature — Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: F DUNFEE — Signature — Date: Month Day Year 1 10 85

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV # 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½ Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

009867

STATE OF ILLINOIS ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0610
LPC 62 8/81

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) **EPA Form 8700-22 (3-84)** Form Approved. OMB No. 2000-0404 Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: I L D 0 9 5 3 0 9 6 4 7 — Manifest Document No.:

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law, but is required by Illinois law.

GENERATOR

3. Generator's Name and Mailing Address
BATAVIA COATINGS DIVISION/WHITTAKER CORPORATION
1500 LATHEM STREET, BATAVIA, ILLINOIS 60510
4. Generator's Phone (312) 879-3137

A. Illinois Manifest Document Number: IL 1221127

B. Illinois Generator's ID: 0 8 9 0 1 0 5 0 0 5

5. Transporter 1 Company Name: MR. FRANK, INC.
6. US EPA ID Number: I L D 0 6 9 5 0 6 1 6 0

C. Illinois Tranporter's ID: 0 0 7 9

D. (312) 596-3377 Transporter's Phone

7. Transporter 2 Company Name
8. US EPA ID Number

E. Illinois Transporter's ID

F. ( ) Transporter's Phone

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
420 SOUTH COLFAX
GRIFFITH, INDIANA 46319
10. US EPA ID Number: I N D 0 1 6 3 6 0 2 6 5

G. Illinois Facility's ID: 9 1 8 0 8 9 0 0 0 2

H. Facility's Phone: (312) 768-3400

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	N.O.S. WASTE SOLVENT LIQUID FLAMMABLE UN 1993	X	001	TT	0 0 0 4 5 0 0	G	EPA HW Number: F 0 0 5
b.							EPA HW Number:
c.							EPA HW Number:
d.							EPA HW Number:

Authorization Number

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above
In Item #14: 1 = Gallons, 2 = Cubic Yards

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, and Illinois regulations.

Printed/Typed Name: C. ARMBRECHT — Signature: C Armbrecht — Date (Month Day Year): 01 29 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: MICHAEL A. PFEIFER — Signature: Michael A. Pfeifer — Date (Month Day Year): 01 29 85

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name — Signature — Date (Month Day Year)

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: R Rusluck — Signature: R Rusluck — Date (Month Day Year): 01 29 85

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV.# 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½ Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

126RT-63

009866

ST. ILLINOIS ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0610

LPC 62 8/81

Please print or type. (Form designed for use on elite (12-pitch) typewriter) EPA Form 8700-22 (3-84) Form Approved. OMB No. 2000-0404. Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: I L D 0 9 5 3 0 9 6 4 7 | Manifest Document No.

2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but is required by Illinois law.

3. Generator's Name and Mailing Address
BATAVIA COATINGS DIVISION/WHITTAKER CORPORATION,
1500 LATHEM STREET, BATAVIA, ILLINOIS 60510

4. Generator's Phone (312) 879-6800

A. Illinois Manifest Document Number: IL 1221128

B. Illinois Generator's ID: 0 8 9 0 1 0 5 0 0 5

5. Transporter 1 Company Name: MR. FRANK, INC.

6. US EPA ID Number: I L D 0 6 9 5 0 6 1 6 0

C. Illinois Tranporter's ID:

D. (312) 596-3377 Transporter's Phone

7. Transporter 2 Company Name:

8. US EPA ID Number:

E. Illinois Transporter's ID: 0 0 7 9

F. ( ) Transporter's Phone

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
420 SOUTH COLFAX
GRIFFITH, INDIANA 46319

10. US EPA ID Number: I N D 0 1 6 3 6 0 2 6 5

G. Illinois Facility's ID: 9 1 8 0 8 9 0 0 0 2

H. Facility's Phone: (312) 768-3400

GENERATOR

	HM	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	X	WASTE FLAMMABLE LIQUID N.O.S. ~~WASTE SOLVENT~~ LIQUID FLAMMABLE UN 1993	0 0 1	T T	03000	1	EPA HW Number: F 0 0 5 / Authorization Number:
b.							EPA HW Number: / Authorization Number:
c.							EPA HW Number: / Authorization Number:
d.							EPA HW Number: / Authorization Number:

J. Additional Descriptions for Materials Listed Above: WASTE SOLVENTS

K. Handling Codes for Wastes Listed Above
In Item #14: 1 = Gallons, 2 = Cubic Yards

15. Special Handling Instructions and Additional Information

IF WASTE SOLVENT IN ITEM 11 IS UNDELIVERABLE FOR ANY REASON - RETURN TO GENERATOR

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, and Illinois regulations.

Printed/Typed Name: N. B. BALLINGALL | Signature: N. B. | Date: Month Day Year 02 28 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: MICHAEL A. PFEIFER | Signature: Michael A. Pfeifer | Date: Month Day Year 02 28 85

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name: | Signature: | Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: FDUNFEE | Signature: Dunfee | Date: Month Day Year 02 28 85

IN ILLINOIS: 217 / 782-3637 "24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS" OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV. # 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½, Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

125 T< T63 059869

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0610
LPC 62 8/81

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) EPA Form 8700-22 (3-84) Form Approved. OMB No. 2000-0404 Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I L D 0 9 5 3 0 9 6 4 7 — Manifest Document No.

2. Page 1 of 1

Information in the shaded areas is not required by Federal law, but is required by Illinois law.

3. Generator's Name and Mailing Address
Batavia Coatings Division/Whittaker Corporation
1500 Lathem Street, Batavia, Illinois 60510

4. Generator's Phone (312) 879-6800

A. Illinois Manifest Document Number IL 1221129

B. Illinois Generator's ID 0890105005

5. Transporter 1 Company Name: Mr. Frank, Inc.

6. US EPA ID Number: I L D 0 6 9 5 0 6 1 6 0

C. Illinois Tranporter's ID

D. 312 596-3377 Transporter's Phone

7. Transporter 2 Company Name

8. US EPA ID Number

E. Illinois Transporter's ID 0079

F. ( ) Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Service
420 South Colfax
Griffith, Indiana 46319

10. US EPA ID Number: I N D 0 1 6 3 6 0 2 6 5

G. Illinois Facility's ID 9180890002

H. Facility's Phone (312) 768-3400

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
GENERATOR a.	Waste Flammable Liquid N.O.S. Flammable Liquid UN1993	X	001	TT	04500	1	EPA HW Number F005 / Authorization Number
b.							EPA HW Number / Authorization Number
c.							EPA HW Number / Authorization Number
d.							EPA HW Number / Authorization Number

J. Additional Descriptions for Materials Listed Above
1. Waste Solvent

K. Handling Codes for Wastes Listed Above
In Item #14: 1 = Gallons, 2 = Cubic Yards

15. Special Handling Instructions and Additional Information

If waste solvent in item 11 is undeliverable for any reason - return to generator.

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, and Illinois regulations.

Printed/Typed Name: N. B. Ballingall — Signature — Date: Month Day Year 03 09 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: David W. Bogda — Signature: DW Bogda — Date: Month Day Year 03 09 85

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name — Signature — Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: FDUNFEE — Signature — Date: Month Day Year 3 18 85

IN ILLINOIS: 217 / 782-3637 — 24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS — OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV. # 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½, Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

125 R T-63

009890

STATE OF ILLINOIS ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0610
LPC 62 8/81

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) EPA Form 8700-22 (3-84) Form Approved. OMB No. 2000-0404 Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. ILD095309547 — Manifest Document No.

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law, but is required by Illinois law.

GENERATOR

3. Generator's Name and Mailing Address
Batavia Coatings Division/Whittaker Corportaion
1500 Lathem Street, Batavia, Illinois 60510

A. Illinois Manifest Document Number IL 1221130

4. Generator's Phone (312) 879-6800

B. Illinois Generator's ID 0 1 8 9 0 1 1 0 1 5 0 1 0 1 5

5. Transporter 1 Company Name: Mr. Frank, Inc. — 6. US EPA ID Number: ILD 06 95 06 1 6 0 — C. Illinois Tranporter's ID

D. (312) 596-3377 Transporter's Phone

7. Transporter 2 Company Name — 8. US EPA ID Number — E. Illinois Transporter's ID 0 1 0 7 9

F. ( ) Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Service
420 South Colfax
Griffith, Inddana 46319

10. US EPA ID Number: IN D0 163 60 26 5

G. Illinois Facility's ID 9 1 1 8 1 0 8 9 0 1 0 1 0 1 2

H. Facility's Phone (312) 769-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a. Waste Flammable Liquid N. O. S. Flammable Liquid UN 1993	X	00 1	TT	04200	1	EPA HW Number F0 0 1 5 / Authorization Number
b.						EPA HW Number / Authorization Number
c.						EPA HW Number / Authorization Number
d.						EPA HW Number / Authorization Number

J. Additional Descriptions for Materials Listed Above
Waste Solvent

K. Handling Codes for Wastes Listed Above
In Item #14: 1 = Gallons, 2 = Cubic Yards

15. Special Handling Instructions and Additional Information
If waste solvent in item 11 is undeliverable for any reason - return to generator.

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, and Illinois regulations.

Printed/Typed Name	Signature	Date (Month Day Year)
N. B. Ballingall		0 3 2 5 8 5

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)
DAVID W. BOGDA	D W Bogda	0 3 2 5 3 5

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name	Signature	Date (Month Day Year)
EDUNFEE	H Dunfee	3 2 5 8 5

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637 OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV. # 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½ Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

123 K T-63

UU9891

STATE OF ILLINOIS — ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0610
LPC 62 8/81

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) EPA Form 8700-22 (3-84) Form Approved. OMB No. 2000-0404. Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. ILD095309647 — Manifest Document No.

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law, but is required by Illinois law.

3. Generator's Name and Mailing Address
Batavia Coatings Division/Whittaker Corporation
1500 Lathem Street, Batavia, Illinois 60510

4. Generator's Phone (312) 879-6800

A. Illinois Manifest Document Number: IL 1221131

B. Illinois Generator's ID: 0890105005

5. Transporter 1 Company Name: Mr. Frank, Inc.

6. US EPA ID Number: ILD069506160

C. Illinois Tranporter's ID:

D. (312) 596-3377 Transporter's Phone

7. Transporter 2 Company Name:

8. US EPA ID Number:

E. Illinois Transporter's ID: 0079

F. ( ) Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Service
420 South Colfax
Griffith, Indiana 46319

10. US EPA ID Number: IND016360265

G. Illinois Facility's ID: 9180890002

H. Facility's Phone: 312 768-3400

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. Waste Flammable Liquid N.O.S. Flammable Liquid UN1993	X	001	TT	05000	G 1	EPA HW Number F005
b.						EPA HW Number
c.						EPA HW Number
d.						EPA HW Number

Authorization Number

J. Additional Descriptions for Materials Listed Above
Waste Solvent

K. Handling Codes for Wastes Listed Above
In Item #14: 1 = Gallons
2 = Cubic Yards

15. Special Handling Instructions and Additional Information
If waste solvent in item 11 is undeliverable for any reason - return to generator.

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, and Illinois regulations.

Printed/Typed Name: N. B. Ballingall — Signature — Date: Month Day Year 4 16 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: CARL E PROSSER — Signature — Date: Month Day Year 04 16 85

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name: — Signature — Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: FDUNFEE — Signature — Date: Month Day Year 4/16/85

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV. # 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½ Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

212 ET-50

009842

STATE OF ILLINOIS — ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0610

LPC 62 8/81

Please print or type. (Form designed for use on elite (12-pitch) typewriter) EPA Form 8700-22 (3-84) Form Approved. OMB No. 2000-0404 Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I L D 0 9 5 3 0 9 6 4 7 — Manifest Document No.

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law, but is required by Illinois law.

3. Generator's Name and Mailing Address
Batavia Coatings Division/Whittaker Corporation
1500 Lathem Street, Batavia, Illinois 60510

4. Generator's Phone (312) 879-6800

A. Illinois Manifest Document Number IL 1221132

B. Illinois Generator's ID 0 8 9 0 1 0 5 0 0 5

5. Transporter 1 Company Name: Mr. Frank, Inc.

6. US EPA ID Number: I L D 0 6 9 5 0 6 1 6 0

C. Illinois Tranporter's ID

D. (312) 596-3377 Transporter's Phone

7. Transporter 2 Company Name

8. US EPA ID Number

E. Illinois Transporter's ID 0 0 7 9

F. ( ) Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Service
420 South Colfax
Griffith, Indiana 46319

10. US EPA ID Number: I N D 0 1 6 3 6 0 2 6 5

G. Illinois Facility's ID 9 1 8 0 8 9 0 0 0 2

H. Facility's Phone (312) 768-3400

GENERATOR

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	Waste Flammable Liquid N.O.S. Flammable Liquid UN1993	X	001	TT	04200	1	EPA HW Number F005; Authorization Number
b.							EPA HW Number; Authorization Number
c.							EPA HW Number; Authorization Number
d.							EPA HW Number; Authorization Number

J. Additional Descriptions for Materials Listed Above
Waste Solvent

K. Handling Codes for Wastes Listed Above
In Item #14: 1 = Gallons, 2 = Cubic Yards

15. Special Handling Instructions and Additional Information
If waste solvent in item 11 is undeliverable for any reason - return to generator.

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, and Illinois regulations.

Printed/Typed Name: N. B. Ballingall — Signature — Date: Month 5 Day 10 Year 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Moe Woonhoff — Signature — Date: Month 5 Day 10 Year 85

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name — Signature — Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: FDUNFEE — Signature — Date: Month 5 Day 10 Year 85

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV. # 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½ Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

205 RT-50

009893

STATE OF ILLINOIS ENVIRONMENTAL PROTECTION AGENCY DIVISION

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (2...

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) EPA Form 8700-22 (3-84)

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: ILD095309647 | Manifest Document No. | 2. Page 1 of 1

3. Generator's Name and Mailing Address
Batavia Coatings Division/Whittaker Corporation
1500 Lathem Street, Batavia, Illinois, 60510

4. Generator's Phone (312) 879-6800

A. Illinois Manifest: IL 122...

B. Illinois Generator's ID: 0890106

5. Transporter 1 Company Name: Mr. Frank, Inc.

6. US EPA ID Number: ILD069506160

C. Illinois Tranporter's ID

D. (312) 596-3377 Transporter's Phone

7. Transporter 2 Company Name

8. US EPA ID Number

E. Illinois Transporter's ID: 0079

F. ( ) Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Service
420 South Colfax
Griffith, Indiana, 46319

10. US EPA ID Number: IND016360265

G. Illinois Facility's ID: 9180890002

H. Facility's Phone: (312) 768-3400

GENERATOR

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	Waste Flammable Liquid N.O.S. Flammable Liquid UN1993	X	001	TT	4200	1	EPA HW Number: F005 Authorization Number:
b.							EPA HW Number: Authorization Number:
c.							EPA HW Number: Authorization Number:
d.							EPA HW Number: Authorization Number:

J. Additional Descriptions for Materials Listed Above
Waste Solvent

K. Handling Codes for Wastes Listed Above
In Item #14: 1 = Gallons
2 = Cubic Yards

15. Special Handling Instructions and Additional Information
If waste solvent in item 11 is undeliverable for any reason - return to generator.

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, and Illinois regulations.

Printed/Typed Name: N. B. Ballingall - Dan Greske | Signature: Dan C. Greske | Date: Month 6 Day 13 Year 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Moe Wonhoff | Signature: Moe Wonhoff | Date: Month 6 Day 13 Year 85

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name | Signature | Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: F DUNFEE | Signature: F Dunfee | Date: Month 6 Day 13 Year 85

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV. # 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½, Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

126R T-63

UJ9874

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0610

LPC 62 8/81

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) EPA Form 8700-22 (3-84) Form Approved. OMB No. 2000-0404. Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I L D 0 9 5 3 0 9 6 4 7 — Manifest Document No.

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law, but is required by Illinois law.

GENERATOR

3. Generator's Name and Mailing Address
Batavia Coatings Division/Whittaker Corporation
1500 Lathem Street, Batavia, Illinois, 60510

4. Generator's Phone (312) 879-6800

A. Illinois Manifest Document Number: IL 1221134

B. Illinois Generator's ID: 0 8 9 0 1 0 5 0 0 5

5. Transporter 1 Company Name: Mr. Frank, Inc.

6. US EPA ID Number: I L D 0 6 9 5 0 6 1 6 0

C. Illinois Tranporter's ID

D. (312) 596-3377 Transporter's Phone

7. Transporter 2 Company Name

8. US EPA ID Number

E. Illinois Transporter's ID: 0 0 7 9

F. ( ) Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Service
420 South Colfax
Griffith, Indiana, 46319

10. US EPA ID Number: I N D 0 1 6 3 6 0 2 6 5

G. Illinois Facility's ID: 9 1 8 0 8 9 0 0 0 2

H. Facility's Phone: (312) 768-3400

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a.	Waste Flammable Liquid N.O.S. Flammable Liquid UN1993	X	0 0 1	TT	4200	1	EPA HW Number: F 0 0 5 / Authorization Number
b.							EPA HW Number / Authorization Number
c.							EPA HW Number / Authorization Number
d.							EPA HW Number / Authorization Number

J. Additional Descriptions for Materials Listed Above
Waste Solvent

K. Handling Codes for Wastes Listed Above
In Item #14: 1 = Gallons, 2 = Cubic Yards

15. Special Handling Instructions and Additional Information
If waste solvent in item 11 is undeliverable for any reason - return to generator.

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, and Illinois regulations.

Printed/Typed Name: N. B. Ballingall — Signature — Date: Month Day Year 0 7 0 9 8 5

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Mor Weaver — Signature — Date: Month Day Year 0 7 0 9 8 5

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name — Signature — Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: F DUNFEE — Signature — Date: Month Day Year 0 7 1 0 8 5

IN ILLINOIS: 217 / 782-3637 — 24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBER — OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV. # 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½ Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

125 FT-63

009895

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0610

LPC 62 8/81

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) EPA Form 8700-22 (3-84) Form Approved. OMB No. 2000-0404 Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: ILD095309647 — Manifest Document No.:

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law, but is required by Illinois law.

3. Generator's Name and Mailing Address
Batavia Coatings Division/Whittaker Corporation
1500 Lathem Street, Batavia, Illinois 60510

4. Generator's Phone (312) 879-6800

A. Illinois Manifest Document Number: IL 1221135

B. Illinois Generator's ID: 0890105005

5. Transporter 1 Company Name: Mr. Frank, Inc.

6. US EPA ID Number: ILD069506160

C. Illinois Tranporter's ID:

D. (312) 596-3377 Transporter's Phone

7. Transporter 2 Company Name:

8. US EPA ID Number:

E. Illinois Transporter's ID: 0079

F. ( ) Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Service
420 South Colfax
Griffith, Indiana 46319

10. US EPA ID Number: IND016360265

G. Illinois Facility's ID:

H. Facility's Phone: (312) 768-3400

GENERATOR

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	Waste Flammable Liquid N.O.S. Flammable Liquid UN 1993	x	001	TT	04200	1	EPA HW Number: F005; Authorization Number:
b.							EPA HW Number: ; Authorization Number:
c.							EPA HW Number: ; Authorization Number:
d.							EPA HW Number: ; Authorization Number:

J. Additional Descriptions for Materials Listed Above
Waste Solvent

K. Handling Codes for Wastes Listed Above
In Item #14: 1 = Gallons
2 = Cubic Yards

15. Special Handling Instructions and Additional Information

If waste solvent in item 11 is undeliverable for any reason - return to generator.

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, and Illinois regulations.

Printed/Typed Name: N. B. Ballingall — Signature: [signature] — Date: Month 8 Day 5 Year 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Moe Wornhoff — Signature: Moe Wornhoff — Date: Month 8 Day 5 Year 85

18. Transporter 2 Acknowledgement or Receipt of Materials
Printed/Typed Name: — Signature: — Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

9:50 pm

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: F DUNKE — Signature: [signature] — Date: Month 8 Day 5 Year 85

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV.# 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½ Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

211 E T-50

009896

STATE OF ILLINOIS — ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0610

LPC 62 8/81

Please print or type. (Form designed for use on elite (12-pitch) typewriter) **EPA Form 8700-22 (3-84)** Form Approved. OMB No. 2000-0404. Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: ILD 095309647 — Manifest Document No.: 00001

2. Page 1 of 1

Information in the shaded areas is not required by Federal law, but is required by Illinois law.

GENERATOR

3. Generator's Name and Mailing Address
Batavia Coatings Division/Whittaker Corporation
1500 Lathem Street, Batavia, Illinois 60510

4. Generator's Phone (312) 879-6300

A. Illinois Manifest Document Number: IL 1330201

B. Illinois Generator's ID: 0890105005

5. Transporter 1 Company Name: Mr. Frank, Inc.

6. US EPA ID Number: ILD 065506160

C. Illinois Tranporter's ID: 10079

D. (312) 596-3377 Transporter's Phone

7. Transporter 2 Company Name:

8. US EPA ID Number:

E. Illinois Transporter's ID: 0079

F. ( ) Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Service
420 South Colfax
Griffith, Indiana 46319

10. US EPA ID Number: IND 016360265

G. Illinois Facility's ID: 918089000 2

H. Facility's Phone: (312) 768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. Waste Flammable Liquid N.O.S. Flammable Liquid UN 1993	X	001	TT	05000	1	EPA HW Number: F005; Authorization Number: 000000
b.						EPA HW Number; Authorization Number
c.						EPA HW Number; Authorization Number
d.						EPA HW Number; Authorization Number

J. Additional Descriptions for Materials Listed Above
Waste Solvent

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
If waste solvent in item 11 is undeliverable for any reason - return to generator.

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, and Illinois regulations.

Printed/Typed Name: N.B. Ballingall — Signature — Date: Month 8 Day 7 Year 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: John VanVlymen — Signature — Date: Month 08 Day 28 Year 85

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name: — Signature — Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: FDUNFEE — Signature — Date: Month 8 Day 29 Year 85

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV. # 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½ Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

2110K T-50 119003 30

009897

STATE OF ILLINOIS — ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0610
LPC 62 8/81

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) EPA Form 8700-22 (3-84) Form Approved. OMB No. 2000-0404. Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: I L D 0 9 5 3 0 9 6 4 7 — Manifest Document No.

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law, but is required by Illinois law.

GENERATOR

3. Generator's Name and Mailing Address
Batavia Coatings Division/Whittaker Corporation
1500 Lathem Street, Batavia, Illinois, 60510

4. Generator's Phone (312) 879-6800

A. Illinois Manifest Document Number: IL 1330202

B. Illinois Generator's ID: 0 8 9 0 1 0 5 0 0 5

5. Transporter 1 Company Name: Mr. Frank, Inc.

6. US EPA ID Number: I L D 0 6 9 5 0 6 1 6 0

C. Illinois Tranporter's ID:

D. (312) 596-3377 Transporter's Phone

7. Transporter 2 Company Name:

8. US EPA ID Number:

E. Illinois Transporter's ID: 0 0 7 9

F. ( ) Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Service
420 South Colfax
Griffith, Indiana, 46319

10. US EPA ID Number: I N D 0 1 6 3 6 0 2 6 5

G. Illinois Facility's ID: 9 1 8 0 8 9 0 0 0 2

H. Facility's Phone (312 768-3400

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	Waste Flammable Liquid N.O.S. Flammable Liquid UN1993	X	001	TT	055000	1	EPA HW Number: F005; Authorization Number:
b.							EPA HW Number: ; Authorization Number:
c.							EPA HW Number: ; Authorization Number:
d.							EPA HW Number: ; Authorization Number:

J. Additional Descriptions for Materials Listed Above: Waste Solvent

K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information
If waste solvent in item 11 is undeliverable for any reason - return to generator.

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, and Illinois regulations.

Printed/Typed Name: N. B. Ballingall — Signature — Date: Month Day Year 09 16 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: DWAYNE STOCK — Signature — Date: Month Day Year 09 16 85

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name: — Signature — Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: FDUNFEE — Signature — Date: Month Day Year 9 16 85

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS IN ILLINOIS: 217 / 782-3637 OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV. # 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½ Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

210 K T-50

009898

STATE OF ILLINOIS — ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0610
LPC 62 8/81

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) EPA Form 8700-22 (3-84) Form Approved. OMB No. 2000-0404 Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: I L D 0 9 5 3 0 9 6 4 7 — Manifest Document No.

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law, but is required by Illinois law

GENERATOR

3. Generator's Name and Mailing Address
Batavia Coatings Division/Whittaker Corporation
1500 Lathem Street, Batavia, Illinois, 60510

4. Generator's Phone (312) 879-6800

A. Illinois Manifest Document Number: IL 1330204

B. Illinois Generator's ID: 0 8 9 0 1 0 5 0 0 5

5. Transporter 1 Company Name: Mr. Frank, Inc.

6. US EPA ID Number: I L D 0 6 9 5 0 6 1 6 0

C. Illinois Tranporter's ID:

D. (312 596-3377 Transporter's Phone

7. Transporter 2 Company Name:

8. US EPA ID Number:

E. Illinois Transporter's ID: 0 0 7 9

F. ( ) Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Service
420 South Colfax
Griffith, Indiana, 46319

10. US EPA ID Number: I N D 0 1 6 3 6 0 2 6 5

G. Illinois Facility's ID: 9 1 8 0 8 9 0 0 0 2

H. Facility's Phone (312 768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. Waste Flammable Liquid N.O.S. Flammable Liquid UN1993	X	0 0 1	T T	03000	1	EPA HW Number F 0 0 5 / Authorization Number
b. Waste Solvent If waste solvent in item 11 is undeliverable for any reason - return to generator.						EPA HW Number / Authorization Number
c.						EPA HW Number / Authorization Number
d.						EPA HW Number / Authorization Number

J. Additional Descriptions for Materials Listed Above
Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, and Illinois regulations.

Printed/Typed Name: N. B. Ballingall — Signature — Date: Month Day Year 10 6 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Ron Bridgewater — Signature — Date: Month Day Year 10 6 85

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name: — Signature — Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: — Signature — Date: Month Day Year 10 10 85

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV. 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½, Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

211E-T-50

009899

STATE OF ILLINOIS ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0610
LPC 62 8/81

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) EPA Form 8700-22 (3-84) Form Approved. OMB No. 2000-0404. Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I L D 0 9 5 3 0 9 6 4 7 Manifest Document No. 009900

2. Page 1 of 1

Information in the shaded areas is not required by Federal law, but is required by Illinois law.

3. Generator's Name and Mailing Address
Batavia Coatings Division/Whittaker Copporation
1500 Lathem Street, Batavia, Illinois, 60510
4. Generator's Phone (312) 879-6800

A. Illinois Manifest Document Number IL 1330205

B. Illinois Generator's ID 0 8 9 0 1 0 5 0 0 5

5. Transporter 1 Company Name: Mr. Frank, Inc.
6. US EPA ID Number: I L D 0 6 9 5 0 6 1 6 0

C. Illinois Tranporter's ID 00229

D. (312) 590-3377 Transporter's Phone

7. Transporter 2 Company Name
8. US EPA ID Number

E. Illinois Transporter's ID

F. ( ) Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Service
420 South Colfax
Griffith, Indiana, 46319
10. US EPA ID Number: I N D 0 1 6 3 0 2 6 5

G. Illinois Facility's ID 1 9 1 8 1 0 1 8 9 0 1 0 0 1 2

H. Facility's Phone (312) 768-3400

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	Waste Flammable Liquid N.O.S. Flammable Liquid UN1993	X	0 0 1	TT	04200	1	EPA HW Number F 0 0 5 Authorization Number
b.	Waste Solvent—If waste solvent in item 11 is undeliverable for reason-return to generator.						EPA HW Number Authorization Number
c.							EPA HW Number Authorization Number
d.							EPA HW Number Authorization Number

J. Additional Descriptions for Materials Listed Above
Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable to me which minimizes the present and future threat to human health and the environment.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, and Illinois regulations.

GENERATOR

Printed/Typed Name [redacted] MARK ANDY Signature Mark Andy Date Month Day Year 10 23 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name MICHAEL A. PFEIFER Signature Michael A. Pfeifer Date Month Day Year 10 23 85

18. Transporter 2 Acknowledgement or Receipt of Materials
Printed/Typed Name Signature Date Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name F DUNFEE Signature F Dunfee Date Month Day Year 10 25 85

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBER OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV. # 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½, Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

123 K T-63

009900

STATE OF ILLINOIS ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0610

LPC 52 8/81

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) EPA Form 8700-22 (3-84) Form Approved. OMB No. 2000-0404. Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: I L D 0 9 5 3 0 9 6 4 7 | Manifest Document No.:

2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but is required by Illinois law.

GENERATOR

3. Generator's Name and Mailing Address
Batavia Coatings Division/Whittaker Corporation
1500 Lathem Street, Batavia, Illinois, 60510

4. Generator's Phone (312) 879-6800

A. Illinois Manifest Document Number: IL 1330206

B. Illinois Generator's ID: 0 8 9 0 1 0 5 0 0 5

5. Transporter 1 Company Name: Mr. Frank, Inc.

6. US EPA ID Number: I L D 0 6 9 5 0 6 1 6 0

C. Illinois Tranporter's ID:

D. (312) 596-3377 Transporter's Phone

7. Transporter 2 Company Name

8. US EPA ID Number

E. Illinois Transporter's ID: 0 0 7 9

F. ( ) Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Service
420 South Colfax
Griffith, Indiana, 46319

10. US EPA ID Number: I N D 0 1 6 3 6 0 2 6 5

G. Illinois Facility's ID: 9 1 8 0 8 9 0 0 0 2

H. Facility's Phone: (312 768-3400

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	Waste Flammable Liquid N.O.S. Flammable Liquid UN1993	X	001	TT	95000	1	EPA HW Number: F005; Authorization Number:
b.	Waste Solvent If waste solvent in item 11 is undeliverable for any reason - return to generator.						EPA HW Number: ; Authorization Number:
c.							EPA HW Number: ; Authorization Number:
d.							EPA HW Number: ; Authorization Number:

J. Additional Descriptions for Materials Listed Above

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, and Illinois regulations.

Printed/Typed Name: N. B. Ballingall | Signature: N B Ballingall | Date: Month 11 Day 20 Year 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Dwayne Shaw | Signature: Dwayne Shaw | Date: Month 11 Day 20 Year 85

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name | Signature | Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: FD UNFEE | Signature | Date: Month 11 Day 21 Year 85

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637 OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV. # 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½, Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

210KT-50

09901

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0610
LPC 62 8/81

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) EPA Form 8700-22 (3-84) Form Approved. OMB No. 2000-0404. Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I L D 0 9 5 3 0 9 6 4 7 | Manifest Document No.

2. Page 1 of 1 | information in the shaded areas is not required by Federal law, but is required by Illinois law.

GENERATOR

3. Generator's Name and Mailing Address
Batavia Coatings Division/Whittaker Corporation
1500 Lathem Street, Batavia, Illinois, 60510
4. Generator's Phone (312) 879-6800

A. Illinois Manifest Document Number IL 1330207

B. Illinois Generator's ID 0 8 9 0 1 0 5 0 0 5

5. Transporter 1 Company Name: Mr. Frank, Inc.
6. US EPA ID Number: I L D 0 6 9 5 0 6 1 6 0

C. Illinois Tranporter's ID 00179

D. (312) 596-3377 Transporter's Phone

7. Transporter 2 Company Name
8. US EPA ID Number

E. Illinois Transporter's ID 00179

F. ( ) Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Service
420 South Colfax
Griffith, Indiana, 46319
10. US EPA ID Number: I N D 0 1 6 3 6 0 2 6 5

G. Illinois Facility's ID 9 1 8 0 8 9 0 0 0 2

H. Facility's Phone (312) 768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. Waste Flammable Liquid N.O.S. Flammable Liquid UN1993	X	0 0 1	T T	04200	1	EPA HW Number F 0 0 5 / Authorization Number
b. Waste Solvent If waste solvent in item 11 is undeliverable for any reason - return to generator.						EPA HW Number / Authorization Number
c.						EPA HW Number / Authorization Number
d.						EPA HW Number / Authorization Number

J. Additional Descriptions for Materials Listed Above
Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, and Illinois regulations.

Printed/Typed Name: N. B. Ballingall | Signature | Date: Month Day Year 12 30 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Michael Martin | Signature | Date: Month Day Year 12 30 85

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name | Signature | Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: FDUNFEE | Signature | Date: Month Day Year 12 30 85

*24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637 OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV # 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½ Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center

FACILITY COPY - PART 3

210Z-T-50

009902

STATE OF ILLINOIS ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0610
LPC 62 8/81

Please print or type. (Form designed for use on elite (12-pitch) typewriter) EPA Form 8700-22 (3-84) Form Approved. OMB No. 2000-0404 Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: I L D 0 9 5 3 0 9 6 4 7 | Manifest Document No.: 0 0 0 0 1

2. Page 1 of 1

Information in the shaded areas is not required by Federal law, but is required by Illinois law.

GENERATOR

3. Generator's Name and Mailing Address
Batavia Coatings Division/Whittaker Corporation
1500 Lathem Street, Batavia, Illinois, 60510

4. Generator's Phone (312) 879-6800

A. Illinois Manifest Document Number: IL 1330208

B. Illinois Generator's ID: 0 8 9 0 1 0 5 0 0 5

5. Transporter 1 Company Name: Mr. Frank, Inc.

6. US EPA ID Number: I L D 0 6 9 5 0 6 1 6 0

C. Illinois Tranporter's ID: 0 0 7 9

D. (312) 596-3377 Transporter's Phone

7. Transporter 2 Company Name

8. US EPA ID Number

E. Illinois Transporter's ID

F. ( ) Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Service
420 South Colfax
Griffith, Indiana, 46319

10. US EPA ID Number: I N D 0 1 6 3 6 0 2 6 5

G. Illinois Facility's ID: 0 1 8 0 8 9 0 0 0 2

H. Facility's Phone: (312) 768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	L Waste No.
a. Waste Flammable Liquid N.O.S. Flammable Liquid UN1993	X	0 0 1	T T	0 4 2 0 0	1	EPA HW Number: F 0 0 5 Authorization Number: 0 0 0 0 0 0
b. Waste Solvent If waste solvent in item 11 is undeliverable for any reason - return to generator.						EPA HW Number: Authorization Number:
c.						EPA HW Number: Authorization Number:
d.						EPA HW Number: Authorization Number:

J. Additional Descriptions for Materials Listed Above
Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, and Illinois regulations.

Printed/Typed Name	Signature	Date (Month Day Year)
N. B. Ballingall	N B Ballingall	0 1 2 2 8 6

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)
John VanVlymen	John VanVlymen	0 1 2 2 8 6

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name	Signature	Date (Month Day Year)
F DUNFEE	F Dunfee	1 2 2 8 6

*24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637 OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV # 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½, Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

125R 7-63

01375

STATE OF ILLINOIS ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0610
LPC 62 8/81

Please print or type. (Form designed for use on elite (12-pitch) typewriter) EPA Form 8700-22 (3-84) Form Approved. OMB No. 2000-0404 Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I L D 0 9 5 3 0 9 6 4 7 — Manifest Document No. 0 0 0 0 1

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law, but is required by Illinois law.

3. Generator's Name and Mailing Address
Batavia Coatings Division/Whittaker Corporation
1500 Lathem Street, Batavia, Illinois, 60510

4. Generator's Phone (312) 876-6800

A. Illinois Manifest Document Number IL 1330209

B. Illinois Generator's ID 0 8 9 0 1 0 5 0 0 5

5. Transporter 1 Company Name: Mr. Frank, Inc.

6. US EPA ID Number: I L D 0 6 9 5 0 6 1 6 0

C. Illinois Tranporter's ID 0 0 7 9

D. (312) 596-3377 Transporter's Phone

7. Transporter 2 Company Name

8. US EPA ID Number

E. Illinois Transporter's ID

F. ( ) Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Service
420 South Colfax
Griffith, Indiana, 46319

10. US EPA ID Number: I N D 0 1 6 3 6 0 2 6 5

G. Illinois Facility's ID 9 1 8 0 8 9 0 0 0 2

H. Facility's Phone (312) 768-3400

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
GENERATOR a.	Waste Flammable Liquid N.O.S. Flammable Liquid UN1993	X	0 0 1	T T	04200	1	EPA HW Number D 0 0 5; Authorization Number 000000
b.	Waste Solvent If waste solvent in item 11 is undeliverable for any reason - return to generator.						EPA HW Number; Authorization Number
c.							EPA HW Number; Authorization Number
d.							EPA HW Number; Authorization Number

J. Additional Descriptions for Materials Listed Above
Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, and Illinois regulations.

Printed/Typed Name	Signature	Date (Month Day Year)
N. B. Ballingall		02 05 86

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)
John Van Ulmen	John Van Ulmen	02 05 86

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name	Signature	Date (Month Day Year)
F DUNFEE	F Dunfee	2 5 86

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637 OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV.# 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½, Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

212 E T-50

011396

STATE OF ILLINOIS ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0610
LPC 62 8/81

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) **EPA Form 8700-22 (3-84)** Form Approved. OMB No. 2000-0404. Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: ILD 095309647 | Manifest Document No.:

2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but is required by Illinois law.

3. Generator's Name and Mailing Address
Batavia Coatings Division/Whittaker Corporation
1500 Lathem Street, Batavia, Illinois 60510
4. Generator's Phone (312) 879 6800

A. Illinois Manifest Document Number: IL 1330210
B. Illinois Generator's ID: 0890105005

5. Transporter 1 Company Name: Mr. Frank, Inc.
6. US EPA ID Number: ILD069506160
C. Illinois Tranporter's ID: 00719
D. (312) 596-3377 Transporter's Phone

7. Transporter 2 Company Name
8. US EPA ID Number
E. Illinois Transporter's ID:
F. ( ) Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Service
420 South Colfax
Griffith, Indiana 46319
10. US EPA ID Number: IND016360265
G. Illinois Facility's ID: 9180890002
H. Facility's Phone: (312 768-3400

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. waste Flammable Liquid N.O.S. Flammable Liquid UN 1993	X	001	TT	05300	1	EPA HW Number F005 / Authorization Number
b. Waste Solvent – If waste solvent in item 11 is undeliverable for any reason – return to generator.						EPA HW Number / Authorization Number
c.						EPA HW Number / Authorization Number
d.						EPA HW Number / Authorization Number

J. Additional Descriptions for Materials Listed Above
Unless I am a small quantity generator who has been exempted by statute or regulation from duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
toxicity o f waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, and Illinois regulations.

Printed/Typed Name	Signature	Date (Month Day Year)
NICK B RALLINGALL		02 24 86

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)
RON BRIDGEWATER	Ron Bridgewater	02 24 86

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name	Signature	Date (Month Day Year)
		02 24 86

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV.# 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½ Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

125 KT-63

011397

STATE OF ILLINOIS ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0610
LPC 62 8/81

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) **EPA Form 8700-22 (3-84)** Form Approved. OMB No. 2000-0404. Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I L D 0 9 5 3 0 9 6 4 7 — Manifest Document No.

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law, but is required by Illinois law.

GENERATOR

3. Generator's Name and Mailing Address
Batavia Coatings Division/Whittaker Corporation
1500 Lathem Street, Batavia, Illinois 60510

4. Generator's Phone (312) 879 6800

A. Illinois Manifest Document Number IL 1330211

B. Illinois Generator's ID 0 8 9 0 1 0 5 0 0 5

5. Transporter 1 Company Name: Mr. Frank, Inc.

6. US EPA ID Number: I L D 0 6 9 5 0 6 1 6 0

C. Illinois Tranporter's ID 0 0 7 9

D. (312) 596 3377 Transporter's Phone

7. Transporter 2 Company Name

8. US EPA ID Number

E. Illinois Transporter's ID

F. ( ) Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Service
420 South Colfax
Griffith, Indiana 46319

10. US EPA ID Number: I N D 0 1 6 3 6 0 2 6 5

G. Illinois Facility's ID 9 1 8 0 8 9 0 0 0 2

H. Facility's Phone (312) 768 3400

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	Waste flammable liquid N.O.S. Flammable Liquid UN 1993	X	0 0 1	TT	03000	1	EPA HW Number F 0 0 5 Authorization Number
b.	Waste Solvent-If waste solvent in item 11 is undeliverable for any reason-return to generator.						EPA HW Number Authorization Number
c.							EPA HW Number Authorization Number
d.							EPA HW Number Authorization Number

J. Additional Descriptions for Materials Listed Above
Unless I am a small quantity generator who has been exempted by statute or regulation from duty to make a waste minimization certification under Section 3002 (b) of RCRA, I also certify that I have a program in place to reduce the volume and

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage,or disposal currently available to me which minimizes the present and future threat to human health and the environment.

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, and Illinois regulations.

Printed/Typed Name: EUGENE M. MURPHY — Signature: E. M. Murphy — Date: Month 3 Day 14 Year 86

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: RICK WHITE — Signature: [signature] — Date: Month 03 Day 14 Year 86

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name — Signature — Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: R. Rusbosk — Signature: R. Rusbosk — Date: Month 03 Day 14 Year 86

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637 OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV. # 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½, Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

212 R T-50

011398

STATE OF ILLINOIS ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0610
LPC 62 8/81

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) **EPA Form 8700-22 (3-84)** Form Approved. OMB No. 2000-0404 Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. ILD 095309647 Manifest Document No. 00001

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law, but is required by Illinois law

3. Generator's Name and Mailing Address
Batavia Coatings Division/Whittaker Corporation
1500 Lathem Street, Batavia, Illinois 60510

4. Generator's Phone (312) 879-6800

A. Illinois Manifest Document Number IL 1330212

B. Illinois Generator's ID 1089010500015

5. Transporter 1 Company Name: Mr. Frank, Inc.

6. US EPA ID Number: ILD069506160

C. Illinois Tranporter's ID 10079

D. (312) 596-3377 Transporter's Phone

7. Transporter 2 Company Name

8. US EPA ID Number

E. Illinois Transporter's ID

F. ( ) Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Service
420 South Colfax
Griffith, Indiana 46319

10. US EPA ID Number: IND016360265

G. Illinois Facility's ID 9180890002

H. Facility's Phone (312) 768-3400

GENERATOR

	HM	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a.	X	Waste Flammable Liquid N.O.S. Flammable Liquid UN 1993	001	TT	04300	1	EPA HW Number F005 / Authorization Number
b.		Waste Solvent-If waste solvent in item 11 is undeliverable for any reason-return to generator.					EPA HW Number / Authorization Number
c.							EPA HW Number / Authorization Number
d.							EPA HW Number / Authorization Number

J. Additional Descriptions for Materials Listed Above
Unless I am a small quantity generator who has been exempted by statute or regulation from duty to make a waste minimization certification under Section 3002 (b) of RCRA, I also certify that I have a program in place to reduce the volume and

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, and Illinois regulations.

Printed/Typed Name	Signature	Date (Month Day Year)
EUGENE M. MURPHY	E M Murphy	3 25 86

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)
DAVE SCHLEYER	Dave Schleyer	03 25 86

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name	Signature	Date (Month Day Year)
FDUNFEE	F Dunfee	3 25 86

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV.# 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½ Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the

FACILITY COPY - PART 3

212 TT 50

011399

HAZARDOUS WASTE MANIFEST

ORIGINAL – NOT NEGOTIABLE

112
MANIFEST DOCUMENT NUMBER

ILD 095309647
SHIPPER NUMBER

Mr. Frank
NAME OF CARRIER (SCAC)

ILD 069506160
CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	ILD 095309647	Batavia Coatings & Chemicals Div. 1500 Lathem St., Batavia, IL 60510 312/879-6800	9/3/81
TRANSPORTER # 1	ILD 069506160	Mr. Frank, Inc. 201 W. 155th St.,So. Holland, IL 312/596-3377	9/3/81
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chemical Service 420 S. Colfax, Griffith, IND 312/768-3400	9/3/81

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGE (For Carri Use Onl
Tank Truck	XX	Waste Solvent Flammable Liquid, N.O.S.	UN 1993		4750 ~~5000~~ gal.	4750 ~~5000~~ gal.		

SPECIAL HANDLING INSTRUCTIONS

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED
Yes ☒ ~~XX~~ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

TOTAL CHARGES: $

FREIGHT CHARGES
FREIGHT PREPAID except when box at right is checked ☐
Check box if charges are to be collected

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding.
$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."
_____ Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges
_____ (Signature of Consignor)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

GENERATOR'S SIGNATURE _____ DATE 9/3/81

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE _____ TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

TSDF SIGNATURE _____ DATE 9/3/81

4

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

001691

STATE OF ILLINOIS

TO BE COMPLETED BY WASTE GENERATOR

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

0401841

SPECIAL WASTE HAULING MANIFEST

Batavia Coatings & Chemicals Div.

Authorization Number 997410
FED ID ILD 095309647

Whittaker Corporation (Company Name) — 1500 Lathem Street (Address)

0890100005 (Generator Number)

Batavia (City) — Illinois (State) — 60510 (Zip)

WASTE HAULER(S)

Mr. Frank (Hauler Name) — 201 West 155th Street (Hauler Address) — S.W.H. Registration Number 0079019
FED ID ILD 069506160

(Hauler Name) — S. Holland, ILL 60473 (Hauler Address) — S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemicals Service (Facility Name) — 420 South Colfax (Address) — 91808902 (Site Number)
FED ID 016360265

Griffith (City) — IND (State) — 46319 (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Solvent — WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Waste Solvent — HAZARD CLASS: Flammable

WEIGHT FOR D.O.T. USE 50 000 LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 4500 GAL

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 4/28/81 — (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) (Authorized Signature) — DATE: 04 28 81

(2) (Authorized Signature) — DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) — DATE 04 28 81

COMMENTS OR SPECIAL INSTRUCTIONS: TO EAST AGIT 4/28/81 T-50 JTM

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR — PART - 2 IEPA — PART - 3 SITE — PART - 4 HAULER — PART - 5 IEPA — PART - 6 GENERATOR

SITE COPY - PART 3

001686

0401842

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

Authorization Number 997410

FED ID ILD 09530967

Batavia Coatings & Chemicals Div.
Whittaker Corporation (Company Name) — 1500 Lathem Street (Address)
Batavia (City) — Illinois (State) — 60510 (Zip)

Generator Number 0890100005

WASTE HAULER(S)

Mr. Frank (Hauler Name) — 201 West 155th Street (Hauler Address) — S.W.H. Registration Number 0079009

FED ID ILD 069506160

S. Holland, IL 60473 (Hauler Address) — S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemicals Service (Facility Name) — 420 South Colfax (Address) — Site Number 91808902

FED ID IND 016360265

Griffith (City) — IND (State) — 46319 (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Solvent — WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Waste Solvent — HAZARD CLASS: Flammable CF 903 — WEIGHT FOR D.O.T. USE 35,000 LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000 — 1 GALLONS (Circle One) 2 CU. YDS.

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 5/20/81 — E. Dettmeier (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) C Borucki (Authorized Signature) — DATE: 05/29/81

(2) (Authorized Signature) — DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO ___

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

(Authorized Signature) — DATE: 5/20/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO EAST AGIT 5/20/81 T-50 gm

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

001683

STATE OF ILLINOIS

TO BE COMPLETED BY WASTE GENERATOR

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

0401843 (1–7)

SPECIAL WASTE HAULING MANIFEST

Authorization Number 997410 (8–13)

Batavia Coatings & Chemicals Div.
Whittaker Corporation
(Company Name)

1500 Lathem Street
Address

FED ID ILD 095309647

Batavia
City

Illinois
State

60510
Zip

0890100005 G
Generator Number (14–24)

WASTE HAULER(S)

Mr. Frank
Hauler Name

201 West 155th Street
Hauler Address

S.W.H. Registration Number 0079009 (25–31)

FED ID ILD 069506160

S. Holland, IL 60473
Hauler Name / Hauler Address

S.W.H. Registration Number (32–38)

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

American Chemicals Service
(Facility Name)

420 South Colfax
Address

918089002
Site Number (39–46)

Griffith
City

IND
State

46319
Zip

FED ID IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Solvent

WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Waste Solvent

HAZARD CLASS: Flammable

WEIGHT FOR D.O.T. USE: 20000 (LBS / TONS (circle one))

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000 (47–52)

1 GALLONS (Circle One)
2 CU. YDS. (53)

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 5/22/81

(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Borucki
(Authorized Signature)

DATE: 05 22 81 (54–59)

(2) _____
(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 5/22/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO 205R 5/22/81 T-50 929M

IN ILLINOIS 217 / 782-3637 — 24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS 800 / 424 8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

001684

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0401844

997410
Authorization Number

Batavia Coatings & Chemicals Div.
Whittaker Corporation (Company Name)

1500 Lathem Street (Address)

FED ID ILD 095309647

Batavia (City) | Illinoid (State) | 60510 (Zip)

0890100005 G
Generator Number

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name)

201 West 155th Street (Hauler Address)

S.W.H. Registration Number 0079008

FED ID ILD 069506160

S. Holland, IL 60473 (Hauler Name / Hauler Address)

S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemicals Service (Facility Name)

420 South Colfax (Address)

9180890902 Site Number

Griffith (City) | IND (State) | 46319 (Zip)

FED ID IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Solvent

WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	WEIGHT FOR D.O.T. USE
Waste Solvent	Flammable	28,000 (LBS / TONS circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 004000 (47–52)

1 GALLONS (Circle One) 2 CU. YDS. (53)

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 5/29/81

(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) (Authorized Signature) DATE: 05 29 81 (54–59)

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 5 29 81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: To 204R 5/29/81 T-50 gpm

IN ILLINOIS 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS 800 / 424-8802

DISTRIBUTION PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

001682

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

0401845

TO BE COMPLETED BY WASTE GENERATOR

SPECIAL WASTE HAULING MANIFEST

Authorization Number 997410

Batavia Coatings & Chemicals Div.
Whittaker Corporation (Company Name)

1500 Lathem Street (Address)

FED ID ILD 095309647

Batavia (City) | Illinois (State) | 60510 (Zip)

0890100005 (Generator Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name)

201 West 155th Street (Hauler Address)

S.W.H. Registration Number 0079009

FED ID ILD 069506160

S. Holland, IL 60473

Hauler Name | Hauler Address | S.W.H. Registration Number

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

American Chemicals Service (Facility Name)

420 South Colfax (Address)

9180890 2 (Site Number)

FED ID IND 016360265

Griffith (City) | IND (State) | 46319 (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Solvent

WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Waste Solvent

HAZARD CLASS: Flammable 4.03

WEIGHT FOR D.O.T. USE 30,000 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000

GALLONS (Circle One) CU. YDS.

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 5/27/81

(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) CBowchi (Authorized Signature) DATE: 05 27 81

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

(Authorized Signature) DATE: 5/27/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO WEST ACI T 5/22/81 T-50 gpm

IN ILLINOIS 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS 800 / 424-8802

DISTRIBUTION PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

001681

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0401850

Authorization Number 997410

Batavia Coatings & Chemicals Div.
Whittaker Corporation (Company Name) — 1500 Lathem Street (Address)
Batavia (City) — Illinois (State) — 60510 (Zip)

FED ID ILD 095309647

0890100005 (Generator Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) — 201 West 155th Street (Hauler Address) — S.W.H. Registration Number 0079029

FED ID ILD 069506160

(Hauler Name) — S. Holland, IL 60473 (Hauler Address) — S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemicals Service (Facility Name) — 420 South Colfax (Address) — 91808902 (Site Number)

Griffith (City) — IND (State) — 46319 (Zip)

FED ID IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Solvent — WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Waste Solvent — HAZARD CLASS: Flammable

WEIGHT FOR D.O.T. USE 40 000 LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000 — 1 GALLONS (Circle One) / 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 7/22/81 — E J Ortmeier (Authorized Signature) — FOOS

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Tom Berry (Authorized Signature) — DATE: 7 22 81

(2) (Authorized Signature) — DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

(Authorized Signature) — DATE: 7 22 81

COMMENTS OR SPECIAL INSTRUCTIONS: TO EAST AGIT T-50 7/22/81 JM

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR — PART - 2 IEPA — PART - 3 SITE — PART - 4 HAULER — PART - 5 IEPA — PART - 6 GENERATOR

SITE COPY - PART 3

001687

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0401851

Authorization Number 9 9 7 4 1 0

FED ID ILD 095309647

Batavia Coatings & Chemicals Div.
Whittaker Corporation (Company Name) — 1500 Lathem Street (Address)

0 8 9 0 1 0 0 0 0 5 Generator Number

Batavia (City) — Illinois (State) — 60510 (Zip)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) — 201 W. 155th Street (Hauler Address) — S.W.H. Registration Number 0 0 7 9 0 2 5

FED ID ILD 069506160

(Hauler Name) — W. Holland, IL 60473 (Hauler Address) — S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) — 420 South Colfax (Address) — 9 1 8 0 8 9 0 2 (Site Number)

FED ID IND 016360265

Griffith (City) — IND (State) — 46319 (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Solvent — WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Waste Solvent — HAZARD CLASS: Flammable

WEIGHT FOR D.O.T. USE 40,000 LBS/TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 0 0 5 0 0 0 — 1 GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 7/29/81 — Henry J. Szymanski (Authorized Signature) — F005

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Tom Berry (Authorized Signature) — DATE: 7 29 81

(2) (Authorized Signature) — DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[signature] (Authorized Signature) — DATE: 7 29 81

COMMENTS OR SPECIAL INSTRUCTIONS: TO EAST AGIT T-50 7/29/81 JAM

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

001688

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

TO BE COMPLETED BY WASTE GENERATOR

0401852

Authorization Number 9 9 7 4 1 0
FED ID ILD 095309647

Batavia Coatings & Chemicals Div.
Whittaker Corporation (Company Name) — 1500 Lathem Street (Address)
Batavia (City) — Illinois (State) — 60510 (Zip)

0 8 9 0 1 0 0 0 0 5 G (Generator Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) — 201 West 155th Street (Hauler Address) — S.W.H. Registration Number 0 0 7 9 0 2 5
FED ID ILD 069506160

(Hauler Name) — S. Holland, IL 60473 (Hauler Address) — S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemicals Service (Facility Name) — 420 South Colfax (Address) — 9 1 8 0 8 9 0 2 (Site Number)
FED ID IND 061360265

Griffith (City) — IND (State) — 46319 (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Solvent — WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Waste Solvent — HAZARD CLASS: Flammable

WEIGHT FOR D.O.T. USE 40,000 LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 0 0 5 0 0 0 (47–52)

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 8/14/81 — [signature] (Authorized Signature) — F005

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Robert Perkins (Authorized Signature) — DATE 08 14 81

(2) (Authorized Signature) — DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) — DATE: / /

COMMENTS OR SPECIAL INSTRUCTIONS: TO 203R T-50 8/14/81 gm

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

001689

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0401853

Authorization Number 997410

Batavia Coatings & Chemicals Div. Whittaker Corporation (Company Name)
1500 Lathem Street (Address)
Fed. ID ILD 095309647

Batavia (City)
Illinois (State) 60510 (Zip)
0890100005 (Generator Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name)
201 West 155th Street (Hauler Address)
S.W.H. Registration Number 0079018
Fed. ID ILD 069506160

(Hauler Name)
South Holland, Ill. 60473 (Hauler Address)
S.W.H. Registration Number

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

American Chemicals Service (Facility Name)
420 South Colfax (Address)
9180902

Griffith (City)
Indiana (State) 46319 (Zip)
Fed. ID IND 016360285

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Solvent
WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	WEIGHT FOR D.O.T. USE
Waste Solvent	Flammable	LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 5000 Gal.

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 4/22/81
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Michael D. Martin (Authorized Signature) DATE: 4 / 22 / 81

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 04 22 81

COMMENTS OR SPECIAL INSTRUCTIONS: To East 40th 4/22/81 T-50 gpm

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

001685

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0401854

Authorization Number 99741C

Batavia Coatings & Chemicals Div.
Whittaker Corporation (Company Name) | 1500 Lathem Street (Address)
Batavia (City) | Illinois (State) | 60510 (Zip)

FED ID ILD 095309647

0 8 9 0 1 0 0 0 0 5G
Generator Number

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) | 201 West 155th Street (Hauler Address)
S.W.H. Registration Number 0 0 7 9 0 2 5
FED ID ILD 069506160

(Hauler Name) | S. Holland, IL 60473 (Hauler Address)
S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemicals Service (Facility Name) | 420 South Colfax (Address)
9 1 8 0 8 9 0 2
FED ID IND 061360265

Griffith (City) | IND (State) | 46319 (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Solvent
WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	WEIGHT FOR D.O.T. USE
Waste Solvent	Flammable	40,000 LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 0 0 5 0 0 0

(1 GALLONS (Circle One) / 2 CU. YDS.) 1

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 8-20-81

x [signature] 4995
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Tom Berry (Authorized Signature) DATE: 8 20 81

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[signature] (Authorized Signature) DATE: 8/21/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 211E T-50
8/21/81 Jom

IN ILLINOIS 217 / 782-3637 — 24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

001690

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0401855

Authorization Number 9 9 7 4 1 0

Batavia Coatings & Chemicals Div.
Whittaker Corporation (Company Name) | 1500 Lathem Street (Address)
Batavia (City) | Illinois (State) | 60510 (Zip)

FED ID ILD 095309647

0 8 9 0 1 0 0 0 0 5 G (Generator Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) | 201 West 155th Street (Hauler Address) | S.W.H. Registration Number 0 0 7 9 0 2 5

FED ID ILD 069506160

(Hauler Name) | S. Holland, Il 60473 (Hauler Address) | S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemicals Service (Facility Name) | 420 South Colfax (Address) | 9 1 8 0 8 9 0 2 (Site Number)

Griffith (City) | Ind (State) | 46319 (Zip) | FED ID ILD 061360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Solvent

WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Waste Solvent

HAZARD CLASS: Flammable

WEIGHT FOR D.O.T. USE ~~40,000~~ 16,000 LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: ~~0 0 5 0 0 0~~ 0 0 2 0 0 0 9.17

1 GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 9/23/81 [signature] (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Robert Perkins (Authorized Signature) DATE 09 23 81

(2) (Authorized Signature) DATE / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[signature] (Authorized Signature) DATE: 9 23 81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 210 R T-50 9/23/81 [initials]

IN ILLINOIS: 217 / 782-3637 — 24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

001692

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

0401856

SPECIAL WASTE HAULING MANIFEST

Authorization Number 997410

Batavia Coatings & Chemicals Div. — Whittaker Corporation (Company Name) | 1500 Lathem Street (Address) | FED ID ILD 095309647

Batavia (City) | Illinois (State) | 60510 (Zip)

0890100005G (Generator Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) | 201 West 155th Street (Hauler Address) | S.W.H. Registration Number 0079025 | FED ID ILD 069506160

(Hauler Name) | S. Holland, Il 60473 (Hauler Address) | S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemicals Service (Facility Name) | 420 South Colfax (Address) | 91808902 (Site Number)

Griffith (City) | Ind (State) | 46319 (Zip) | FED ID ILD 061360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Solvent | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	WEIGHT FOR D.O.T. USE
Waste Solvent	Flammable	40,000 (BS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000

1 (GALLONS) (Circle One)
2 CU. YDS. /

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 10/15/81 — M. Ferrero (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) DATE: 10 19 81

(2) (Authorized Signature) DATE:

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[signature] (Authorized Signature) DATE: 10 19 81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 210 I T-50 10/15/81 gpm.

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

001693

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0401857

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 997410

Batavia Coatings & Chemicals Div.
Whittaker Corporation (Company Name)
1500 Lathem St. (Address)
FED ID ILD 095309647
0 8 9 0 1 0 0 0 0 5 G (Generator Number)
Batavia (City) Illinois (State) 60510 (Zip)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name)
201 West 155th Street (Hauler Address)
S.W.H. Registration Number 0 0 7 9 0 2 5
FED ID ILD 069506160

(Hauler Name)
S. Holland, Il 60473 (Hauler Address)
S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemicals Service (Facility Name)
420 South Colfax (Address)
9 1 8 0 8 9 0 2 (Site Number)
Griffith (City) Ind (State) 46319 (Zip)
FED ID ILD 061360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Solvent
WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW.

SHIPPING DESCRIPTION: Waste Solvent
HAZARD CLASS: Flammable
WEIGHT FOR D.O.T. USE 40,000 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.
QUANTITY OF WASTE DELIVERED: 0 0 5 0 0 0
1 (GALLONS) 2 CU. YDS. (Circle One)

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 11/10/81
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) (Authorized Signature) DATE: 11 10 81

(2) (Authorized Signature) DATE:

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

(Authorized Signature) DATE: 11 10 81

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

To 210 K T-50 ERM 11/10/81

SITE COPY - PART 3

001694

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0401858

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 997410

Batavia Coatings & Chemicals Div. (Company Name) | Whittaker Corporation | 1500 Lathem St. (Address) | FED ID ILD 095309647

Batavia (City) | Illinois (State) | 60510 (Zip)

0 8 9 0 1 0 0 0 0 5 G (Generator Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) | 201 West 155th Street (Hauler Address) | S.W.H. Registration Number 0 0 7 9 0 2 4 | FED ID ILD 069506160

(Hauler Name) | S. Holland, Il 60473 (Hauler Address) | S.W.H. Registration Number

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

American Chemicals Service (Facility Name) | 420 South Colfax (Address) | 9 1 8 0 8 9 0 2 (Site Number)

Griffith (City) | Ind (State) | 46319 (Zip) | FED ID ILD 061360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Solvent | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Waste Solvent | HAZARD CLASS: Flammable

WEIGHT FOR D.O.T. USE 40,000 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 0 0 ~~5 0 0 0~~ 4800

1 GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 12-2-81 (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) (Authorized Signature) DATE: 12/03/81

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 12/2/81

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 — 24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS — OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

To 210 K T-50 GRM 12/2/81

SITE COPY - PART 3

001695

0401860

TO BE COMPLETED BY WASTE GENERATOR

(P.O. #1241)

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

Authorization Number 9 9 7 4 1 0

FED ID ILD 095309647

Batavia Coatings & Chemicals Div.
Whittaker Corporation (Company Name) — 1500 Lathem St. (Address)

Batavia (City) — Illinois (State) — 60510 (Zip)

0 8 9 0 1 0 0 0 0 5 G (Generator Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) — 201 West 155th Street (Hauler Address) — S.W.H. Registration Number 0 0 7 9 / 0 0 9

FED ID ILD 069506160

(Hauler Name) — S. Holland, Il. 60473 (Hauler Address) — S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemicals Service (Facility Name) — 420 South Dolfax (Address) — 9 1 8 0 8 9 0 2 (Site Number)

Griffith (City) — Ind (State) — 46319 (Zip) — FED ID ILD 06[illegible]360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Solvent — WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DDT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Waste Solvent — HAZARD CLASS: Flammable — WEIGHT FOR D.D.T. USE 40,000 LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 0 0 ~~5 0 0 0~~ 4500 — 1 GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify) (UN 1993)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 12-22-81 — [signature] (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) — DATE: 12 22 81

(2) (Authorized Signature) — DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[signature] (Authorized Signature) — DATE: 12 22 81

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR — PART - 2 IEPA — PART - 3 SITE — PART - 4 HAULER — PART - 5 IEPA — PART - 6 GENERATOR

To 204 TK T-50 GRM 12/22/81

SITE COPY - PART 3

001870

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 6
(217) 782-6760

TO BE COMPLETED BY WASTE GENERATOR

SPECIAL WASTE HAULING MANIFEST

BATAVIA COATINGS & CHEM WHITTAKER CORP. (Company Name) — 1500 LATHEM ST. (Address)
BATAVIA (City) — Ill (State) — 60510 (Zip)

WASTE HAULER(S)

MR FRANK (Hauler Name) — 201 W. 155th ST (Hauler Address)
(Hauler Name) — S. HOLLAND Ill 60473 (Hauler Address)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SVC (Facility Name) — 4 1/2 S. COLFAX (Address)
GRIFFITH (City) — IND (State) — 46319 (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENT WA

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY

SHIPPING DESCRIPTION: WASTE SOLVENT — HAZARD CLASS: FLAMMABLE

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 150 000 (47 52)

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTH

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LA IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 2/23/81 — E J Ortmann (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION F INDICATED:

(1) [signature] (Authorized Signature)

(2) (Authorized Signature)

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZAR

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIE

(Authorized Signature)

COMMENTS OR SPECIAL INSTRUCTIONS: To 125X T-63 Jim Murphy

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5

003185

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0527778

TO BE COMPLETED BY WASTE GENERATOR

P.O. #1379

Authorization Number 9 9 7 4 1 0

FED ID ILD 095309647

Batavia Coatings & Chemicals Div.
Whittaker Corporation (Company Name) | 1500 Lathem St. (Address) | 312-879-6800 (Phone Number) | 0 8 9 0 1 0 0 0 0 5 G (Generator Number)

Batavia (City) | Illinois (State) | 60510 (Zip) | EPA Number

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) | 201 West 155th Street (Hauler Address) | S.W.H. Registration Number 0 0 7 9 009
S. Holland, Il. 60473 | FED ID ILD 069506160

Phone Number | EPA Number

Hauler Name | Hauler Address | S.W.H. Registration Number

312-596-3377 (Phone Number) | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemicals Service (Facility Name) | 420 South Colfax (Address) | 9 1 8 0 8 9 0 2 (Site Number)

Griffith (City) | Ind (State) | 46319 (Zip) | 312-768-3400 (Phone Number) | FED ID ILD 061360265 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Solvent | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW

SHIPPING DESCRIPTION: Waste Solvent | HAZARD CLASS: Flammable | UN 1993 (UN or NA Number) | EPA HW Number

WEIGHT FOR D.D.T. USE 40,000 LBS TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL | QUANTITY OF WASTE DELIVERED 0 0 ~~5 0 0 0~~ 2300 | 1 GALLONS (Circle One) 2 CU. YDS 1

METHOD OF SHIPMENT (Circle One) (DRUMS ____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) ____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE 1-25-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED

(1) [signature] (Authorized Signature) DATE 01/25/82

(2) ____ (Authorized Signature) DATE / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ____

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

[signature] (Authorized Signature) DATE 01/25/82

COMMENTS OR SPECIAL INSTRUCTIONS ____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS 217 / 782 3637 | OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426 2675

DISTRIBUTION PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 GENERATOR

REV # 3

SITE COPY - PART 3 TO 211 K T-50 GPM 1/25/82

002925

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0527781

TO BE COMPLETED BY WASTE GENERATOR

P.O. #1589

Authorization Number 997410

FED ID ILD 095309647

Batavia Coatings & Chemicals Div.
Whittaker Corporation (Company Name) | 1500 Lathem St (Address) | 312-879-6800 (Phone Number) | 0890100005 (Generator Number)

Batavia (City) | Illinois (State) | 60510 (Zip) | EPA Number

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) | 201 West 155th St. (Hauler Address) | S.W.H. Registration Number 0079029

S. Holland, Il. 60473 | 312-596-3377 (Phone Number) | FED ID ILD 069506160 (EPA Number)

Hauler Name | Hauler Address | S.W.H. Registration Number

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | 420 South Colfax (Address) | 91808902 (Site Number)

FED ID ILD ~~0615361255~~ 016360264

Griffith (City) | Ind (State) | 46319 (Zip) | 312-768-3400 (Phone Number) | EPA Number

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Solvent

WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW.

SHIPPING DESCRIPTION: Waste Solvent

HAZARD CLASS: Flammable

UN1993 (UN or NA Number) | EPA HW Number

WEIGHT FOR D.O.T. USE 40,000 LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED 005000 (47–52) (1) GALLONS (Circle One) 2 CU. YDS. 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS ____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE 3-3-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) DATE 3/03/82 (54–59)

(2) (Authorized Signature) DATE / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

[signature] (Authorized Signature) DATE [illegible]

COMMENTS OR SPECIAL INSTRUCTIONS

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS 217 / 782-3637 | OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV # 3

SITE COPY - PART 3 TO142R T-50 6RM 3/3/82

002928

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0527782

Authorization Number 997410

FED ID ILD 095309647

COMPLETED BY WASTE GENERATOR

Batavia Coatings & Chemicals Div. — Whittaker Corporation (Company Name) | 1500 Lathem St. (Address) | 312-879-6800 (Phone Number) | 0890100005 (Generator Number)

Batavia (City) | Illinois 60510 (State / Zip) | EPA Number

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) | 201 West 155th St. S. Holland, Il. 60473 (Hauler Address) | 312-596-3377 (Phone Number) | S.W.H. Registration Number 0079 | FED ID ILD 069506160 (EPA Number)

Hauler Name | Hauler Address | Phone Number | S.W.H. Registration Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | 420 South Colfax (Address) | 918089028 (Site Number) | FED ID ILD 016360265 (EPA Number)

Griffith (City) | Ind (State) | 46319 (Zip) | 312-768-3400 (Phone Number)

Alternate (Facility Name) | Address | Site Number | City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Solvent | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
Waste Solvent	Flammable	UN1993	F005

WEIGHT FOR D.O.T. USE: 40,000 (LBS) TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 005000 | (1) GALLONS (2) CU. YDS. (Circle One) 1

METHOD OF SHIPMENT (Circle One) (DRUMS_____ Number) (TANK TRUCK) OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION X [signature] (Authorized Signature) DATE: 3-16-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) DATE: 3/16/82

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

[signature] (Authorized Signature) DATE 3/16/83

COMMENTS OR SPECIAL INSTRUCTIONS: _____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS, 217 / 782-3637 — OUTSIDE ILLINOIS, 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV # 3

SITE COPY - PART 3

To 211K T-50 GEM 3/16/82

003553

HAZARDOUS WASTE MANIFEST

ORIGINAL – NOT NEGOTIABLE

120
MANIFEST DOCUMENT NUMBER

ILD 095309547
SHIPPER NUMBER

Mr. Frank
NAME OF CARRIER (SCAC)

ILD 069506160
CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	ILD 095309547	Batavia Coatings Div. 1500 Lathem St. Batavia, Il, 60510 312-879-6800	3/16/82
TRANSPORTER # 1	ILD 069506160	Mr. Frank Inc. 201 W. 155th St., So. Holland, Il. 312-596-3377	3/16/82
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IHD 016360265	American Chemicals Service 420 S. Colfax, Griffith, Ind. 312-768-3400	3/16/82

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrie Use Only)
Tank Truck	XX	Waste Solvent Flammable Liquid, N.O.S.	UN1993		5,000 gal	5,000 gal		

SPECIAL HANDLING INSTRUCTIONS

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED
Yes ☐ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE:
PREPAID ☐
COLLECT ☐ $

TOTAL CHARGES: $

FREIGHT CHARGES
FREIGHT PREPAID except when box at right is checked ☐
Check box if charges are to be collec

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding.
$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."
_____ Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.
_____ (Signature of Consignor)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

TSDF SIGNATURE DATE

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

003553

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0527783

Authorization Number 997410

FED ID ILD [redacted] 095309647

TO BE COMPLETED BY WASTE GENERATOR

Batavia Coatings & Chemicals Div. Whittaker Corporation (Company Name) | 1500 Lathem St. (Address) | 312-879-6800 (Phone Number) | 0 8 9 0 1 0 0 0 0 5 G (Generator Number)

Batavia (City) | Ill. (State) | 60510 (Zip) | (EPA Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) | 201 West 155th St. (Hauler Address) | S.W.H. Registration Number 0 0 7 9 0 0 9

S. Holland, Il. 60473 | FED ID ILD 069506160 | 312-59603377 (Phone Number) | (EPA Number)

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number | (Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | 420 South Colfax (Address) | 9 1 8 0 8 9 0 2 Site Number

Griffith (City) | Ind. (State) | 46319 (Zip) | (Phone Number) | FED ID IND 016360265 (EPA Number)

(Alternate (Facility Name)) | (Address) | Site Number | (City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Solvent | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Waste Solvent | HAZARD CLASS: Flammable | U N 1 9 9 3 (UN or NA Number) | (EPA HW Number)

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS OR GAL. | QUANTITY OF WASTE DELIVERED 0 0 5 0 0 0 | 1 GALLONS (Circle One) 2 CU. YDS.

METHOD OF SHIPMENT (Circle One) (DRUMS_____ Number) | TANK TRUCK | OPEN TRUCK | OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINDIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE: 4/12/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) Tom Berry (Authorized Signature) DATE 04/13/82

(2) _____ (Authorized Signature) DATE ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

[signature] (Authorized Signature) DATE 4/13/82

COMMENTS OR SPECIAL INSTRUCTIONS: _____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS 217 / 782-3637 | OUTSIDE ILLINOIS 800 / 424 8802 or 202 / 426 2675

DISTRIBUTION PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 GENERATOR

REV # 3

SITE COPY - PART 3

TO 211 ET-506 4-13-82

002927

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0527785

Authorization Number 997410

FED ID ILD 095309647

Batavia Coatings & Chemicals Div.
Whittaker Corporation (Company Name) | 1500 Lathem St. (Address) | 312-879-6800 (Phone Number) | 0890100005 (Generator Number)

Batavia (City) | Illinois (State) | 60510 (Zip) | EPA Number

WASTE HAULER(S)

Mr. Frank Inc. (Hauler Name) | 201 West 155th St. (Hauler Address) | S.W.H. Registration Number 0079069

S. Holland, Il. 60473 FED ID ILD 069506160

312-596-3377 (Phone Number) | EPA Number

Hauler Name | Hauler Address | S.W.H. Registration Number

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | 420 South Colfax (Address) | 91808902 (Site Number)

FED ID IND 016360265

Griffith (City) | Indiana (State) | 46319 (Zip) | 3127653400 (Phone Number) | EPA Number

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Solvent WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Waste Solvent

HAZARD CLASS: Flammable

UN1993 (UN or NA Number) | F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 0 0 ~~5 0 0 0~~ 4300 (47–52)

1. GALLONS (Circle One) 2. CU. YDS. 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS _____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE: 5-17-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) DATE 05/17/82 (54–59)

(2) _____ (Authorized Signature) DATE __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

[signature] (Authorized Signature) DATE 05/17/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637 OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

To 211K T-50 GRM 5-17-82

003601

HAZARDOUS WASTE MANIFEST

ORIGINAL – NOT NEGOTIABLE

122
MANIFEST DOCUMENT NUMBER

ILD 095309647
SHIPPER NUMBER

Mr. Frank
NAME OF CARRIER (SCAC)

ILD 069506160
CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	ILD 095309647	Batavia Coatings Div. 1500 Lathem St. Batavia, Il. 60510 312-879-6800	5/17/82
TRANSPORTER # 1	ILD 069506160	Mr. Frank Inc. 201 W. 155th St., So. Holland, Il. 312-596-3377	5/17/82
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360765	American Chemical Ser 4 y O S. Colfax. Griffith IN 312 765-3401	5/17/82
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY			

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
Tank Truck	XX	Waste Solvent Flammable Liquid, N.O.S.	UN1993		5,000 gal	5,000 gal		

SPECIAL HANDLING INSTRUCTIONS

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED
Yes ☐ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding.
$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."
_____ Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.
_____ (Signature of Consignor)

TOTAL CHARGES: $

FREIGHT CHARGES
FREIGHT PREPAID except when box at right is checked
Check box if charges are to be collect ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

TSDF SIGNATURE DATE

5

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

003600

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0527786

Authorization Number 9 9 7 4 1 0

TO BE COMPLETED BY WASTE GENERATOR

FED ID ILD 095309647

Batavia Coatings & Chemicals Div. | Whittaker Corporation (Company Name) | 1500 Lathem St. (Address) | 312-87966800 (Phone Number) | 0 8 9 0 1 0 0 0 0 5 (Generator Number)

Batavia (City) | Illinois (State) | 60510 (Zip) | EPA Number

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) | 201 West 155th St. S. Holland, Il. 60473 (Hauler Address) | S.W.H. Registration Number 0 0 7 9 0 1 9

FED ID ILD 069506160

312-596-3377 (Phone Number) | EPA Number

Hauler Name | Hauler Address | S.W.H. Registration Number | Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | 420 South Colfax (Address) | 9 1 8 0 8 9 0 2 (Site Number)

FED ID IND 016360265

Griffith (City) | Ind. (State) | 46319 (Zip) | 3127683305 (Phone Number) | EPA Number

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Solvent | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
Waste Solvent	Flammable	U N 1 9 9 3	F005

WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 0 4 0 0 0 (1 / 2) GALLONS (Circle One) / CU. YDS. 1

METHOD OF SHIPMENT (Circle One) (DRUMS _____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION X _____ (Authorized Signature) DATE: 6/8/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) _____ (Authorized Signature) DATE: 06/08/82

(2) _____ (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

_____ (Authorized Signature) DATE: 6/8/82

COMMENTS OR SPECIAL INSTRUCTIONS _____

IN ILLINOIS 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

To 211 T-50 GPM 6-8-82

003002

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0527789

Authorization Number 997410

TO BE COMPLETED BY WASTE GENERATOR

Whittaker Corp. FED ID ILD 095309647
Batavia Coatings & Chemicals 1500 Lathem St. (Company Name / Address) 312-879-6800 (Phone Number) 0890100005 (Generator Number)
Batavia (City) Illinois (State) 60510. (Zip) (EPA Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) 201 West 155th. St. (Hauler Address) S.W.H. Registration Number 0079 029
FED ID ILD 069506160
312-596-3377 (Phone Number) (EPA Number)

(Hauler Name) (Hauler Address) S.W.H. Registration Number
(Phone Number) (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) 420 South Colfax (Address) 91808902 (Site Number)
FED ID IND 016360265
Griffith (City) Ind. (State) 46319 (Zip) 312 263400 (Phone Number) (EPA Number)

(Alternate (Facility Name)) (Address) (Site Number)
(City) (State) (Zip) (Phone Number) (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Solvent WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW.

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
Waste Solvent	Flammable	UN 1993	X807

WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000 GALLONS (Circle One) / 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) (DRUMS: _____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION _____ (Authorized Signature) DATE 7/7/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) _____ (Authorized Signature) DATE 07/07/82

(2) _____ (Authorized Signature) DATE ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

_____ (Authorized Signature) DATE 7/7/82

COMMENTS OR SPECIAL INSTRUCTIONS _____

IN ILLINOIS, 217 / 782-3637 — 24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV # 3

SITE COPY - PART 3

To 21FK T-50 6RM 7-7-82

003184

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0527790

Authorization Number ~~997410~~

FED ID ILD 095309647

Batavia Coatings & Chemicals Div.
Whittaker Corp. (Company Name) | 1500 Lathem St. (Address) | 312-879-6800 (Phone Number) | 0 8 9 0 1 0 0 0 0 5 (Generator Number)

Batavia (City) | Illinois (State) | 60510 (Zip) | EPA Number

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) | 201 West 155th. St. (Hauler Address) | S.W.H. Registration Number 0 0 7 9 029

FED ID ~~IND~~ 069506160

312-596-3377 (Phone Number) | EPA Number

Hauler Name | Hauler Address | S.W.H. Registration Number

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

~~American Chemical Service~~ (Facility Name) | ~~420 South Colfax~~ (Address) | ~~9 1 8 0 8 9 0 2~~ (Site Number)

FED ID IND 016360265

Griffith (City) | Ind. (State) | 46319 (Zip) | [illegible]-3400 (Phone Number) | EPA Number

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENT + PAINT WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: HAZARD CLASS

~~Waste Solvent~~ ~~Flammable~~ UN 1 9 9 3 (UN or NA Number) X 0 7 3 (EPA HW Number)

WEIGHT FOR D.D.T USE _____ LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS OR GAL. QUANTITY OF WASTE DELIVERED ~~04500~~ 4800 (52) 1 GALLONS (Circle One) 2 CU. YDS 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS _____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION X [signature] (Authorized Signature) DATE: 7-9-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED

(1) Donald H Bult (Authorized Signature) DATE 07/09/82 (54) (59)

(2) _____ (Authorized Signature) DATE / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

[signature] (Authorized Signature) DATE 7 9 82 (60) (65)

COMMENTS OR SPECIAL INSTRUCTIONS _____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS 217 / 782-3637 OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

TO204RT-50 GRM 7-9-82

003191

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0527791
Authorization Number [redacted]

BE COMPLETED BY WASTE GENERATOR

Batavia Coatings Division Whittaker Corporation (Company Name) | 1500 Lathem St. (Address) | 312-879-6800 (Phone Number) | 0 8 9 0 1 0 0 0 0 5 G (Generator Number)

Batavia (City) | Illinois (State) | 60510 (Zip) | I L D 0 9 5 3 0 9 6 4 7 (EPA Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) | 201 West 155th St. (Hauler Address) | Holland, Ill 60473 | 312-596-3377 (Phone Number) | S.W.H. Registration Number 0 0 7 9 0 2 9 | I L D 0 6 9 5 0 6 16 (EPA Number)

(Hauler Name) | (Hauler Address) | (Phone Number) | S.W.H. Registration Number | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | 420 South Colfax (Address) | 19809907 (Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip) | 312-768-3400 (Phone Number) | I N D 0 1 6 3 6 0 2 6 5 (EPA Number)

(Alternate (Facility Name)) | (Address) | (Site Number)

(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Solvent & Paint | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
Waste Solvent	Flammable	U N 1 9 9 3	K 0 7 8

WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS OR GAL.

QUANTITY OF WASTE DELIVERED: 0 0 ~~55~~ 45 0 0 | 1 GALLONS (Circle One) 2 CU. YDS. | 1

METHOD OF SHIPMENT (Circle One) (DRUMS_____ Number) (TANK TRUCK) OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE 8/3/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED

(1) [signature] (Authorized Signature) DATE 8/3/82

(2) _____ (Authorized Signature) DATE ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZAROOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

[signature] (Authorized Signature) DATE 8/3/82

COMMENTS OR SPECIAL INSTRUCTIONS. _____

IN ILLINOIS, 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV # 3

SITE COPY - PART 3

RECEIVED 8-3-82

003183

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

TO BE COMPLETED BY WASTE GENERATOR

0527792

Authorization Number

FED ID ILD 095309647

Whittaker Corp.
Batavia Coatings & Chemicals | 1500 Lathem St. | 312-879-6800 | 0890100005
(Company Name) | Address | Phone Number | Generator Number

Batavia | Illinois | 60510
City | State | Zip | EPA Number

WASTE HAULER(S)

Mr. Frank, Inc. | 201 West 155th St. | S.W.H. Registration Number 0079029
Hauler Name | Hauler Address | FED ID ILD 069506160

312-596-3377
Phone Number | EPA Number

Hauler Name | Hauler Address | S.W.H. Registration Number

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemicals Service | 420 South Colfax | 91808902
(Facility Name) | Address | Site Number

Griffith | Indiana | 46319 | 312-768-3400 | FED ID IND 016360265
City | State | Zip | Phone Number | EPA Number

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Solvent WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Waste Solvent
HAZARD CLASS: Flammable
UN or NA Number: UN1993
EPA HW Number: K078

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)
WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. ~~OR GAL~~
QUANTITY OF WASTE DELIVERED 005000 (47–52) 1 GALLONS (Circle One) 2 CU. YDS. 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS _____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE: 8-05-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) DATE: 08/05/82 (54–59)

(2) _____ (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

[signature] (Authorized Signature) DATE 08/05/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637 OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA ~~PART 6 GENERATOR~~

REV # 3

SITE COPY - PART 3 TO SITE T-50 6PM 8-5-82

003182

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0527793

Authorization Number

FED ID ILD 095309647

Batavia Coatings Division
Whittaker Corporation (Company Name) | 1500 Lathem St. (Address) | 312-879-6800 (Phone Number) | 0 8 9 0 1 0 0 0 0 5 G (Generator Number)

Batavia (City) | Illinois (State) | 60510 (Zip) | EPA Number

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) | 201 West 155th St. So. Holland, Ill. (Hauler Address) | S.W.H. Registration Number 0 0 7 9 0 0 9 | FED ID ILD 069506160

312-596-3377 (Phone Number) | EPA Number

Hauler Name | Hauler Address | S.W.H. Registration Number

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | 420 South Colfax (Address) | 9 1 8 0 8 9 0 2 (Site Number)

FED ID IND 016360265

Griffith (City) | Indiana (State) | 46319 (Zip) | 312-768-3400 (Phone Number) | EPA Number

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS WASTE PHASE Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Waste Solvent

HAZARD CLASS: Flammable

UN 1 9 9 3 (UN or NA Number) | K078 (EPA HW Number)

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED 0 0 4 0 0 0 (47–52) 1 GALLONS (Circle One) 2 CU. YDS. 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS _____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE 8/12/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED

(1) [signature] (Authorized Signature) DATE 8/12/82 (54–59)

(2) _____ (Authorized Signature) DATE __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

[signature] (Authorized Signature) DATE 8/12/82

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV # 3

SITE COPY - PART 3

TC 21087-50 [illegible] 8-12-82

003190

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0527794

Authorization Number

TO BE COMPLETED BY WASTE GENERATOR

FED ID ILD 095309647

Batavia Coatings Division Whittaker Corporation (Company Name)	1500 Lathem St. (Address)	312-879-6800 (Phone Number)	0 8 9 0 1 0 0 0 0 5 G (Generator Number)
Batavia (City)	Illinois (State)	60510 (Zip)	(EPA Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name)	201 West 155th St. S. Holland, Ill (Hauler Address)	312-596-3377 (Phone Number)	S.W.H. Registration Number 0 0 7 9 6 2 9 FED ID ILD 069506160 (EPA Number)
(Hauler Name)	(Hauler Address)	(Phone Number)	S.W.H. Registration Number (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name)	420 South Colfax (Address)		9 1 8 0 8 9 0 2 (Site Number)
Griffith (City)	Indiana (State)	46319 (Zip)	312-768-3400 (Phone Number) FED ID IND 016360265 (EPA Number)
(Alternate (Facility Name))	(Address)		(Site Number)
(City)	(State)	(Zip)	(Phone Number) (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: _____ WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW

SHIPPING DESCRIPTION:	HAZARD CLASS		
Waste Solvent	Flammable	UN1993 (UN or NA Number)	K075 (EPA HW Number)

WEIGHT FOR D.O.T USE _____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 003000 (1 GALLONS (Circle One) / 2 CU YDS)

METHOD OF SHIPMENT (Circle One) (DRUMS_____ Number) (TANK TRUCK) OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION _____ (Authorized Signature) DATE 8/19/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) Tom Berry (Authorized Signature) DATE 08/19/82

(2) _____ (Authorized Signature) DATE ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

_____ (Authorized Signature) DATE 08/19/82

COMMENTS OR SPECIAL INSTRUCTIONS _____

IN ILLINOIS 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV # 3

SITE COPY - PART 3 To 210 K T-50 6PM 8-19-82

003189

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0527795

Authorization Number FED ID ILD 095309647

(Company Name)	Address	Phone Number	Generator Number
Batavia Coatings Division Whittaker Corporation	1500 Lathem St.	312-879-6800	0 8 9 0 1 0 0 0 0 5 G

City	State	Zip	EPA Number
Batavia	Illinois	60510	

WASTE HAULER(S)

Hauler Name	Hauler Address	Phone Number	EPA Number
Mr. Frank, Inc.	201 West 155th St. S. Holland, Ill	312-596-3377	FED ID ILD 069506160

S.W.H. Registration Number 0 0 7 9 0 0 1

Hauler Name	Hauler Address	Phone Number	EPA Number

S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

(Facility Name)	Address	Site Number
American Chem. Service	420 South Colfax	9 1 8 0 8 9 0 2

City	State	Zip	Phone Number	EPA Number
Griffith	Indiana	46319	312-768-3400	FED ID IND 016360265

Alternate (Facility Name)	Address	Site Number

City	State	Zip	Phone Number	EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
Waste Solvent	Flammable	U N 1 9 9 3	K 0 7 8

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS OR GAL. QUANTITY OF WASTE DELIVERED: 0 0 3 0 0 0 (1) GALLONS (Circle One) 2 CU. YDS 1

METHOD OF SHIPMENT (Circle One) (DRUMS _____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION. IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION X H J Szymanski (Authorized Signature) DATE: 9-2-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Mike Reigh (Authorized Signature) DATE 9/2/82

(2) _____ (Authorized Signature) DATE / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

(Authorized Signature) DATE 9/2/82

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV # 3

SITE COPY - PART 3 To 210 ft T-50 CFM 9-2-82

003188

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

TO BE COMPLETED BY WASTE GENERATOR

0527797 (1–7)

Authorization Number ____ (8–13)

Batavia Coatings Division
Whittaker Corporation (Company Name) | 1500 Lathem St. (Address) | 312-879-6800 (Phone Number) | 0 8 9 0 1 0 0 0 0 5 G (14–24) Generator Number
Batavia (City) | Illinois (State) | 60510 (Zip) | I L D 0 9 5 3 0 9 6 4 7 EPA Number

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) | 201 West 155th St. (Hauler Address) | S.W.H. Registration Number 0 0 7 9 ~~8 0 1~~ 0 1 9 (25–31)
S. Holland, Ill | 312-5963377 (Phone Number) | ILD 0 6 9 5 0 6 1 6 EPA Number

Hauler Name | Hauler Address | S.W.H. Registration Number (32–38)
Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Serv. (Facility Name) | 420 South Colfax (Address) | ~~0 1 8 0 8 9 0 2~~ (39–46) Site Number
Griffith (City) | Indiana (State) | 46319 (Zip) | 312-768-3400 (Phone Number) | IND 016360265 EPA Number

Alternate (Facility Name) | Address | (39–46) Site Number
City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Solvents | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS.		
Waste Solvent	Flammable	U N 1 9 9 3 (UN or NA Number)	~~K 0 7 8~~ (EPA HW Number)

WEIGHT FOR D.O.T. USE ____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED 0 0 4 5 0 0 (47–52) | 1 GALLONS / 2 CU. YDS. (Circle One) | 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS ____ Number) | TANK TRUCK | OPEN TRUCK | OTHER (Specify) ____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Henry J. Baymanski (Authorized Signature) DATE 10/7/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED

(1) Donald H Burt (Authorized Signature) DATE 10/07/82 (54–59)

(2) ____ (Authorized Signature) DATE ____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

T Dunkle (Authorized Signature) DATE 10/7/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: T Dunkle 10/7/82

IN ILLINOIS 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS 800 / 424-9300 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV # 3

SITE COPY - PART 3

TO210 RT-50 6PM 10-7-82

003187

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0527799 (1–7)

Authorization Number ____ (8–13)

Batavia Coatings Division (Company Name) | Whittaker Corporation | 1500 Lathem (Address) | 312-879-6800 (Phone Number) | 0890100005 (14, Generator Number) | G (24)

Batavia (City) | Illinois (State) | 60510 (Zip) | ILD 095309647 (EPA Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) | 201 West 155th St. (Hauler Address) | S.W.H. Registration Number 0079 009 (25–31)

South Holland, Ill | 312-596-3377 (Phone Number) | ILD 069506160 (EPA Number)

____ (Hauler Name) | ____ (Hauler Address) | S.W.H. Registration Number ____ (32–38)

____ (Phone Number) | ____ (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Serv (Facility Name) | 420 South Colfax (Address) | 91808902 (39–46 Site Number)

Griffth (City) | Indiana (State) | 46319 (Zip) | 312-768-3400 (Phone Number) | Z ILD 016360265 (EPA Number)

____ (Alternate (Facility Name)) | ____ (Address) | ____ (39–46 Site Number)

____ (City) | ____ (State) | ____ (Zip) | ____ (Phone Number) | ____ (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Solvents | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW.

SHIPPING DESCRIPTION:	HAZARD CLASS.	UN or NA Number	EPA HW Number
Waste Solvent	Flammable	UN 1993	K078

WEIGHT FOR D.D.T. USE ____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000 (47–52) | 1 GALLONS / 2 CU YDS (Circle One) 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS ____ Number) | TANK TRUCK | OPEN TRUCK | OTHER (Specify) ____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION ____ (Authorized Signature) | DATE: 11-2-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) ____ (Authorized Signature) | DATE 11/02/82 (54–59)

(2) ____ (Authorized Signature) | DATE ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

____ (Authorized Signature) | DATE 11/2/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS ____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS 217 / 782-3637 | OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV # 3

SITE COPY - PART 3 To 211 KT-50 GKM 11.2.82

003186

STATE OF ILLINOIS

TO BE COMPLETED BY TE GENERATOR

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0527801 (1–7)

Authorization Number (8–13)

Batavia Coatings Division Whittaker Corporation (Company Name) | 1500 Lathem (Address) | 312-879-6800 (Phone Number) | 0890100005 (14 Generator Number) G (24)

Batavia (City) | Illinois (State) | 60510 (Zip) | ILD 095309647 (EPA Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) | 201 West 155th St. (Hauler Address) | S.W.H. Registration Number 0079 025 (25–31)

South Holland, Ill (City) | 312-596-3377 (Phone Number) | ILD 069506160 (EPA Number)

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number (32–38)

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Serv (Facility Name) | 420 South Colfax (Address) | Z (39) 91808902 Site Number (40)

Griffth (City) | Indiana (State) | 46319 (Zip) | 312-768-3400 (Phone Number) | ILD 016360265 (EPA Number)

(Alternate (Facility Name)) | (Address) | (39 Site Number 40)

(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Solvents | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
Waste Solvent	Flammable	UN 1993	K078

WEIGHT FOR D.O.T. USE 41320 LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU YDS OR GAL

QUANTITY OF WASTE DELIVERED 004800 (47–52) GALLONS CU. YDS. (Circle One) 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS_____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE 11-4-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) [signature] (Authorized Signature) DATE 11/04/82 (54–59)

(2) _____ (Authorized Signature) DATE ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

(Authorized Signature) [signature] DATE 11-4-82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS 217 / 782-3637 — 24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV # 3

SITE COPY - PART 3

To 206K T-50 G/M 11.4.82

003149

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0527802 (1–7)

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number (8–13)

Batavia Coatings Division / Whittaker Corporation (Company Name) | 1500 Lathem (Address) | 312-879-6800 (Phone Number) | 0890100005 (14–24 Generator Number)

Batavia (City) | Illinois (State) | 60510 (Zip) | ILD 095309647 (EPA Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) | 201 West 155th St. (Hauler Address) | S.W.H. Registration Number 0079 025 (25–31)

South Holland, Ill | 312-596-3377 (Phone Number) | ILD 069506160 (EPA Number)

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number (32–38)

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Serv (Facility Name) | 420 South Colfax (Address) | 91808902 (39–46 Site Number)

Griffth (City) | Indiana (State) | 46319 (Zip) | 312-768-3400 (Phone Number) | ILD 016360265 (EPA Number)

(Alternate (Facility Name)) | (Address) | (39–46 Site Number)

(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Solvents | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW.

SHIPPING DESCRIPTION:	HAZARD CLASS:		
Waste Solvent	Flammable	UN 1993 (UN or NA Number)	K078 (EPA HW Number)

WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 004500 (47–52) (1 GALLONS (Circle One) / 2 CU. YDS.) (53)

METHOD OF SHIPMENT (Circle One) (DRUMS_____ Number) / TANK TRUCK / OPEN TRUCK / OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION M.B. Ball (Authorized Signature) DATE 11-16-52

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED

(1) Donald W Ball (Authorized Signature) DATE 11/16/52 (54–59)

(2) _____ (Authorized Signature) DATE ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

_____ (Authorized Signature) DATE 11/16/52 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS _____

IN ILLINOIS, 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS, 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

To 211 R 7-50 CFM 11-16-52

003200

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

Authorization Number 0527803 (Out of State Disposal) (8–13)

BATAVIA COATINGS DIV.
WHITTAKER CORP. (Company Name) | 1500 LATHEM (Address) | 312-879-6800 (Phone Number) | 0890100005 (14 Generator Number) G (24)

BATAVIA (City) | ILL. (State) | 60510 (Zip) | ILD 095309647 (EPA Number)

WASTE HAULER(S)

MR. FRANK, INC. (Hauler Name) | 201 W. 155TH. ST. (Hauler Address) | S.W.H. Registration Number 0079/009 (25–31)

SOUTH HOLLAND, ILL. | ~~312-596-3377~~ (Phone Number) | ~~ILD 069506160~~ (EPA Number)

Hauler Name | Hauler Address | S.W.H. Registration Number (32–38)

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMER. CHEM. SERVICE (Facility Name) | 420 S. COLFAX (Address) | 91808902 (39–46 Site Number)

GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | 312-768-3400 (Phone Number) | ILD 016360265 (EPA Number)

Alternate (Facility Name) | Address | (39–46 Site Number)

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ~~WASTE SOLVENTS~~ WASTE PHASE: ~~LIQUID~~ (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELDW:

SHIPPING DESCRIPTION.	HAZARD CLASS:	~~UN 1993~~ (UN or NA Number)	~~K078~~ (EPA HW Number)
~~WASTE SOLVENT~~	~~FLAMMABLE~~		

WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000 (47–52) 1 (GALLONS) (Circle One) 2 CU. YDS. (53)

METHDD OF SHIPMENT (Circle One) (DRUMS_____ Number) (TANK TRUCK) OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION M. Kelly (Authorized Signature) DATE: 1-5-83.

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) Tom Berry (Authorized Signature) DATE 01/05/83 (54–59)

(2) _____ (Authorized Signature) DATE __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

(Authorized Signature) DATE 1/5/83 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS _____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS, 217 / 782-3637 OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV # 3

SITE COPY - PART 3

To 210 FT-50 GRN 1.5.83

004655

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0527804

Authorization Number

BATAVIA COATINGS DIV. WHITTAKER CORP. (Company Name) | 1500 LATHEM (Address) | 312 879 6800 (Phone Number) | 0890100005 (Generator Number)

(City) | ILLINOIS (State) 60510 (Zip) | ILR 095309647 (EPA Number)

WASTE HAULER(S)

MR FRANK INC. (Hauler Name) | 4201 W.155TH ST. (Hauler Address) | S.W.H. Registration Number 0079 029

S. HOLLAND, ILL. | 312-596-3377 (Phone Number) | ILD 069506160 (EPA Number)

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMER. CHEMICAL SERV. (Facility Name) | 420 S. COLFAX (Address) | 91808902 (Site Number)

GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | 312-768-3400 (Phone Number) | ILD 016360265 (EPA Number)

(Alternate (Facility Name)) | (Address) | (Site Number)

(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: WASTE SOLVENT | HAZARD CLASS: FLAMMABLE | UN 1993 (UN or NA Number) | K0 78 (EPA HW Number)

WEIGHT FOR D.O.T. USE 40,000 (LBS) TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 04500 | 1 (GALLONS) 2 CU. YDS. (Circle One) 1

METHOD OF SHIPMENT (Circle One) (DRUMS_____ Number) | (TANK TRUCK) | OPEN TRUCK | OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) | DATE 1-7-83

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) [signature] (Authorized Signature) | DATE 01/07/83

(2) _____ (Authorized Signature) | DATE __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY:

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

[signature] (Authorized Signature) | DATE 1/7/83

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

TO 210 KT-506 EM 1-7-83

004656

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0527805

Authorization Number

Batavia Coatings Division Whittaker Corp. (Company Name) | 1500 Lather (Address) | 312 879 6800 (Phone Number) | 0890100005 (Generator Number)

Batavia (City) | Illinois (State) | 60510 (Zip) | IL 095309647 (EPA Number)

WASTE HAULER(S)

Mr. Frank Inc. (Hauler Name) | 201 W. 155TH St. (Hauler Address) | S.W.H. Registration Number 0079/019

S. Holland Ill. | 312-596-3377 (Phone Number) | ILD 069506160 (EPA Number)

Hauler Name | Hauler Address | S.W.H. Registration Number

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

Amer. Chemical Service (Facility Name) | 420 S. Colfax (Address) | 91808902 (Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip) | 312-768-3400 (Phone Number) | ILD 016360265 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Solvents WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Waste Solvent

HAZARD CLASS: Flammable

UN 1993 (UN or NA Number) | KO 78 (EPA HW Number)

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 003000 (GALLONS (Circle One) 2 CU. YDS.) 1

METHOD OF SHIPMENT (Circle One) (DRUMS _____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE 1/18/83

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) DATE 01/18/83

(2) _____ (Authorized Signature) DATE __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

[signature] (Authorized Signature) DATE 1/18/83

COMMENTS OR SPECIAL INSTRUCTIONS _____

IN ILLINOIS 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3 TO 210 FT - 50 GRM 1.18.83

004658

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0527806

Authorization Number

BATAVIA COATINGS DIVISION
WHITTAKER CORPORATION (Company Name) | 1500 LATHEM (Address) | 312-879-6800 (Phone Number) | 0890100005 (Generator Number)

BATAVIA (City) | ILLINOIS (State) | 60510 (Zip) | ILD 095309647 (EPA Number)

WASTE HAULER(S)

MR. FRANK, INC. (Hauler Name) | 201 WEST 155TH ST. (Hauler Address) | S.W.H. Registration Number 0079 029

SOUTH HOLLAND, ILL | 312-596-3377 (Phone Number) | ILD 069506160 (EPA Number)

Hauler Name | Hauler Address | S.W.H. Registration Number

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERV. (Facility Name) | 420 COLFAX SOUTH- (Address) | 91808902 (Site Number)

GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | 312-768-3400 (Phone Number) | ILD 016360265 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: WASTE SOLVENT | HAZARD CLASS: FLAMMABLE | UN 1993 (UN or NA Number) | K 078 (EPA HW Number)

WEIGHT FOR D.O.T USE _____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 004500 (1 GALLONS (Circle One) / 2 CU. YDS.) 1

METHOD OF SHIPMENT (Circle One) (DRUMS_____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION _____ (Authorized Signature) DATE: 1-31-83

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) Donald H Burk (Authorized Signature) DATE: 01/31/83

(2) _____ (Authorized Signature) DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

_____ (Authorized Signature) DATE 1/31/83

COMMENTS OR SPECIAL INSTRUCTIONS _____

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV # 3

SITE COPY - PART 3

To 211 KT-50 GM 1.31.83

004659

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0527807
Authorization Number

...MPLETED BY WASTE GENERATOR

Batavia Coatings Division
Whittaker Corporation (Company Name) | 1500 Lathem (Address) | 312-879-6800 (Phone Number) | 0890100005 (Generator Number)
Batavia (City) | Illinois (State) | 60510 (Zip) | ILD 095309647 (EPA Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) | 201 West 155th St. (Hauler Address) | S.W.H. Registration Number 0079 019
312-596-3377 (Phone Number) | ILD 069506160 (EPA Number)

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number
(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Serv. (Facility Name) | 420 South Colfax (Address) | 91808902 (Site Number)
Griffth (City) | Indiana (State) | 46319 (Zip) | 312-768-3400 (Phone Number) | ILD 016360265 (EPA Number)

(Alternate (Facility Name)) | (Address) | (Site Number)
(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Solvents | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Waste Solvent | HAZARD CLASS: Flammable | UN 1993 (UN or NA Number) | K07S (EPA HW Number)

WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 004500 (47–52) (1 GALLONS (Circle One) / 2 CU. YDS.) 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS_____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION _____ (Authorized Signature) DATE 2-16-83

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED

(1) _____ (Authorized Signature) DATE 02/16/83 (54–59)

(2) _____ (Authorized Signature) DATE ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

_____ (Authorized Signature) DATE 02/16/83 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS
IN ILLINOIS, 217 / 782-3637 — OUTSIDE ILLINOIS, 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

To 211 K & Mix Pad T-50
GRM 2.16.83

0046[illegible]

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0527808 (1–7)

Authorization Number (8–13)

BATAVIA COATINGS DIVISION
WHITTAKER CORPORATION (Company Name) | 1500 LATHEM (Address) | 312-879-6800 (Phone Number) | 0890100005 (14 Generator Number) (G 24)

BATAVIA (City) | ILLINOIS (State) | 60510 (Zip) | ILD 095309647 (EPA Number)

WASTE HAULER(S)

MR. FRANK, INC. (Hauler Name) | 201 WEST 155TH ST. (Hauler Address) | S.W.H. Registration Number 0079/019 (25–31)

SOUTH HOLLAND, IL | 312-596-3377 (Phone Number) | ILD 069506160 (EPA Number)

Hauler Name | Hauler Address | S.W.H. Registration Number (32–38)

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERV (Facility Name) | 420 SOUTH COLFAX (Address) | 91808902 (39–46 Site Number)

GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | 312-768-3400 (Phone Number) | ILD 016360265 (EPA Number)

Alternate (Facility Name) | Address | (39–46 Site Number)

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATIDN INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
WASTE SOLVENT	FLAMMABLE	UN 1993	K078

WEIGHT FOR D.O.T. USE 42000 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 005000 (47–52) (1 GALLONS (Circle One) 2 CU. YDS.) 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS____ Number) (TANK TRUCK) OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIDNS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Neal J. Barnard (Authorized Signature) DATE 3-9-83

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED

(1) Ronald Bridgewater (Authorized Signature) DATE 03/09/83 (54–59)

(2) ____ (Authorized Signature) DATE __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY:

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

(Authorized Signature) DATE 3/9/83 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS

IN ILLINOIS 217 / 782 3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV # 3

SITE COPY - PART 3 T0210KT-50 GRM 3.9.83

004661

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

TO BE COMPLETED BY WASTE GENERATOR

0527809 (1–7)

Authorization Number (8–13)

BATAVIA COATINGS DIVISION
WHITTAKER CORPORATION (Company Name)
1500 LATHEM (Address)
312-879-6800 (Phone Number)
0890100005 (14 Generator Number 24) G

BATAVIA (City)
ILLINOIS (State)
60510 (Zip)
ILD 095309647 (EPA Number)

WASTE HAULER(S)

MR. FRANK, INC. (Hauler Name)
201 WEST 155TH ST. (Hauler Address)
S.W.H. Registration Number 0079 019 (25–31)

SOUTH HOLLAND, ILL
312-596-3377 (Phone Number)
ILD 069506160 (EPA Number)

Hauler Name
Hauler Address
S.W.H. Registration Number (32–38)

Phone Number
EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name)
420 SOUTH COLFAX (Address)
91808902 (39 Site Number 46)

GRIFFITH (City)
INDIANA (State)
46319 (Zip)
312-768-3400 (Phone Number)
ILD 016360265 (EPA Number)

Alternate (Facility Name)
Address
39 Site Number 46

City
State
Zip
Phone Number
EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS
WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: WASTE SOLVENT
HAZARD CLASS: FLAMMABLE
UN 1993 (UN or NA Number)
K 078 (EPA HW Number)

WEIGHT FOR D.O.T. USE 40,000 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS OR GAL.

QUANTITY OF WASTE DELIVERED: 004500 (47–52)
1 (GALLONS) 2 CU. YDS. (Circle One) 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS_____ Number) (TANK TRUCK) OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE 3-24-83

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED

(1) Donald W Belt (Authorized Signature) DATE 03/24/83 (54–59)

(2) _____ (Authorized Signature) DATE __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

[signature] (Authorized Signature) DATE 3/24/83 (60–65)

430

COMMENTS OR SPECIAL INSTRUCTIONS _____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637 OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV # 3

SITE COPY - PART 3

To 210 RT-50 61st 3-24-83

004662

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0527810 (1–7)

Authorization Number ____ (8–13)

TO BE COMPLETED BY WASTE GENERATOR

BATAVIA COATINGS DIVISION — (Company Name)
WHITTAKER CORPORATION
1500 LATHEN ST. — Address
312-879-6800 — Phone Number
0890100005 — Generator Number (14–24)

BATAVIA — City
ILLINOIS — State
60510 — Zip
ILD 095309647 — EPA Number

WASTE HAULER(S)

MR. FRANK, INC. — Hauler Name
201 WEST 155TH ST. — Hauler Address
SO. HOLLAND, IL
312-596-3377 — Phone Number
S.W.H. Registration Number 0079 009 (25–31)
ILD 069506160 — EPA Number

Hauler Name
Hauler Address
Phone Number
S.W.H. Registration Number (32–38)
EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERV — (Facility Name)
420 SO. COLFAX — Address
91808902 — Site Number (39–46)

GRIFFITH — City
INDIANA — State
46319 — Zip
312-76803400 — Phone Number
ILD 016360265 — EPA Number

Alternate (Facility Name)
Address
Site Number (39–46)

City
State
Zip
Phone Number
EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS
WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
WASTE SOLVENT	FLAMMABLE	UN 1993	K078

WEIGHT FOR D.O.T. USE ____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 005000 (47–52) GALLONS / CU YDS (Circle One): 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS ____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) ____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE: 4/15/83

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED

(1) [signature] (Authorized Signature) DATE: 4/15/83 (54–59)

(2) ____ (Authorized Signature) DATE ____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ____

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

[signature] (Authorized Signature) DATE: 4/15/83 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS ____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS, 217 / 782-3637 — OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV # 3

SITE COPY - PART 3

To 210 RT-50 6204 4-15-83

004663

HAZARDOUS WASTE MANIFEST

ORIGINAL – NOT NEGOTIABLE

05
MANIFEST DOCUMENT NUMBER

P.O. #1241

MR. FRANK
NAME OF CARRIER (SCAC)

ILD 095309647
~~SHIPPER NUMBER~~
ILD 069506160
CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	ILD 095309647	BATAVIA COATINGS & CHEMICALS DIV. 1500 LATHEM ST., BATAVIA, IL. 60510 312/879-6800	~~12/22/87~~
TRANSPORTER # 1	ILD 069506160	MR. FRANK INC. 201 W. 155TH ST., SO. HOLLAND, IL. 312/596-3377	~~12/22/87~~
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND 016360265	AMERICAN CHEMICALS SERVICE 420 S. COLFAX, GRIFFITH, IND. 312/768-3400	12/18 ~~12/22/87~~

DRAFT

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGE (For Carr Use Onl
TANK TRUCK	XX	WASTE SOLVENT FLAMMABLE LIQUID, N.O.S.	UN1993			5000 /		

SPECIAL HANDLING INSTRUCTIONS

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED
Yes ☐ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

TOTAL CHARGES: $

FREIGHT CHARGES
FREIGHT PREPAID except when box at right is checked ☐
Check box if charges are to be collected

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding
$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."
_____ Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement.
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.
_____ (Signature of Consignor)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency.

GENERATOR'S SIGNATURE _____ DATE _____

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE _____

TRANSPORTER #2 SIGNATURE & DATE (if required) _____

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

TSDF SIGNATURE _____ DATE 1/15/88

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

004657

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0527811
Authorization Number

BATAVIA COATINGS DIVISION — (Company Name)
WHITTAKER CORPORATION
1500 LATHEM ST. — Address
312-879-6800 — Phone Number
0890100005 — Generator Number
BATAVIA — City
ILLINOIS — State
Zip
ILD 095309647 — EPA Number

WASTE HAULER(S)

MR. FRANK, INC. — Hauler Name
201 WEST 155TH ST. — Hauler Address
S.W.H. Registration Number 0079 019
SOUTH HOLLAND, IL
312-596-3377 — Phone Number
ILD 069506160 — EPA Number

Hauler Name
Hauler Address
S.W.H. Registration Number
Phone Number
EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE — (Facility Name)
420 SOUTH COLFAX — Address
91808902 — Site Number
GRIFFITH — City
INDIANA — State
46319 — Zip
312-768-3400 — Phone Number
IND 016360265 — EPA Number

Alternate (Facility Name)
Address
Site Number
City
State
Zip
Phone Number
EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS
WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION	HAZARD CLASS:	UN or NA Number	EPA HW Number
WASTE SOLVENT	FLAMMABLE	UN 1993	K078

WEIGHT FOR D.O.T. USE ____ LBS / TONS (circle one)
WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.
QUANTITY OF WASTE DELIVERED 004700 (47–52)
1 GALLONS (Circle One) 2 CU. YDS. 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS ____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) ____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION — (Authorized Signature) — DATE 4-21-83

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) [signature] (Authorized Signature) — DATE 04/21/83 (54–59)

(2) ____ (Authorized Signature) — DATE ____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

[signature] (Authorized Signature) — DATE 4/21/83 (56–59)

COMMENTS OR SPECIAL INSTRUCTIONS ____

IN ILLINOIS 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR — PART - 2 IEPA — PART - 3 SITE — PART - 4 HAULER — PART - 5 IEPA — PART 6 - GENERATOR

REV # 3

SITE COPY - PART 3 To 210 RT-50 GRN 4-21-83

004664

HAZARDOUS WASTE MANIFEST

ORIGINAL — NOT NEGOTIABLE

05
MANIFEST DOCUMENT NUMBER
ILD 095309647

MR. FRANK
NAME OF CARRIER (SCAC)

SHIPPER NUMBER
ILD 069506160
CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	ILD 095309647	BATAVIA COATINGS DIVISION 1500 LATHEM ST., BATAVIA, IL 60510 (312) 879-6800	
TRANSPORTER # 1	ILD 069506160	MR. FRANK INC. 201 W. 155TH ST., SO. HOLLAND, IL (312) 596-3377	
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND 016360265	AMERICAN CHEMICALS SERVICE 420 S. COLFAX, GRIFFITH, IND (312) 768-3400	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGE (For Carrier Use Only)
TANK TRUCK	XX	WASTE SOLVENT FLAMMABLE LIQUID, N.O.S.	UN 1993					

SPECIAL HANDLING INSTRUCTIONS

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED
Yes ☐ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE:
PREPAID ☐
COLLECT ☐ $

TOTAL CHARGES: $

FREIGHT CHARGES
FREIGHT PREPAID except when box at right is checked ☐
Check box if charges are to be collected

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding
$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

_____ Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement.
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

_____ (Signature of Consignor)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

TSDF SIGNATURE

6/17/83
DATE

5

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

004665

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0527812 (1–7)

Authorization Number (8–13)

BATAVIA COATINGS DIVISION
WHITTAKER CORPORATION (Company Name) | 1500 LATHEM (Address) | 312-879-6800 (Phone Number) | 0890100005 (14 Generator Number 24) G

BATAVIA (City) | ILLINOIS (State) | 60510 (Zip) | ILD 095309647 (EPA Number)

WASTE HAULER(S)

MR. FRANK, INC. (Hauler Name) | 201 WEST 155TH ST. (Hauler Address) | S.W.H. Registration Number 0079 0 19 (25–31)

SOUTH HOLLAND, IL | 312-596-3377 (Phone Number) | ILD 069506160 (EPA Number)

Hauler Name | Hauler Address | S.W.H. Registration Number (32–38)

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERV. (Facility Name) | 420 SOUTH COLFAX (Address) | 91808902 (39 Site Number 46)

GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | 312-768-3400 (Phone Number) | IND 016360265 (EPA Number)

Alternate (Facility Name) | Address | 39 Site Number 46

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: WASTE SOLVENT | HAZARD CLASS: FLAMMABLE | UN 1993 (UN or NA Number) | K078 (EPA HW Number)

WEIGHT FOR D.O.T USE 41,000 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 004500 (47–52) (1) GALLONS (Circle One) (2) CU. YDS (53)

METHOD OF SHIPMENT (Circle One) (DRUMS_____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION _____ (Authorized Signature) DATE: 5/17/83

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) _____ (Authorized Signature) DATE 05/17/83 (54–59)

(2) _____ (Authorized Signature) DATE ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

_____ (Authorized Signature) DATE 5 17 83 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS _____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637 OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

TO 210 R T-50 GRM 5-1783

004666

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

TO BE COMPLETED BY WASTE GENERATOR

0527813 (1–7)

Authorization Number (8–13)

BATAVIA COATINGS DIVISION — (Company Name)
WHITTAKER CORPORATION
1500 LATHEM ST. — Address
312-879-6800 — Phone Number
0890100005 — Generator Number (14–24)

BATAVIA — City
ILLINOIS — State
60510 — Zip
ILD 089309647 — EPA Number

WASTE HAULER(S)

MR. FRANK, INC. — Hauler Name
201 WEST 155TH ST. — Hauler Address
S.W.H. Registration Number 0079 029 (25–31)
SOUTH HOLLAND, IL
312-596-3377 — Phone Number
ILD 069506160 — EPA Number

Hauler Name
Hauler Address
S.W.H. Registration Number (32–38)
Phone Number
EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE — (Facility Name)
420 SOUTH COLFAX — Address
91808902 — Site Number (39–46)
GRIFFITH — City
INDIANA — State
46319 — Zip
312-768-3400 — Phone Number
IND 016360265 — EPA Number

Alternate (Facility Name)
Address
Site Number (39–46)
City
State
Zip
Phone Number
EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS
WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: WASTE SOLVENT
HAZARD CLASS: FLAMMABLE
UN 1993 — UN or NA Number
K078 — EPA HW Number

WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one)
WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.
QUANTITY OF WASTE DELIVERED: 005000 (47–52) GALLONS (Circle One) / 2 CU. YDS. 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS_____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION — (Authorized Signature) — DATE 6-3

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) _____ (Authorized Signature) DATE 6/3/83 (54–59)

(2) _____ (Authorized Signature) DATE ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

_____ (Authorized Signature) DATE 6/1/83 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS 217 / 782-3637 — OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR — PART - 2 IEPA — PART - 3 SITE — PART - 4 HAULER — PART - 5 IEPA — PART 6 - GENERATOR

REV # 3

SITE COPY - PART 3

To 210K T-506GAL 6-1-83

004667

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0527814 (1 7)

Authorization Number ____ (8 13)

BATAVIA COATINGS DIVISION

WHITTAKER CORP (Company Name) | 1500 LATHEM (Address) | 312-879-6800 (Phone Number) | 0890100005 (14 Generator Number) G (24)

BATAVIA (City) | ILLINOIS (State) 60510 (Zip) | ILD 095309647 (EPA Number)

WASTE HAULER(S)

MR. FRANK INC. (Hauler Name) | 201 WEST 155TH ST (Hauler Address) | S.W.H. Registration Number 0079029 (25 31)

SOUTH HOLLAND, IL | 312-596-3377 (Phone Number) | ILD 069506160 (EPA Number)

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number (32 38)

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERV (Facility Name) | 420 S. COLFAX (Address) | 91808902 (39 Site Number 46)

GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | 312-768-3400 (Phone Number) | ILD 016360265 (EPA Number)

(Alternate (Facility Name)) | (Address) | (39 Site Number 46)

(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW

SHIPPING DESCRIPTION:	HAZARD CLASS.	UN or NA Number	EPA HW Number
WASTE SOLVENT	FLAMMABLE	UN 1993	K078

WEIGHT FOR D.O.T. USE 40,000 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 0 0 5 0 0 0 (47 52)

1 (GALLONS) (Circle One) 2 CU. YDS (53)

METHOD OF SHIPMENT (Circle One) (DRUMS_____ Number) (TANK TRUCK) OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION _____ (Authorized Signature) DATE: 6-9-83

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) _____ (Authorized Signature) DATE 6/9/83 (54 59)

(2) _____ (Authorized Signature) DATE __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

_____ (Authorized Signature) DATE 6/9/83 (60 65)

COMMENTS OR SPECIAL INSTRUCTIONS _____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS 217 / 782-3637 | OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV 4 3

SITE COPY - PART 3

To 211ET-50 6PM 6-9-83

004669

HAZARDOUS WASTE MANIFEST

ORIGINAL – NOT NEGOTIABLE

05
MANIFEST DOCUMENT NUMBER

ILD 095309647
SHIPPER NUMBER

MR. FRANK
NAME OF CARRIER (SCAC)

ILD 06950610
CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	ILD 095309647	BATAVIA COATINGS 1500 LATHEM ST., BATAVIA, IL. 60510 312/879-6800	
TRANSPORTER # 1	ILD 069506160	MR. FRANK INC. 201 W. 155TH. ST., SO. HOLLAND, IL. 312/596-3377	
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND 016360265	AMERICAN CHEMICALS SERVICE 420 S. COLFAX, GRIFFITH, IND. 312/~~886~~-768-3400	6/9/8

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
TANK TRUCK		WASTE SOLVENT FLAMMABLE LIQUID, N.O.S.	UN1993			5,000 GALLONS		

SPECIAL HANDLING INSTRUCTIONS

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED
Yes ☐ No ☐

REMIT
C.O.D. TO:
ADDRESS

COD Amt: $

C.O.D. FEE:
PREPAID ☐
COLLECT ☐ $

TOTAL CHARGES: $

FREIGHT CHARGES
FREIGHT PREPAID except when box at right is checked ☐
Check box if charges are to be collected

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding
$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

_____ Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

_____ (Signature of Consignor)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

TSDF SIGNATURE DATE

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

004668

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0527815

Authorization Number

BATAVIA COATINGS DIVISION WHITTAKER CORPORATION (Company Name) | 1500 LATHEM ST. (Address) | 312-879-6800 (Phone Number) | 0890100005 (Generator Number)

BATAVIA (City) | ILL (State) | 60510 (Zip) | ILD 095309647 (EPA Number)

WASTE HAULER(S)

MR. FRANK, INC. (Hauler Name) | 201 W. 155TH ST. (Hauler Address) | S.W.H. Registration Number 0079009

SOUTH HOLLAND, IL | 312-596-3377 (Phone Number) | ILD 069506160 (EPA Number)

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERV. (Facility Name) | 420 SOUTH COLFAX (Address) | 91808902 (Site Number)

GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | 312-768-3400 (Phone Number) | IND 016360265 (EPA Number)

(Alternate (Facility Name)) | (Address) | (Site Number)

(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS		
WASTE SOLVENT	FLAMMABLE	UN 1993 (UN or NA Number)	K 078 (EPA HW Number)

WEIGHT FOR D.O.T. USE 40500 LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 004500 (1 GALLONS 2 CU. YDS (Circle One)) 1

METHOD OF SHIPMENT (Circle One) (DRUMS ____ Number) (TANK TRUCK) OPEN TRUCK OTHER (Specify) ____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION X [signature] (Authorized Signature) DATE 6-23-83.

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED

(1) [signature] (Authorized Signature) DATE 06/23/83

(2) ____ (Authorized Signature) DATE ____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

[signature] (Authorized Signature) DATE 6 23 83

COMMENTS OR SPECIAL INSTRUCTIONS ____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS 217 / 782-3637 OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

To 210E T-50 6RM 6-23-83

004677

HAZARDOUS WASTE MANIFEST

ORIGINAL – NOT NEGOTIABLE

05
MANIFEST DOCUMENT NUMBER

ILD 095309647
SHIPPER NUMBER

MR. FRANK
NAME OF CARRIER (SCAC)

ILD 069506160
CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	ILD 095309647	BATAVIA COATINGS DIVISION 1500 LATHEM ST., BATAVIA, IL 60510 312-879-6800	
TRANSPORTER # 1	ILD 069506160	MR. FRANK INC. 201 W. 155TH ST., SO. HOLLAND, IL 312-596-3377	
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND 016360265	AMERICAN CHEMICALS SERVICE INC. 420 S. COLFAX, GRIFFITH, IN 312-768-3400	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
TANK TRUCK		WASTE SOLVENT FLAMMABLE LIQUID, N.O.S.	UN 1993			4500		

SPECIAL HANDLING INSTRUCTIONS

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED
Yes ☐ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

TOTAL CHARGES: $

FREIGHT CHARGES
FREIGHT PREPAID except when box at right is checked ☐
Check box if charges are to be collected

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding.
$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."
_____ Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges
_____ (Signature of Consignor)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

TSDF SIGNATURE

6/23/83
DATE

5

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

004670

COMPLETED BY
.E GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0527816
1 7

Authorization Number ____ 8 13

BATAVIA COATINGS DIVISION
WHITTAKER CORPORATION (Company Name) | 1500 LATHEM ST. (Address) | 312-879-6800 (Phone Number) | 0890100005 (14 Generator Number) G 24

BATAVIA (City) | ILLINOIS (State) | 60510 (Zip) | ILD 095309647 (EPA Number)

WASTE HAULER(S)

MR. FRANK, INC. (Hauler Name) | 201 WEST 155TH ST. (Hauler Address) | S.W.H. Registration Number 0079009 (25 31)

SOUTH HOLLAND, ILL | 312-596-3377 (Phone Number) | ILD 069506160 (EPA Number)

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number (32 38)

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERV. (Facility Name) | 420 SOUTH COLFAX (Address) | 91808902 (39 Site Number 46)

GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | 312-768-3400 (Phone Number) | IND 016360265 (EPA Number)

(Alternate (Facility Name)) | (Address) | 39 Site Number 46

(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: WASTE SOLVENT | HAZARD CLASS: FLAMMABLE | UN 1993 (UN or NA Number) | K078 (EPA HW Number)

WEIGHT FOR D.O.T. USE 40,000 LBS / TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 00440 (47 52) | 1 GALLONS (Circle One) 2 CU YDS (53)

METHOD OF SHIPMENT (Circle One) (DRUMS____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) ____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION ____ (Authorized Signature) DATE 7.7.83

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) ____ (Authorized Signature) DATE 07 07 83 (54 59)

(2) ____ (Authorized Signature) DATE __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO____

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

____ (Authorized Signature) DATE 7 7 83 (60 65)

COMMENTS OR SPECIAL INSTRUCTIONS To 210E T-50 7/7/83 Jim Murphy

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637 OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV # 3

SITE COPY - PART 3

004673

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0527817

Authorization Number

BATAVIA COATINGS DIVISION
WHITTAKER CORPORATION (Company Name) | 1500 LATHEM (Address) | 312 879 6800 (Phone Number) | 0890100005 (Generator Number)

BATAVIA (City) | ILLINOIS (State) | 60510 (Zip) | ILD 095309647 (EPA Number)

WASTE HAULER(S)

MR. FRANK, INC. (Hauler Name) | 201 WEST 155TH ST. SOUTH HOLLAND, IL (Hauler Address) | S.W.H. Registration Number 0079/009
312 596-3377 (Phone Number) | ILD 069506160 (EPA Number)

Hauler Name | Hauler Address | S.W.H. Registration Number
Phone Number | EPA Number

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERV (Facility Name) | 420 SOUTH COLFAX (Address) | 91808902 (Site Number)
GRIFFTH (City) | INDIANA (State) | 46319 (Zip) | 312-768-3400 (Phone Number) | ILD 016260265 (EPA Number)

Alternate (Facility Name) | Address | Site Number
City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW

SHIPPING DESCRIPTION:	HAZARD CLASS	UN or NA Number	EPA HW Number
WASTE SOLVENT	FLAMMABLE	UN 1993	F005

WEIGHT FOR D.O.T. USE: 40,000 LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS OR GAL.

QUANTITY OF WASTE DELIVERED: 02470 | 1 GALLONS (Circle One) 2 CU YDS.

METHOD OF SHIPMENT (Circle One) (DRUMS_____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION (Authorized Signature) DATE 7/18/83

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED

(1) (Authorized Signature) DATE 07/18/83

(2) (Authorized Signature) DATE __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

(Authorized Signature) DATE 7/18/83

COMMENTS OR SPECIAL INSTRUCTIONS _____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637 OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

To 210 KT-50 GRM 7-18-83

004675

HAZARDOUS WASTE MANIFEST

ORIGINAL – NOT NEGOTIABLE

05
MANIFEST DOCUMENT NUMBER

ILD 095309647
SHIPPER NUMBER

MR. FRANK
NAME OF CARRIER (SCAC)

ILD 069506160
CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	ILD 095309647	BATAVIA COATINGS DIVISION 1500 LATHEM ST., BATAVIA, IL. 60510 312-879-6800	
TRANSPORTER # 1	ILD 069506160	MR. FRANK INC. 201 WEST 155TH ST., SO. HOLLAND, IL 312-596-3377	
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND 016360265	AMERICAN CHEMICALS SERVICE 420 S. COLFAX, GRIFFITH, INC. 312-768-3400	7/7/83

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only
TANK TRUCK	XX	WASTE SOLVENT FLAMMABLE LIQUID, N.O.S.	UN1993			4700		

SPECIAL HANDLING INSTRUCTIONS

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED
Yes ☐ No ☐

REMIT C.O.D. TO:
ADDRESS

COD Amt: $

C.O.D. FEE:
PREPAID ☐
COLLECT ☐ $

TOTAL CHARGES: $

FREIGHT CHARGES
FREIGHT PREPAID except when box at right is checked ☐ Check box if charges are to be collected

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding
$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

_____ Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges

_____ (Signature of Consignor)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

TSDF SIGNATURE DATE 7/7/83

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

004672

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0527818 (1–7)

Authorization Number (8–13)

TO BE COMPLETED BY WASTE GENERATOR

BATAVIA COATINGS DIVISION
WHITTAKER CORPORATION (Company Name)

1500 LATHEM ST. (Address)

312-879-6800 (Phone Number)

0890100005 (14–24) Generator Number

BATAVIA (City)

ILLINOIS (State) 60510 (Zip)

ILD 095309647 EPA Number

WASTE HAULER(S)

MR. FRANK INC. (Hauler Name)

201 WEST 155TH ST. (Hauler Address)

S.W.H. Registration Number (25–31) 0079/0179

SOUTH HOLLAND, ILL

312-596-3377 (Phone Number)

ILD 069506160 EPA Number

Hauler Name

Hauler Address

S.W.H. Registration Number (32–38)

Phone Number

EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name)

420 SOUTH COLFAX (Address)

91808902 (39–46) Site Number

GRIFFITH (City)

INDIANA (State) 46319 (Zip)

312-768-3400 (Phone Number)

IND 016360265 EPA Number

Alternate (Facility Name)

Address

(39–46) Site Number

City

State

Zip

Phone Number

EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
WASTE SOLVENT	FLAMMABLE	UN 1993	F005

WEIGHT FOR D.O.T. USE 4300 LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED (47–52) 004600

1 GALLONS (Circle One) 2 CU. YDS. (53)

METHOD OF SHIPMENT (Circle One) (DRUMS_____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE 10/5/83

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED

(1) [signature] (Authorized Signature) DATE (54–59) 10/5/83

(2) _____ (Authorized Signature) DATE __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

[signature] (Authorized Signature) DATE (60–65) 10/5/83

COMMENTS OR SPECIAL INSTRUCTIONS _____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637 OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

To 210 KT-50 GRM 8-15-83

004670

STATE OF ILLINOIS

E COMPLETED BY
ASTE GENERATOR

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0527819
1 7

Authorization Number 8 13

Batavia Coatings Division
Whittaker Corporation (Company Name) | 1500 Lathem St. (Address) | 312-879-6800 (Phone Number) | 0890100005 (14 Generator Number 24) G

Batavia (City) | Illinois (State) | 60510 (Zip) | ILD 095309647 (EPA Number)

WASTE HAULER(S)

Mr. Frank Inc. (Hauler Name) | 201 West 155th Street (Hauler Address) | S.W.H. Registration Number 0079 018 (25 31)

South Holland, IL | 312-596-3377 (Phone Number) | ILD 069506160 (EPA Number)

Hauler Name | Hauler Address | S.W.H. Registration Number (32 38)

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Serv. (Facility Name) | 420 Colfax South (Address) | 91808902 (39 Site Number 46)

Griffith (City) | Indiana (State) | 46319 (Zip) | 312-768-3400 (Phone Number) | IND 016360265 (EPA Number)

Alternate (Facility Name) | Address | 39 Site Number 46

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Solvents | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Waste Solvent | HAZARD CLASS: Flammable | UN 1993 (UN or NA Number) | F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE 24 LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 224500 (47 52) (1) GALLONS (Circle One) / CU. YDS. (53)

METHDO OF SHIPMENT (Circle One) (DRUMS_____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE: 8 30 83

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) DATE 8/30/83 (54 59)

(2) _____ (Authorized Signature) DATE __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[signature] (Authorized Signature) DATE 8 30 83 (60 65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV # 3

SITE COPY - PART 3 TO 210 ET-50 GRM 8-30-83

0046T8

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0527820

Authorization Number 000000

Batavia Coatings Division
Whittaker Corporation (Company Name) | 1500 Lathem (Address) | (312) 879-6800 (Phone Number) | 0890100005 (Generator Number) G

Batavia (City) | Illinois (State) | 60510 (Zip) | ILD 095309647 (EPA Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) | 201 West 155th St. (Hauler Address) | S.W.H. Registration Number 0079 018

South Holland, Il. | (312) 596-3377 (Phone Number) | ILD 069506160 (EPA Number)

Hauler Name | Hauler Address | S.W.H. Registration Number

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Serv (Facility Name) | 420 South Colfax (Address) | 91808902 (Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip) | (312) 768-3400 (Phone Number) | ILD 016360265 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Solvents WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Waste Solvent

HAZARD CLASS: Flammable

UN 1993 (UN or NA Number) | F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED 001900 (1 GALLONS (Circle One) 2 CU. YDS)

METHOD OF SHIPMENT (Circle One) (DRUMS _____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION X [signature] (Authorized Signature) DATE: 9-1-83

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) DATE 09/01/83

(2) _____ (Authorized Signature) DATE / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

[signature] (Authorized Signature) DATE 9/1/83

COMMENTS OR SPECIAL INSTRUCTIONS _____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS 217 / 782-3637 OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV # 3

SITE COPY - PART 3

To 210K T-50 GRM 9-1-83

004679

.AZARDOUS WASTE MANIFEST

ORIGINAL — NOT NEGOTIABLE

05
MANIFEST DOCUMENT NUMBER

ILD 095309647
SHIPPER NUMBER

Mr. Frank
NAME OF CARRIER (SCAC)

ILD 069506160
CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPI OR RECEIVE
GENERATOR/ SHIPPER	ILD 095309647	Batavia Coatings & Chemical Div W1500 Lathem St., Batavia, IL 60510 312/879-6800	1-31-8
TRANSPORTER # 1	ILD 069506160	Mr. Frank, Inc. 201 W. 155th st., S. Holland, IL 312/596-3377	
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DIS— POSAL FACILITY			
TSDF TREATMENT STORAGE OR DIS— POSAL FACILITY	ILD 016360265	American Chemical Serv. 420 S. Colfax, Griffith, IN 312/768-3400	9/28/

ALTERNATE

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGE (For Carr Use Onl
TANK TRUCK	XX	WASTE SOLVENT FLAMMABLE LIQUID, N.O.S.	UN 1993			~~4500~~ 3000 gal		

SPECIAL HANDLING INSTRUCTIONS

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERE
Yes ☐ No ☐

REMIT C.O.D. TO:
ADDRESS

COD Amt: $

C.O.D. FEE:
PREPAID ☐
COLLECT ☐ $

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding.
$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."
_____ Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges
_____ (Signature of Consignor)

TOTAL CHARGES: $

FREIGHT CHARGES
FREIGHT PREPAID except when box at right is checked ☐ Check box if charg are to colle

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

X _____ 9-28-83
GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

Joe Weber 9-28-83
TRANSPORTER #1 SIGNATURE & DATE TRANSPORTER #2 SIGNATURE & DATE (If required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

[signature] 9/28/83
TSDF SIGNATURE DATE

3

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

004680

COMPLETED BY GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0527821 (1–7)

Authorization Number ____ (8–13)

Batavia cCoatings Division
Whittaker Corporation (Company Name) | 1500 Lathem (Address) | 312-879-8600 (Phone Number) | 0890100005 (14 Generator Number) G (24)

Batavia (City) | Illinois (State) | 60510 (Zip) | ILD 095309647 (EPA Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) | 201 West 155th St. (Hauler Address) | S.W.H. Registration Number 0079 001 (25–31)

South Holland, IL 312-596-3-77 (Phone Number) | ILD 069506160 (EPA Number)

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number (32–38)

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Serv. (Facility Name) | 420 South Colfax (Address) | 91808902 (39 Site Number 46)

Griffith (City) | Indiana (State) | 46319 (Zip) | 312-768-3400 (Phone Number) | ILD 016360265 (EPA Number)

(Alternate (Facility Name)) | (Address) | (39 Site Number 46)

(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Solvents | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION	HAZARD CLASS	UN or NA Number	EPA HW Number
Waste Solvents	Flammable	UN 1993	F005

WEIGHT FOR D O T. USE ____ LBS / TONS (circle one) — WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 003000 (47–52) — 1 GALLONS (Circle One) / CU. YDS. (53)

METHOD OF SHIPMENT (Circle One) (DRUMS ____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) ____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION X ____ (Authorized Signature) DATE: 9-28-83

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED

(1) Joe Weber (Authorized Signature) DATE 09/28/83 (54–59)

(2) ____ (Authorized Signature) DATE ____/____/____

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

____ (Authorized Signature) DATE 9 28 83 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: ____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS 217 / 782-3637 — OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

TO 210 ET-50 GRM 9-28-83

004661

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0527822

Authorization Number Out of State

Batavia Coatings Division
Whittaker Corporation (Company Name) | 1500 Lathem (Address) | 312-879-6800 (Phone Number) | 0890100005 (Generator Number)

Batavia (City) | Illinois (State) | 60510 (Zip) | ILD 095309647 (EPA Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) | 201 West 155th Street (Hauler Address) | S.W.H. Registration Number 0079/011

South Holland, IL | 312-596-3377 (Phone Number) | ILD 069506160 (EPA Number)

Hauler Name | Hauler Address | S.W.H. Registration Number

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Serv. (Facility Name) | 420 South Colfax (Address) | 91808902 (Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip) | 312-768-3400 (Phone Number) | ILD 016360265 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Solvents WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Waste Solvent

HAZARD CLASS: Flammable

UN 1993 (UN or NA Number) | F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE 40,000 LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED 004200 (47–52) 1 GALLONS (Circle One) 2 CU. YDS. 0 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS ____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE: 10-18-83

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) DATE 10/18/83 (54–59)

(2) ____ (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ____

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

[signature] (Authorized Signature) DATE: 10/18/83 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

TO 211 FT-50 GRM 10.18.83

004682

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0527823

Authorization Number

Batavia Coatings Division
Whittaker Corporation (Company Name) | 1500 Lathem (Address) | 312-879-6800 (Phone Number) | 0890100005 (Generator Number) G

Batavia (City) | Illinois (State) | 60510 (Zip) | ILD 095309647 (EPA Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) | 201 West 155th St. (Hauler Address) | S.W.H. Registration Number 0079 019

South Holland, Ill | 312-596-3377 (Phone Number) | ILD 069506160 (EPA Number)

Hauler Name | Hauler Address | S.W.H. Registration Number

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | 420 Colfax South (Address) | 91808902 (Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip) | 312-768-3400 (Phone Number) | IND 016360265 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Solvents WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Waste Solvent HAZARD CLASS: Flammable

UN 1993 (UN or NA Number) F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 004500 (47–52) 1 GALLONS (Circle One) 2 CU. YDS. 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS _____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE 11-7-83

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) DATE 11/07/83 (54–59)

(2) _____ (Authorized Signature) DATE / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

[signature] (Authorized Signature) DATE 11/07/83 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS 217 / 782-3637 OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV # 3

SITE COPY - PART 3

To 211 E T-50 GRM 11.7.83

004663

OMPLETED BY
E GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0527824
OUT OF STATE
Authorization Number 000000 (8–13)

BATAVIA COATINGS DIV.
WHITTAKER CORPORATION (Company Name) | 1500 LATHEM (Address) | 312-879-6800 (Phone Number) | 0890100005 (14–24 Generator Number)
BATAVIA (City) | ILLINOIS (State) | 60510 (Zip) | ILD 095309647 (EPA Number)

WASTE HAULER(S)

MR. FRANK INC. (Hauler Name) | 201 W. 155TH. ST. (Hauler Address) | S.W.H. Registration Number 0079025 (25–31)
S. HOLLAND, ILL. | 312-596-3377 (Phone Number) | ILD 069506160 (EPA Number)

Hauler Name | Hauler Address | S.W.H. Registration Number (32–38)
Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERV. (Facility Name) | 420 S. COLFAX (Address) | 91808902 (39–46 Site Number)
GRIFFITH, IND. (City) | INDIANA (State) | 46319 (Zip) | 312-768-3400 (Phone Number) | ILD 016360265 (EPA Number)

Alternate (Facility Name) | Address | 39 Site Number 46
City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW.

SHIPPING DESCRIPTION	HAZARD CLASS	UN or NA Number	EPA HW Number
WASTE SOLVENT	FLAMMABLE	UN 1993	F005

WEIGHT FOR D.O.T. USE: 30,000 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 003000 (47–52) (1 GALLONS (Circle One) / 2 CU. YDS.) 1 (53)

METHOD OF SHIPMENT (Circle One): (DRUMS_____ Number) (TANK TRUCK) OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION M. Rolo (Authorized Signature) DATE 11-9-83

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) Mike Ruffin (Authorized Signature) DATE 11 09 83 (54–59)

(2) _____ (Authorized Signature) DATE ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

(Authorized Signature) DATE 11/9/83 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS _____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS 217 / 782-3637 OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV # 3

SITE COPY - PART 3

To 210 K T-50 6PM 11.9.83

004665

HAZARDOUS WASTE MANIFEST

ORIGINAL – NOT NEGOTIABLE

05
MANIFEST DOCUMENT NUMBER

ILD 095309647
SHIPPER NUMBER

MR. FRANK
NAME OF CARRIER (SCAC)

ILD 069506160
CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	ILD 095309647	BATAVIA COATINGS DIV. 1500 LATHEM ST., BATAVIA, IL. 312-879-6800	
TRANSPORTER # 1	ILD 069506160	MR. FRANK INC. 201 W.155TH. ST., SO.HOLLAND, IL. 312-596-3377	
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND 016360265	AMERICAN CHEMICALS SERVICE I A T E 420 S. COLFAX, GRIFFITH, IND. 312-768-3400	11/9/83

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGE (For Carri Use Only
TANK TRUCK	XX	WASTE SOLVENT FLAMMABLE LIQUID, N.O.S.	UN1993			3,000		

SPECIAL HANDLING INSTRUCTIONS

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED
Yes ☐ No ☐

REMIT C.O.D. TO:
ADDRESS

COD Amt: $

C.O.D. FEE:
PREPAID ☐
COLLECT ☐ $

TOTAL CHARGES: $

FREIGHT CHARGES
FREIGHT PREPAID except when box at right is checked
Check box if charg are to t corre

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding.
$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."
_____ Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement.
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.
_____ (Signature of Consignor)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

TSDF SIGNATURE DATE 11/15/83

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

004664

BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0527825

Authorization Number Out of State

Batavia Coatings Division | Whittaker Corporation (Company Name) | 1500 Lathem (Address) | 312-879-6800 (Phone Number) | 0890100005 (Generator Number)

Batavia (City) | Illinois (State) | 60510 (Zip) | ILD 095309647 (EPA Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) | 201 West 155th St. (Hauler Address) | S.W.H. Registration Number 0079 014

South Holland, Il. 312-596-3377 (Phone Number) | ILD 069506160 (EPA Number)

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Serv (Facility Name) | 420 South Colfax (Address) | 91808902 (Site Number)

Griffth (City) | Indiana (State) | 46319 (Zip) | 312-768-3400 (Phone Number) | ILD 016360265 (EPA Number)

(Alternate (Facility Name)) | (Address) | (Site Number)

(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Solvents | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION	HAZARD CLASS	UN or NA Number	EPA HW Number
Waste Solvent	Flammable	UN 1993	F 005

WEIGHT FOR D.D.T USE _____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS OR GAL.

QUANTITY OF WASTE DELIVERED 004500 (1 GALLONS (Circle One) / 2 CU. YDS) 1

METHOD OF SHIPMENT (Circle One) (DRUMS_____ Number) TANK TRUCK DPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION X _____ (Authorized Signature) DATE 12-8-83

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) _____ (Authorized Signature) DATE 12/08/83

(2) _____ (Authorized Signature) DATE ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

_____ (Authorized Signature) DATE 12/08/83

COMMENTS OR SPECIAL INSTRUCTIONS _____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS 217 / 782-3637 | OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

To 125 FT-63 GRM 12.8.83

004667

HAZARDOUS WASTE MANIFEST

ORIGINAL – NOT NEGOTIABLE

05
MANIFEST DOCUMENT NUMBER
ILD 095309647

MR. FRANK
NAME OF CARRIER (SCAC)

SHIPPER NUMBER
ILD 069506160
CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPP OR RECEIV
GENERATOR/ SHIPPER	ILD 095309647	BATAVIA COATINGS & CHEMICALS DIV. 1500 LATHEM ST., BATAVIA,IL. 60510 312/879-6800	
TRANSPORTER # 1	ILD 069506160	MR. FRANK INC. 201 W. 155th ST., SO. HOLLAND, IL 312/596-3377	
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DIS– POSAL FACILITY			
TSDF TREATMENT STORAGE OR DIS– POSAL FACILITY	IND 016360265	AMERICAN CHEMICALS SERVICE 420 S. COLFAX, GRIFFITH, IND. 312/768-3400	12/20/

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGI (For Carr Use Onl
TANK TRUCK	XX	WASTE SOLVENT FLAMMABLE LIQUID, N.O.S.	UN1993					

SPECIAL HANDLING INSTRUCTIONS

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERE
Yes ☐ No ☐

REMIT
C.O.D. TO:
ADDRESS

COD Amt: $

C.O.D. FEE:
PREPAID ☐
COLLECT ☐ $

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding.
$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

_____ Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement.
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

_____ (Signature of Consignor)

TOTAL CHARGES $

FREIGHT CHARGES
FREIGHT PREPAID except when box at right is checked ☐
Check box if charg are to coll

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

TSDF SIGNATURE DATE

5

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

004666

HAZARDOUS WASTE MANIFEST

ORIGINAL – NOT NEGOTIABLE

05
MANIFEST DOCUMENT NUMBER

ILD 095309647
SHIPPER NUMBER

MR. FRANK
NAME OF CARRIER (SCAC)

ILD 069506160
CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	ILD 095309647	BATAVIA COATINGS & CHEMICALS DIV. 1500 LATHEM ST., BATAVIA, IL 60510 312/879-6800	
TRANSPORTER # 1	ILD 069506160	MR. FRANK INC. 201 W. 155TH ST. , SO. HOLLAND, IL 312/596-3377	
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND 016360265	AMERICAN CHEMICALS SERVICE 420 S. COLFAX, GRIFFITH, IN 312/768-3400	7/18

DEFENDANT

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGE (For Carri Use Only
TANK TRUCK	XX	WASTE SOLVENT FLAMMABLE LIQUID, N.O.S.	UN1993					

SPECIAL HANDLING INSTRUCTIONS

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED
Yes ☐ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

TOTAL CHARGES: $

FREIGHT CHARGES
FREIGHT PREPAID except when box at right is checked ☐ Check box if charges are to be collected

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding.
$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."
_____ Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement.
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.
_____ (Signature of Consignor)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

7/18/83

TSDF SIGNATURE DATE

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

004614

IL 532-610
LPC 62 8/81

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

TO BE COMPLETED BY WASTE GENERATOR

0825777
Authorization Number Out of St.

Batavia Coatings Division | Whittaker Corporation (Company Name) | 1500 Lathen (Address) | 322-879-6800 (Phone Number) | 0890100005 (Generator Number)
Batavia, Illinois (City) | Illinois (State) | 60510 (Zip) | ILD 095309647 (EPA Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) | 201 West 155th. St. (Hauler Address) | S.W.H. Registration Number 0079 /019
South Holland, Ill. | 312-596-3377 (Phone Number) | ILD 069506160 (EPA Number)

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number
(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | 420 South Colfax (Address) | 91808902 (Site Number)
Griffith (City) | Indiana (State) | 46319 (Zip) | 312-768-3400 (Phone Number) | ILD 016360265 (EPA Number)

(Alternate (Facility Name)) | (Address) | (Site Number)
(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Solvents | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
Waste Solvent	Flammable	UN 1993	F 005

WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED 004500 (1 GALLONS (Circle One) / 2 CU. YDS.) 1

METHOD OF SHIPMENT (Circle One) (DRUMS_____ Number) (TANK TRUCK) OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION _____ (Authorized Signature) DATE 1/18/84

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) _____ (Authorized Signature) DATE 01/24/84

(2) _____ (Authorized Signature) DATE ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

_____ (Authorized Signature) DATE 01/26/84

COMMENTS OR SPECIAL INSTRUCTIONS _____

IN ILLINOIS 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV # 4

SITE COPY-PART 3

To 206 E T-50 6RM 1.1884

UJ7663

IL 532-610
LPC 62 8/81

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0825778 (1–7)

Authorization Number ____ (8–13)

Batavia Coatings Division | Whittaker Corporation (Company Name) | 1500 Lathem (Address) | 312-879-6800 (Phone Number) | 0890100005 (14, Generator Number) G (24)

Batavia, (City) | Illinois (State) | 60510 (Zip) | ild 095309647 (EPA Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) | 201 West 155th Street (Hauler Address) | S.W.H. Registration Number 0079/011 (25–31)

South Holland, Ill. 312-596-3377 (Phone Number) | ILD 069506160 (EPA Number)

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number (32–38)

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Serv. 420 South Colfax (Facility Name, Address) | 91808902 (39 Site Number 46)

Griffth (City) | Indiana (State) | 46319 (Zip) | 312-768-3400 (Phone Number) | ILD 016360265 (EPA Number)

(Alternate Facility Name) | (Address) | (39 Site Number 46)

(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Solvents | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW.

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
Waste Solvent	Flammable	un 1993	F005

WEIGHT FOR D.O.T. USE 55,000 (LBS) TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 047200 (47–52) (GALLONS) (Circle One) 2 CU. YDS. (53)

METHOD OF SHIPMENT (Circle One) (DRUMS ____ Number) | (TANK TRUCK) | OPEN TRUCK | OTHER (Specify) ____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION ____ (Authorized Signature) DATE: 2-16-84

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) ____ (Authorized Signature) DATE: 2/10/84 (54–59)

(2) ____ (Authorized Signature) DATE: ____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

____ (Authorized Signature) DATE: 2/10/84 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: ____

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV # 4

SITE COPY–PART 3

To 210 RT-50 GRM 2.10.84

097664

IL 532-610
LPC 62 8/81

STATE OF ILLINOIS

TO BE COMPLETED BY WASTE GENERATOR

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

Authorization Number 082577 OUT of STATE

BATAVIA COATINGS DIVISION
WHITTAKER CORPORATION (Company Name) | 1500 LATHEM ST. (Address) | 312-879-6800 (Phone Number) | 0890100005 (Generator Number)

BATAVIA (City) | ILLINOIS (State) | 60510 (Zip) | ILD 095309647 (EPA Number)

WASTE HAULER(S)

MR. FRANK, INC. (Hauler Name) | 201 WEST 155TH ST. (Hauler Address) | S.W.H. Registration Number 0079011

SOUTH HOLLAND, IL. | 312-596-3377 (Phone Number) | ILD 069506160 (EPA Number)

Hauler Name | Hauler Address | S.W.H. Registration Number

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERIVCE (Facility Name) | 420 SOUTH COLFAX (Address) | 91808902 (Site Number)

GRIFFTH (City) | INDIANA (State) | 46319 (Zip) | 312-768-3400 (Phone Number) | ILD 016360265 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
WASTE SOLVENT	FLAMMABLE	UN 1993	F 005

WEIGHT FOR D.O.T USE 37,800 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 004200 (1 GALLONS (Circle One) 2 CU. YDS) 1

METHOD OF SHIPMENT (Circle One) (DRUMS_____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION X [signature] (Authorized Signature) DATE: 2-21-84

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) DATE: 02/21/84

(2) _____ (Authorized Signature) DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[signature] (Authorized Signature) DATE: 2/21/84

COMMENTS OR SPECIAL INSTRUCTIONS _____

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-26

DISTRIBUTION PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV. # 4

SITE COPY–PART 3

TO 210 F T-50 6RM 2.21.84

007665

IL 532-610
LPC 62 8/81

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

082578

Authorization Number OUT OF STATE

BATAVIA COATINGS DIVISION
WHITTAKER CORPORATION (Company Name) | 1500 LATHEM (Address) | 312-879-6800 (Phone Number) | 0890100005 (Generator Number)
BATAVIA (City) | ILLINOIS (State) | 60510 (Zip) | ILD 095309647 (EPA Number)

WASTE HAULER(S)

MR. FRANK, INC. (Hauler Name) | 201 WEST 155TH.ST. (Hauler Address) | S.W.H. Registration Number 0079 01
312-596-3377 (Phone Number) | ILD 069506160 (EPA Number)
(Hauler Name) | (Hauler Address) | S.W.H. Registration Number
(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERV. (Facility Name) | 420 S. COLFAX (Address) | 91808902 (Site Number)
GRIFFITH (City) | INDIANA (State) | (Zip) | 312-768-3400 (Phone Number) | ILD 016360285 (EPA Number)
(Alternate (Facility Name)) | (Address) | (Site Number)
(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: WASTE SOLVENT
HAZARD CLASS: FLAMMABLE
UN 1993 (UN or NA Number) | F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE 37800 LBS / TONS (circle one)
WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.
QUANTITY OF WASTE DELIVERED: 004200 (47–52) 1 GALLONS (Circle One) 2 CU. YDS. 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS ____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) ____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE 3-13-84

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) DATE 03/13/84 (54–59)
(2) ____ (Authorized Signature) DATE / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

[signature] (Authorized Signature) DATE 3/13/84 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS ____

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV. # 4

SITE COPY–PART 3 To 125 ET-63 GROY 3-13-84

007666

IL 532-610
LPC 62 8/81

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0825781

Authorization Number

BATAVIA COATINGS DIV.
WHITTAKER CORPORATION (Company Name) | 1500 LATHEM STREET (Address) | 312-879-6800 (Phone Number) | 0890100005 (Generator Number) | G

BATAVIA (City) | ILLINOIS (State) | 60510 (Zip) | ILD 095309647 (EPA Number)

WASTE HAULER(S)

MR. FRANK, INC. (Hauler Name) | 201 WEST 15 TH. STREET (Hauler Address) | S.W.H. Registration Number 0079 / 0 / 9

312-596-3377 (Phone Number) | ILD 069506160 (EPA Number)

Hauler Name | Hauler Address | S.W.H. Registration Number

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | 420 SOUTH COLFAX (Address) | 91808902 (Site Number)

GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | 312-768-3400 (Phone Number) | ILD 016360265 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Solvent | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: WASTE SOLVENT | HAZARD CLASS: FLAMMABLE | UN 1993 (UN or NA Number) | F005 (EPA HW Number)

WEIGHT FOR D.D.T. USE 42000 LBS TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 0 0 4 0 0 0 | 1 GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) (DRUMS ____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE 3-20-84

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) DATE: 03/20/84

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ____

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

[signature] (Authorized Signature) DATE 3/20/84

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-26

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV # 4

SITE COPY–PART 3

T0211K T-50 GRM 3-20-84

007661

IL 532-610
LPC 62 8/81

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0825782
11 7

Authorization Number OUT OF STATE
8 13

Batavia Coatings Division
Whittaker Corporation (Company Name) | 1500 Lathem (Address) | 312-879-6800 (Phone Number) | 0390100005 (Generator Number) G
14 24

Batavia, (City) | Illinois (State) | 60510 (Zip) | ILD 095309647 (EPA Number)

WASTE HAULER(S)

Mr.-Frank Inc. (Hauler Name) | 201 West 155th St. (Hauler Address) | S.W.H. Registration Number 0079 001
25 31

South Holland, Il. | 312-596-3377 (Phone Number) | ILD 069506160 (EPA Number)

Hauler Name | Hauler Address | S.W.H. Registration Number
32 38

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Serv (Facility Name) | 420 South Colfax (Address) | 91808902 (Site Number)
39 46

Griffth (City) | Indiana (State) | 46319 (Zip) | 312-768-3400 (Phone Number) | ILD 016360265 (EPA Number)

Alternate (Facility Name) | Address | Site Number
39 46

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Solvents WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Waste Solvent
HAZARD CLASS: Flammable
UN 1993 (UN or NA Number) | F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)
WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.
QUANTITY OF WASTE DELIVERED: 003,000 (47 52) 1 GALLONS (Circle One) 2 CU. YDS. 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS _____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE: 4-5-84

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) DATE: 04 05 84 (54 59)

(2) _____ (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

[signature] (Authorized Signature) DATE: 04 05 84 (60 65)

COMMENTS OR SPECIAL INSTRUCTIONS _____

IN ILLINOIS 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV # 4

SITE COPY–PART 3

TO 211RT-50 GRM 4-5-84 UJ1010

IL 532-610
LPC 62 8/81

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0825783 (1–7)

Authorization Number (8–13)

TO BE COMPLETED BY WASTE GENERATOR

Batavia Coatings Division
Whittaker Corporation (Company Name) | 1500 Lathem St. (Address) | 312-879-6800 (Phone Number) | 0890100005 (14, Generator Number) G (24)

Batavia, (City) | Illinois (State) | 60510 (Zip) | ILD 095309647 (EPA Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) | 201 West 155th St. (Hauler Address) | S.W.H. Registration Number 0079 004 (25–31)

S. Holland, Il. (Hauler Address) | 312-596-3377 (Phone Number) | ILD 069506160 (EPA Number)

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number (32–38)

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | 420 South Colfax (Address) | 91808902 (39, Site Number 46)

Griffith, (City) | Indiana (State) | 46319 (Zip) | 312-768-3400 (Phone Number) | ILD 016360265 (EPA Number)

(Alternate (Facility Name)) | (Address) | (39, Site Number 46)

(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Solvents | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION	HAZARD CLASS:	UN or NA Number	EPA HW Number
Waste Solvent	Flammable	UN 1993	F 005

WEIGHT FOR D.O.T. USE _____ (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 02000 (47–52) 1 GALLONS (Circle One) 2 CU YDS. (53)

METHOD OF SHIPMENT (Circle One) (DRUMS_____ Number) (TANK TRUCK) OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION _____ (Authorized Signature) DATE: 4-4-84

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) _____ (Authorized Signature) DATE: 04/04/84 (54–59)

(2) _____ (Authorized Signature) DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) DATE: 4/10/84 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS _____

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV. # 4

SITE COPY–PART 3

TO204FT-50 GPM 4.10.84

037007

IL 532-610
LPC 62 8/81

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0825784
1 7

Authorization Number ____ 8 13

TO BE COMPLETED BY WASTE GENERATOR

Batavia Coatings Division
Whittaker Corporation (Company Name) | 1500 Lathem (Address) | 312-879-6800 (Phone Number) | 0890100005 (14 Generator Number) G 24

Batavia (City) | Illinois (State) | 60510 (Zip) | ILD 095309647 (EPA Number)

WASTE HAULER(S)

Mr.-Frank, Inc. (Hauler Name) | 201 West 155th St. (Hauler Address) | S.W.H. Registration Number 0079/018 (25 31)

South Holland, Il. | 312-596-3377 (Phone Number) | ILD 069506160 (EPA Number)

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number (32 38)

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Serv. (Facility Name) | 420 South Colfax (Address) | 91808902 (39 Site Number 46)

Griffith (City) | Indiana (State) | 46319 (Zip) | 312-768-3400 (Phone Number) | ILD 016360265 (EPA Number)

(Alternate (Facility Name)) | (Address) | (39 Site Number 46)

(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Solvents | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
Waste Solvent	Flammable	UN 1993	F 005

WEIGHT FOR D.O.T USE: 16000 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 002250 (47 52) 1 (GALLONS) (Circle One) 2 CU YDS. 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS ____ Number) (TANK TRUCK) OPEN TRUCK OTHER (Specify) ____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION ____ (Authorized Signature) DATE: 4.12.84

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) ____ (Authorized Signature) DATE: 04/12/84 (54 59)

(2) ____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ____

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

____ (Authorized Signature) DATE: 4/12/84 (60 65)

COMMENTS OR SPECIAL INSTRUCTIONS: ____

IN ILLINOIS 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV. # 4

SITE COPY–PART 3 To 211 RT - 50 GAL 4.13.84

00766

IL 532-610
LPC 62 8/81

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

TO BE COMPLETED BY WASTE GENERATOR

0825785
Authorization Number: out of state

Batavia Coatings Division
Whittaker corporation (Company Name) | 1500 Lathem (Address) | 312-879-6800 (Phone Number) | 0890100005 (Generator Number)

Batavia, (City) | Illinois (State) | 60510 (Zip) | ILD 095309647 (EPA Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) | 201 West 155th Street (Hauler Address) | S.W.H. Registration Number 0079011

S. Holland, Il. | 312-596-3377 (Phone Number) | ILD 069506160 (EPA Number)

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Serv. (Facility Name) | 420 S. Colfax (Address) | 91808902 (Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip) | 312-768-3400 (Phone Number) | ILD 016360265 (EPA Number)

(Alternate (Facility Name)) | (Address) | (Site Number)

(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Solvents | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
Waste Solvent	Flammable	UN 1993	F 005

WEIGHT FOR D.D.T. USE 35,000 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 004200 (1) GALLONS (Circle One) (2) CU. YDS 1

METHOD OF SHIPMENT (Circle One) (DRUMS____ Number) (TANK TRUCK) OPEN TRUCK OTHER (Specify) ____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE: 5-8-84

WASTE HAULER:

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) DATE: 05 08 84

(2) ____ (Authorized Signature) DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY:

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO____

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[signature] (Authorized Signature) DATE: 5/8/84

COMMENTS OR SPECIAL INSTRUCTIONS: ____

IN ILLINOIS 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2

DISTRIBUTION PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV. # 8

SITE COPY–PART 3

212 ET-50

UJ7611

IL 532-610
LPC 62 8/81

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0825786

Authorization Number

TO BE COMPLETED BY WASTE GENERATOR

BATAVIA COATINGS DIVISION
WHITTAKER CORPORATION (Company Name) | 1500 LATHEM ST. (Address) | 312-879-6800 (Phone Number) | 0890100005 (Generator Number)
BATAVIA (City) | ILLINOIS (State) | 60510 (Zip) | ILD 095309647 (EPA Number)

WASTE HAULER(S)

MR. FRANK, INC. (Hauler Name) | 201 WEST 155TH STREET (Hauler Address) | S.W.H. Registration Number 0079 Toll
S.HOLLAND, ILLINOIS | 312-596-3377 (Phone Number) | ILD 069506160 (EPA Number)

Hauler Name | Hauler Address | S.W.H. Registration Number
Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | 420 SOUTH COLFAX (Address) | 91808902 (Site Number)
GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | 312-768-3400 (Phone Number) | ILD 016360265 (EPA Number)

Alternate (Facility Name) | Address | Site Number
City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION	HAZARD CLASS:	UN or NA Number	EPA HW Number
WASTE SOLVENT	FLAMMABLE	UN 1993	F005

WEIGHT FOR D.O.T. USE: 3 2000 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 003800 (1 GALLONS (Circle One) 2 CU. YDS.)

METHOD OF SHIPMENT (Circle One): (DRUMS Number) | TANK TRUCK | OPEN TRUCK | OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION (Authorized Signature) DATE: 5-15-84

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) (Authorized Signature) DATE: 05/15/84

(2) (Authorized Signature) DATE:

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 5/15/84

COMMENTS OR SPECIAL INSTRUCTIONS:

ILLINOIS 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-267

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

SITE COPY–PART 3

210F T-50

007612

IL 532-610
LPC 62 8/81

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0825787

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number

Batavia Coatings Division
Whittaker Corporation (Company Name) | 1500 Lathem St. (Address) | 312-879-6800 (Phone Number) | 0890100005 (Generator Number)

Batavia, (City) | Illinois (State) | 60510 (Zip) | ILD 095309647 (EPA Number)

WASTE HAULER(S)

Mr.-Frank, Inc. (Hauler Name) | 201 West 155th St. (Hauler Address) | S.W.H. Registration Number 0079 018

S. Holland, Il. | 312-596-3377 (Phone Number) | ILD 069506160 (EPA Number)

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service, (Facility Name) | 420 South Colfax (Address) | 91808902 (Site Number)

Griffith, (City) | Indiana (State) | 46319 (Zip) | 312-768-3400 (Phone Number) | ILD 016360265 (EPA Number)

(Alternate (Facility Name)) | (Address) | (Site Number)

(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Solvents WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
Waste Solvent	Flammable	UN 1993	F005

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED 1 1 2 0 0 0 (1 GALLONS (Circle One) 2 CU. YDS.) 1

METHOD OF SHIPMENT (Circle One) (DRUMS_____ Number) (TANK TRUCK) OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINDIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION _____ (Authorized Signature) DATE: 5-22-84

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) _____ (Authorized Signature) DATE 05 22 84

(2) _____ (Authorized Signature) DATE ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO_____

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

_____ (Authorized Signature) DATE: 05/22/84

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS, 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-25.

DISTRIBUTION PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV. # 4

SITE COPY-PART 3

210F T-50

037613

IL 532-610
LPC 62 8/81

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0825788
7

OUT OF STATE
Authorization Number 8 13

(Company Name)	Address	Phone Number	Generator Number
Batavia Coatings Division Whittaker Corporation	1500 Lathem	312-879-6800	0890100005

City	State	Zip	EPA Number
Batavia,	Illinois	60510	ILD 095309647

WASTE HAULER(S)

Hauler Name	Hauler Address	S.W.H. Registration Number	Phone Number	EPA Number
Mr. Frank, Inc.	201 West 155th Street South Holland, Il.	0079 019	312-596-3377	ILD 069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

(Facility Name)	Address	Site Number	City	State	Zip	Phone Number	EPA Number
American Chemical Serv	420 South Colfax	91808902	Griffith,	Indiana	46319	312-768-3400	ILD 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Solvents WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
Waste Solvent	Flammable	UN 1993	F005

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 004000 (47–52) 1 GALLONS (Circle One) 2 CU. YDS. 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS _____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE: 6/14/84

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Mike Martin (Authorized Signature) DATE: 06/14/84 (54–59)

(2) _____ (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[signature] (Authorized Signature) DATE 6/14/84 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS _____

IN ILLINOIS, 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS, 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV # 4

SITE COPY–PART 3 212 K T-50

007674

IL 532-610
LPC 62 8/81

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0825789
1 7

Authorization Number OUT OF STATE
8 13

TO BE COMPLETED BY WASTE GENERATOR

B Batavia Coatings Division
Whittaker Corporation | 1500 Lathem (Address) | 312-879-6800 (Phone Number) | 0890100085 (14, Generator Number) | G (24)

Batavia (City) | Illinois (State) | 60510 (Zip) | ILD 095309647 (EPA Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) | 201 West 155th st. (Hauler Address) | S.W.H. Registration Number 0079/019 (25, 31)

South Holland, Il. | 312-596-3377 (Phone Number) | ILD 069506160 (EPA Number)

Hauler Name | Hauler Address | S.W.H. Registration Number (32, 38)

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Serv (Facility Name) | 420 South Colfax (Address) | 91808902 (39, Site Number, 46)

Griffth (City) | Indiana (State) | Zip | 312-768-3400 (Phone Number) | ILD 016360265 (EPA Number)

Alternate (Facility Name) | Address | 39 Site Number 46

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Solvents | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
Waste Solvent	Flammable	IN 1993	F005

WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 004000 (47, 52) (1 GALLONS (Circle One) / 2 CU. YDS.) (53)

METHOD OF SHIPMENT (Circle One) (DRUMS _____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION _____ (Authorized Signature) DATE: 07/10/84

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) _____ (Authorized Signature) DATE: 07 10 84 (54, 59)

(2) _____ (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO _____

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) DATE: 7/10/84 (60, 65)

COMMENTS OR SPECIAL INSTRUCTIONS _____

IN ILLINOIS 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV. # 4

SITE COPY–PART 3

124 K T-63

UJ7615

BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0825790 (1–7)
Authorization Number 000000 (8–13)

BATAVIA COATINGS DIVISION
WHITTAKER CORPORATION (Company Name) | 1500 LATHEM (Address) | 312-879-6800 (Phone Number) | 0890100005 (14 Generator Number) G (24)
BATAVIA (City) | ILLINOIS (State) | 60510 (Zip) | ILD 095309647 (EPA Number)

WASTE HAULER(S)

MR. FRANK, INC. (Hauler Name) | 201 WEST 155TH ST. (Hauler Address) | S.W.H. Registration Number 0079011 (25–31)
S. HOLLAND, IL. | 312-596-3377 (Phone Number) | ILD 069506160 (EPA Number)

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number (32–38)
(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | 420 S. COLFAX (Address) | 91808902 (39 Site Number 46)
GRIFFITH, (City) | INDIANA (State) | 46319 (Zip) | 312-768-3400 (Phone Number) | IND 016360265 (EPA Number)

(Alternate (Facility Name)) | (Address) | (39 Site Number 46)
(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION	HAZARD CLASS:	UN or NA Number	EPA HW Number
WASTE SOLVENT	FLAMMABLE	UN 1993	F 005

WEIGHT FOR D.O.T. USE ____ LBS / TONS (circle one)
WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.
QUANTITY OF WASTE DELIVERED: 004200 (47–52) (1 GALLONS (Circle One) / 2 CU. YDS.) (53)

METHOD OF SHIPMENT (Circle One) (DRUMS ____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) ____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION ____ (Authorized Signature) DATE 8-21-84

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) D W Boarla (Authorized Signature) DATE 08/21/84 (54–59)

(2) ____ (Authorized Signature) DATE ____/____/____

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

(Authorized Signature) DATE 8/21/84 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: ____

IN ILLINOIS 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV # 4

SITE COPY–PART 3

117K T-63

007615

IL 532-610
LPC 62 8/81

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0825792

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number

Batavia Coatings Division Whittaker Corporation (Company Name)	1500 Lathem St. (Address)	312-879-6800 (Phone Number)	0890130005 ~~0890100005~~ (Generator Number)
Batavia, (City)	Illinois (State) 60510 (Zip)		ILD 095309647 (EPA Number)

WASTE HAULER(S)

Mr. Frank Inc. (Hauler Name)	201 W. 155th St. (Hauler Address)		S.W.H. Registration Number 0079 019
	S. Holland, IL	312-596-3377 (Phone Number)	ILD 069506160 (EPA Number)
(Hauler Name)	(Hauler Address)	(Phone Number)	S.W.H. Registration Number (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Serv. (Facility Name)	420 South Colfax (Address)		91808902 (Site Number)
Griffith, (City)	Indiana (State) 46319 (Zip)	(Phone Number)	ILD 016360265 (EPA Number)
(Alternate (Facility Name))	(Address)		(Site Number)
(City)	(State) (Zip)	(Phone Number)	(EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Solvents WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN 1993 (UN or NA Number)	F 005 (EPA HW Number)
Waste Solvent	Flammable		

WEIGHT FOR D.O.T. USE 55000 LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 004520 (47–52) 1 GALLONS (Circle One) 2 CU. YDS. 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS_____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION _____ (Authorized Signature) DATE: 9-19-84

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) _____ (Authorized Signature) DATE: 09/19/84 (54–59)

(2) _____ (Authorized Signature) DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO____

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) DATE: 9/19/84 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-267

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV. # 4

SITE COPY–PART 3

211KT-50

9800 BTU
2 Y.Cl.

UJ7611

STATE OF ILLINOIS — ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0610

LPC 62 8/81

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) **EPA Form 8700-22 (3-84)** Form Approved. OMB No. 2000-0404. Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I L D 0 9 5 3 0 9 6 4 7 — Manifest Document No. — 2. Page 1 of 1 — Information in the shaded areas is not required by Federal law, but is required by Illinois law.

3. Generator's Name and Mailing Address
Batavia Coatings Division/Whittaker Corporation
1500 Lathem Street, Batavia, Illinois 60510

A. Illinois Manifest Document Number: IL 1118901

4. Generator's Phone (312) 879-6800

B. Illinois Generator's: 0 8 9 0 1 9 0 0 5

5. Transporter 1 Company Name: Mr. Frank, Inc.

6. US EPA ID Number: I L D 0 6 9 5 0 6 1 6 0

C. Illinois Tranporter's ID

D. (312) 596-3377 Transporter's Phone

7. Transporter 2 Company Name

8. US EPA ID Number

E. Illinois Transporter's ID: 0 0 7 9

F. ( ) Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Service
420 South Colfax
Griffith, Indiana 46319

10. US EPA ID Number: I N D 0 1 6 3 6 0 2 6 5

G. Illinois Facility's: 9 1 8 0 8 9 0 0 0 2

H. Facility

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a.	HM X Waste Solvent, Liquid Flammable, UN 1993	0 0 1	T T	0 4 0 0 0	G	D 0 0 1
b.						
c.						
d.						

GENERATOR

EPA HW Number / Authorization Number

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

If waste solvent in item 11 is undeliverable for any reason - return to generator.

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, and Illinois regulations.

Printed/Typed Name	Signature	Date (Month Day Year)
N. B. Ballingall Charles W. Ammerlaan	Charles W. Ammerlaan	10 12 84

17. Transporter Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)
DAVID W. BOGDA	D W Bogda	10 02 84

TRANSPORTER

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name	Signature	Date (Month Day Year)
F DUNEE	F Dunee	10 2 84

IN ILLINOIS: 217 / 782-3637 "24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS" OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV.# 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½ Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

126 R T-63

UJ7616

STATE OF ILLINOIS — ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0610

LPC 62 8/81

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) EPA Form 8700-22 (3-84) Form Approved. OMB No. 2000-0404. Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: ILD095309647 — Manifest Document No.:

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law, but is required by Illinois law.

3. Generator's Name and Mailing Address
Batavia Coatings Division/Whittaker Corporation
1500 Lathem Street, Batavia, Illinois 60510

4. Generator's Phone (312) 879-6800

A. Illinois Manifest Document Number: IL 1118902

B. Illinois Generator's ID: 0890105005

5. Transporter 1 Company Name: Mr. Frank, Inc.

6. US EPA ID Number: ILD069506160

C. Illinois Tranporter's ID:

D. (312) 596-3377 Transporter's Phone

7. Transporter 2 Company Name:

8. US EPA ID Number:

E. Illinois Transporter's ID: 0079

F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Service
420 South Colfax
Griffith, Indiana 46319

10. US EPA ID Number: IND016360265

G. Illinois Facility's ID: 9180890002

H. Facility's Phone: (312) 768-3400

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a.	X	Waste Solvent Liquid Flammable UN 1993	001	TT	04200	1	EPA HW Number: F005 / Authorization Number:
b.							EPA HW Number: / Authorization Number:
c.							EPA HW Number: / Authorization Number:
d.							EPA HW Number: / Authorization Number:

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

If waste solvent in item 11 is undeliverable for any reason - return to generator.

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, and Illinois regulations.

Printed/Typed Name: N. B. Ballingall — Signature: [signature] — Date: Month 11 Day 07 Year

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: MIGUEL GARCIA — Signature: Miguel Garcia — Date: Month 11 Day 07 Year 84

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name: — Signature: — Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: FD UNFEE — Signature: [signature] — Date: Month 11 Day 07 Year 84

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS — OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV.# 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½ Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

125RT-63

007619

E OF ILLINOIS — ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0610

LPC 62 8/81

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) EPA Form 8700-22 (3-84) Form Approved. OMB No. 2000-0404. Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. ILD 095309647 — Manifest Document No.

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law, but is required by Illinois law.

3. Generator's Name and Mailing Address
Batavia Coatings Division/Whittaker Corporation
1500 Lathen Street, Batavia, Illinois 60510

A. Illinois Manifest Document Number IL 1118903

4. Generator's Phone (312) 879-6800

B. Illinois Generator's ID 0 8 9 0 0 1 0 5 0 0 5

5. Transporter 1 Company Name: Mr. Frank, Inc.

6. US EPA ID Number: ILD 069506160

C. Illinois Tranporter's ID

D. (312 596-3377 Transporter's Phone

7. Transporter 2 Company Name

8. US EPA ID Number

E. Illinois Transporter's ID 0 0 7 9

F. ( ) Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Service
420 South Colfax
Griffith, Indiana 46319

10. US EPA ID Number: IND 016360263

G. Illinois Facility's ID 1 9 1 R 0 8 9 0 0 0 2

H. Facility's Phone (312) 768-3400

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a.	HM X Waste Solvent, Liquid Flammable, UN 1993	001	TT	14500	G	EPA HW Number D001 / Authorization Number
b.						EPA HW Number / Authorization Number
c.						EPA HW Number / Authorization Number
d.						EPA HW Number / Authorization Number

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

If waste solvent in item 11 is undeliverable for any reason - return to generator.

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, and Illinois regulations.

Printed/Typed Name	Signature	Date (Month Day Year)
N. B. Ballingall	N Ballingall	1 1 1 3 1

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)
Miguel Garcia	Miguel Garcia	1 1 3 1 8 6

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name	Signature	Date (Month Day Year)
F DUNFEE	F Dunfee	1 1 2 1

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV. # 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½ Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

125 ET-63

007600

STATE OF ILLINOIS ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0610

LPC 62 8/81

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) **EPA Form 8700-22 (3-84)** Form Approved. OMB No. 2000-0404. Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: ILD095309647 — Manifest Document No.: 00000

2. Page 1 of 1

Information in the shaded areas is not required by Federal law, but is required by Illinois law.

3. Generator's Name and Mailing Address
Batavia Coatings Division/Whittaker Corporation
1500 Lathem Street, Batavia, Illinois 60510

4. Generator's Phone (312) 879-3137

A. Illinois Manifest Document Number: IL 1118905

B. Illinois Generator's ID: 0890105005

5. Transporter 1 Company Name: Mr. Frank, Inc.

6. US EPA ID Number: ILD069506160

C. Illinois Tranporter's ID: 0079

D. (312) 596-3377 Transporter's Phone

7. Transporter 2 Company Name:

8. US EPA ID Number:

E. Illinois Transporter's ID: 0079

F. (Arts) Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Service
420 South Colfax
Griffith, Indiana 46319

10. US EPA ID Number: IND016360265

G. Illinois Facility's ID: 9180890002

H. Facility's Phone: 312 768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	X	Waste Solvent Liquid Flammable UN 1993	001	tt	04500	1	EPA HW Number: 7006 Authorization Number: 000000
b.							EPA HW Number: Authorization Number:
c.							EPA HW Number: Authorization Number:
d.							EPA HW Number: Authorization Number:

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

If waste solvent in item 11 is undeliverable for any reason - return to generator.

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, and Illinois regulations.

Printed/Typed Name: N. B. Ballingall — Signature: [signature] — Date: Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: John Van Vlymen — Signature: John Van Vlymen — Date: Month Day Year 12 20 84

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name — Signature — Date: Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: F DUNFEE — Signature: F Dunfee — Date: Month Day Year 12 20 84

GENERATOR

TRANSPORTER

FACILITY

IN ILLINOIS: 217 / 782-3637 "24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS" OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV. # 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½ Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

125 E T-63

007681

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. SM QTY GENERATOR | Manifest Document No. 0000 1
2. Page 1 of | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Wilkinson's Body Shop
3655 Centennial Road Sylvania, OH 43560

A. State Manifest Document Number: INA 0159765
B. State Generator's ID:

4. Generator's Phone (419) 841-2240

5. Transporter 1 Company Name: A & B INDUSTRIAL SERVICES
6. Use EPA ID Number: M I D 0 1 7 1 6 7 2 2 2
C. State Transporter's ID:
D. Transporter's Phone: 616-375-9595

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
420 S. Colfax Ave.
Griffith, IN 46319

10. Use EPA ID Number: I N D 0 1 6 3 6 0 2 6 5
G. State Facility's ID:
H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. RQ WASTE PAINT RELATED MATERIAL (F003) FLAMMABLE LIQUID NA1263	004	DM	00220	G	F003
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR

Printed/Typed Name: X Thomas J. Wilkinson | Signature: X [signature] | Date Month Day Year: 07 01 88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: [illegible] | Signature: [signature] | Date Month Day Year: 07 01 88

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: | Signature: | Date Month Day Year:

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: D Whitaker | Signature: [signature] | Date Month Day Year: 7 13 88

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

INA 0159765

0015064

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: SMLQNTYGENER
Manifest Document No.: 3069N

2. Page 1 of 1

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Wilkinson's Body Shop
3655 Centennial Road, Sylvania, OH 43560

4. Generator's Phone (419) 841-2240

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: ADCOM EXPRESS

6. US EPA ID Number: ILD047267365

C. State Transporter's ID: 0367

D. Transporter's Phone: 708-429-1660

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
420 South Colfax Avenue
Griffith, IN 46319

10. US EPA ID Number: IND0163 60265

G. State Facility's ID

H. Facility's Phone: 219-924-4370

GENERATOR

	11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	RQ WASTE PAINT RELATED MATERIAL (F003 & F005) FLAMMABLE LIQUID NA 1263	X	001	dm	00050	G	F005 F003
b.							
c.							
d.							

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above: G - Gallon

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: [illegible]

Signature: [illegible]

Month Day Year

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: LEN WARBINDY

Signature: [illegible]

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: [illegible]

Signature: [illegible]

Month Day Year: 03 09 90

Style F15 REV-6 LABELMASTER, Div. of AMERICAN LABELMARK CO., CHICAGO, IL 60646

EPA Form 8700-22 (Rev. 9-88) Previous editions are obsolete

126TCT63 3/12

TSDF COPY

0018132

HAZARDOUS WASTE MANIFEST

00100
MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

MR FRANK INC
NAME OF CARRIER (SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND 006390785	WILLIAM TELL WOODCRAFTERS INC P.O. BOX 8 TELL CITY, IND 47586	10-18-8
TRANSPORTER # 1	ILD 069506160	MR FRANK INC 201 W 155th SOUTH HOLLAND, IL	
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND 016360265	AMERICAN CHEMICAL SERVICE INC COLFAX AVE GRIFFITH INDIANA 46319	10/19/8
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or ~~XNAX~~	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrie Use Only)
1 tank truck		F-005	Flammable liquids N.O.S.	1993			gals	3,000		

SPECIAL HANDLING INSTRUCTIONS

If an RQ commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED Yes ☐ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D FEE: PREPAID ☐ COLLECT ☐ $

TOTAL CHARGES. $

FREIGHT CHARGES — FREIGHT PREPAID except when box at right is checked ☐ Check box if charges are to be collected

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding
$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

_____ Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement.
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges

_____ (Signature of Consignor)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

TSDF SIGNATURE DATE 10/19/86

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

FILE COPY

003513

HAZARDOUS WASTE MANIFEST

00100
MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

MR FRANK INC
NAME OF CARRIER (SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND 006390785	WILLIAM TELL WOODCRAFTERS INC P.O. BOX 8 TELL CITY, IND 47586	10-18-82
TRANSPORTER # 1	ILD 069506160	MR FRANK INC 201 W 155th SOUTH HOLLAND, IL	
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND 016360265	AMERICAN CHEMICAL SERVICE INC COLFAX AVE GRIFFITH INDIANA 46319	10/19/82
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or ~~NA~~	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
1 tank truck		F-005	Flammable liquids N.O.S.	1993			gals	3,000		

SPECIAL HANDLING INSTRUCTIONS

If an RQ commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1 800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED
Yes ☐ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

TOTAL CHARGES: $

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding.
$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."
_____ Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.
_____ (Signature of Consignor)

FREIGHT CHARGES
FREIGHT PREPAID except when box at right is checked ☐ Check box if charges are to be collect

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

GENERATOR'S SIGNATURE DATE

TSDF SIGNATURE DATE 10/19/82

5

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TSDF COPY

To 117 E T-63 CFM 10/19/82

003619

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. ILD 096781596. . . . | Manifest Document No. 0 0 00 1 | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Williams-Hayward
Protective Coatings, Inc.
7400 W. Archer Ave. Summit, IL 60638

A. State Manifest Document Number: INA 0160006

4. Generator's Phone (708) 458 0015

B. State Generator's ID: 0310065009

5. Transporter 1 Company Name: Mr. Frank, Inc.

6. Use EPA ID Number: [illegible]

C. State Transporter's ID: 0079

D. Transporter's Phone: [illegible]

7. Transporter 2 Company Name

8. Use EPA ID Number: ILD984775049

E. State Transporter's ID

F. Transporter's Phone: 708 720 0700

9. Designated Facility Name and Site Address
American Chemical Service
420 S. Colfax Ave.
Griffith, IN 46319

10. Use EPA ID Number: I N D 016360265

G. State Facility's ID: 9180890002

H. Facility's Phone: 719-934-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
~~Waste paint related material~~					
a. WASTE PAINT RELATED MATERIAL, FLAMMABLE LIQUID UN 1263	1	TT	1500	Gal	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
CUSTOMER REQUESTS CERTIFICATE OF DESTRUCTION FROM TREATMENT FACILITY UPON COMPLETION.

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR

Printed/Typed Name	Signature	Date Month	Day	Year
Edward Wencel		3	15	90

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year
CARL E. MILBURN		3	15	90

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.

Printed/Typed Name	Signature	Date Month	Day	Year
FDUNFEE		03	15	90

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0160006

EPA Form 8700-22 (Rev. 9-86) Previous editions are obsolete. State Form 11865

DISTRIBUTION: 2 IR TSD 3/15/90

PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

0018131

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.
ILD 005114327	00001		

3. Generator's Name and Mailing Address: Williams-Hayward Protective Coatings, Inc. 5241 W. 70th Pl. Bedford Park, IL 60638
4. Generator's Phone (312) 767-5266

A. State Manifest Document Number: INA 0316000
B. State Generator's ID: 0310125031

5. Transporter 1 Company Name: Mr. Frank, Inc.
6. Use EPA ID Number: I.L.D. 986.9.5 0 6160
C. State Transporter's ID: 0079
D. Transporter's Phone: 312 596 3377

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address: American Chemical Service 420 S. Colfax Ave. Griffith, IN 46319
10. Use EPA ID Number: I.N.D. 016360265
G. State Facility's ID: 9180890002
H. Facility's Phone: 719-934-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No
Waste paint related material					
a. FLAMMABLE LIQUID UN1263 9.9.1	1	TT	05500	gal	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR

Printed/Typed Name	Signature	Date Month	Day	Year
Kevin P. Koran		06	02	89

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year
		06	02	89

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name	Signature	Date Month	Day	Year
F DUNFEE	F Dunfee	06	02	89

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA0316000

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY

0016510

STATE OF ILLINOIS ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0610

LPC 62 8/81

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) **EPA Form 8700-22 (3-84)** Form Approved. OMB No. 2000-0404. Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: ILD005114327 — Manifest Document No.

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law, but is required by Illinois law.

3. Generator's Name and Mailing Address
WILLIAMS-HAYWARD PROTECTIVE COATINGS
5241 W. 70TH PLACE
BEDFORD PARK, IL. 60638

4. Generator's Phone (312) 767-5266

A. Illinois Manifest Document Number: IL 1120921

B. Illinois Generator's ID: 0310125031

5. Transporter 1 Company Name: MR. FRANK INC. — 6. US EPA ID Number: ILD069506160

C. Illinois Tranporter's ID: 00079

D. (312)-596-3377 Transporter's Phone

7. Transporter 2 Company Name — 8. US EPA ID Number

E. Illinois Transporter's ID

F. ( ) Transporter's Phone

9. Designated Facility Name and Site Address
AMERICHN CHEMICAL SERVICE
420 S. COLFAX AVE
GRIFFITH, IN 46319

10. US EPA ID Number: IND016360265

G. Illinois Facility's ID: 9168099002

H. Facility's Phone (219-924-4370

GENERATOR

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	WASTE FLAMMABLE LIQUID N.O.S. FLAMMABLE LIQUID ~~FLAMMABLE~~ UN1993 WASTE SOLVENTS n.o.s.	X	001	TT	04000	1	EPA HW Number D001; Authorization Number
b.							EPA HW Number; Authorization Number
c.							EPA HW Number; Authorization Number
d.							EPA HW Number; Authorization Number

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above: 1 = GALLONS

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, and Illinois regulations.

Printed/Typed Name: Kevin P. Koran — Signature: Kevin P Koran — Date (Month Day Year): 6 13 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Mike Garcia — Signature: Mike Garcia — Date (Month Day Year): 6 13 85

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name — Signature — Date (Month Day Year)

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: C R MURPHY — Signature: C R Murphy — Date (Month Day Year): 06 13 85

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV.# 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½ Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

204RT-50

009179

STATE OF ILLINOIS ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0610
LPC 62 8/81

print or type. (Form designed for use on elite (12-pitch) typewriter.) **EPA Form 8700-22 (3-84)** Form Approved. OMB No. 2000-0404, Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. ILD005114327 — Manifest Document No. 100000 — 2. Page 1 of 1 — Information in the shaded areas is not required by Federal law, but is required by Illinois law.

3. Generator's Name and Mailing Address
WILLIAMS-HAYWARD PROTECTIVE COATINGS
5241 W. 70th Pl. Bedford Park, IL 60638
312 767-5266

4. Generator's Phone ( )

A. Illinois Manifest Document Number: IL 1120917

B. Illinois Generator's ID: 0310125031

5. Transporter 1 Company Name: Mr. FRANK INC.

6. US EPA ID Number: I L D069508180

C. Illinois Tranporter's ID: 0079

D. Transporter's Phone: 312-596-3377

7. Transporter 2 Company Name

8. US EPA ID Number

E. Illinois Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
420 S. Collax Ave
Griffith, IN 46319

10. US EPA ID Number: IND016360265

G. Illinois Facility's ID: 9 1 80 8 90 0 02

H. Facility's Phone: (219) 924-4370

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE FLAMMABLE LIQUID N.O.S. ~~WASTE SOLVENTS~~ UN1993 FLAMMABLE LIQUID	X	001	TT	03000	1	EPA HW Number D001 / Authorization Number
b.						EPA HW Number / Authorization Number
c.						EPA HW Number / Authorization Number
d.						EPA HW Number / Authorization Number

J. Additional Descriptions for Materials Listed Above
WASTE SOLVENTS

K. Handling Codes for Wastes Listed Above
1=Gallons

15. Special Handling Instructions and Additional Information

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certificate under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, and Illinois regulations.

Printed/Typed Name	Signature	Date (Month Day Year)
~~JOHN~~ Joseph P. Kilrcz	Joseph P Kilrcz	11/14/85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)
MICHAEL A. PFEIFER	Michael A. Pfeifer	11/14/85

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name	Signature	Date (Month Day Year)
F DUNFEE	F Dunfee	11/14/85

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV. # 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½, Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

211 E T-50

009180

Division of Land Pollution Control - Manifest
Indiana State Board of Health
P.O. Box 7035
Indianapolis, IN 46207-7035

DO NOT WRITE IN THIS SPACE

Please print or type. (Form designed for use on elite (12-pitch) typewriter) Form Approved OMB No. 2000 0404 Expires 7 31 86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. / Manifest Document No.: IL D 00 5 1 14 3 27 00 0 0 1

2. Page 1 of: 1

Information in the shaded areas is not required by Federal law

3. Generator's Name: Williams-Haywood Protective Coatings, Inc. 5241 W. 70th Pl. Bedford Pk, IL 60638

4. Ganarator's Phone ( )

A. State Manifest Document Number: IN 076772

B. State Generator's ID: 0310125031

5. Transporter 1 Company Name: Mr. Frank, Inc.

6. US EPA ID Number: I L D 06 9 50 6 160

C. State Transporter's ID: 0079

D. Transporter's Phone: 312 59863377

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address: American Chemical Service
420 S. Kolfax Ave.
Griffith, IN 46319

420

10. US EPA ID Number: IN D 15 36 D 2 6 5

G. State Facility's ID: 9180890002

H. Facility's Phone: 719 934 4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
WASTE paint					
a. FLAMMABLE LIQUID UN 1263	001	TT	05500	GL	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

GENERATOR

Printed/Typed Name: Kevin P. Koran | Signature | Month 11 Day 07 Year 86

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Date: Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted item 19.

Printed/Typed Name: D. DUFFEE | Signature | Month 11 Day 17 Year 86

IN 076772

EPA Form 8700-22A (Rev. 11-85) UHWM 2/LP2

T.S.D. DETACH AND RETAIN THIS COPY and 204 E 011612

Division of Land Pollution Control - Manifest
Indiana State Board of Health
P.O. Box 7035
Indianapolis, IN 46207-7035

DO NOT WRITE IN THIS SPACE

Please print or type. (Form designed for use on elite (12-pitch) typewriter) Form Approved OMB No. 2000 0404 Expires 7 31 86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: I L D 0 0 5 1 1 4 3 2 7
Manifest Document No.: 0 0 0 0 1
2. Page 1 of 1
Information in the shaded areas is not required by Federal law

3. Generator's Name: Williams-Hayward Protective Coatings, INc. 5241 W. 70th Pl. Bedford Pk, IL 60638
4. Generator's Phone ( )
A. State Manifest Document Number: IN 076738
B. State Generator's ID: 0310125031

5. Transporter 1 Company Name: Mr. Frank, Inc.
6. US EPA ID Number: I L D 0 6 9 5 0 6 1 6 0
C. State Transporter's ID: 0079
D. Transporter's Phone: 312 596 3377

7. Transporter 2 Company Name:
8. US EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address: American Chemical Service, 420 S. Colfax Ave., Griffith, IN 46319
10. US EPA ID Number: I N D 0 1 6 3 6 0 2 6 5
G. State Facility's ID: 9180890002
H. Facility's Phone: 719 934 4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
WASTE paint					
a. FLAMMABLE LIQUID UN 1263	001	TT	2300	GH	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

Printed/Typed Name: Kevin Koran
Signature: [signature]
Month 11 Day 10 Year 86

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: F. DUNFEE
Signature: [signature]
Date: Month 11 Day 10 Year 86

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Date: Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: F DUNFEE
Signature: F Dunfee
Month 11 Day 10 Year 86

GENERATOR

TRANSPORTER

FACILITY

IN 076738

EPA Form 8700-22A (Rev. 11-85) UHWM 2/LP2

32"

T.S.D. DETACH AND RETAIN THIS COPY

2 ITC - T059613

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I·L·D·0·0·5·1·1·4·3·2·7	Manifest Document No. 0·0·0·0·1	2. Page 1 of 1	Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address: Williams-Hayward Protective Coatings, Inc. 5241 W. 70th Pl. Bedford Park, IL 60638

A. State Manifest Document Number: INA 0162780

4. Generator's Phone (312) 767-5266

B. State Generator's ID: 0310125031

5. Transporter 1 Company Name: Mr. Frank, Inc.

6. US EPA ID Number: I·L·D·0·6·5·0·6·1·6·0

C. State Transporter's ID: 0079

D. Transporter's Phone: 312-596-[illegible]

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address: American Chemical Service 420 S. Colfax Ave. Griffith, IN 46319

10. US EPA ID Number: I·N·D·0·1·6·3·6·0·2·6·5

G. State Facility's ID: 9180890002

H. Facility's Phone: 219-924-4470

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt./Vol.	Waste No.
a. Waste paint related material, FLAMMABLE LIQUID, UN1263	0 0 1	TT	0 0 0 4 0	Gal	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR

Printed/Typed Name	Signature	Month	Day	Year
Kevin P. Koran		1 0	1 6	8 7

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
		1 0	1 6	8 7

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

TRANSPORTER

19. Discrepancy Indication Space

FACILITY

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name	Signature	Month	Day	Year
E DUNTEE				10 16 87

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0162780

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

012219

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: I L D 0 0 5 6 4 3 2 7
Manifest Document No.: 0 00 01
2. Page 1: 1 of 1
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address: Williams-Hayward Protective Coatings, Inc. at: 5241 W. 70th Pl. Bedford Park, IL 60638
4. Generator's Phone (312) 767-5266

A. State Manifest Document Number: INA 0160007
B. State Generator's ID: 0310125031
C. State Transporter's ID: 0079
D. Transporter's Phone: 312 596 3377
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID: 9180890002
H. Facility's Phone: 719-934-4370

5. Transporter 1 Company Name: Mr. Frank, Inc.
6. Use EPA ID Number: I L D 06 95 06160
7. Transporter 2 Company Name:
8. Use EPA ID Number:
9. Designated Facility Name and Site Address: American Chemical Service, 420 S. Colfax Ave., Griffith, IN 46319
10. Use EPA ID Number: I N D 0 16 3602655

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
Waste paint related material					
a. FLAMMABLE LIQUID UN 1263	0.0	1TT	05400	G	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above:
K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information:

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Kevin P. Koran
Signature: [signature]
Date: Month 1 Day 02 Year 78

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Carl E. Milburn
Signature: [signature]
Date: Month 10 Day 27 Year 88

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Date: Month Day Year

19. Discrepancy Indication Space:

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: Jim Murphy
Signature: [signature]
Date: Month 10 Day 27 Year 88

GENERATOR / TRANSPORTER / FACILITY

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424 8802 or 202/426-2675.

INA 0160007

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

52629 211R TSD 10/31/88
138 CAL MARINE SHALE 1/12/89 901072

0015063

Form DNR H.W.G. - 10

HAZARDOUS WASTE MANIFEST DOCUMENT

MISSOURI DEPARTMENT OF NATURAL RESOURCES
P. O. Box 1368, Jefferson City, Missouri 65102 314-751-3241

MANIFEST DOCUMENT NUMBER: 001 001

Generator I.D. No.	Waste I.D. No.	Shipment No.

EPA Code D001

Part 1 to be completed by the generator (Instructions for completing and handling this document are on the reverse side)

Name	Identification	Address	Telephone No.	Date Shipped or Rec'd.
Item 1. Generator WILLIS TYROLIZOR CO.	Generator I.D. No. NED059947695	JACKSON, NEBRASKA 68743	402 632 4285	4/23/84
Item 2. Transporter MR. FRANK, INC.	Transporter No. ILD065506160	201 155TH ST South Holland Il. 60473	312 596 3377	4/23/84
Item 3. Treatment, Storage or Disposal Facility AMERICAN CHEMICAL SERVICE	T.S.D. Facility Permit No. IND016360265	420 So. COLFAX GRIFFIN, In 46139	219 924 4370	4/23/84

Item 4. Proper DOT Shipping Name	DOT Hazard Class	DOT Label Required or Exceptions	Quantity	Units*	Weight (If applicable)
WASTE SOLVENT NOS	UN1993	FLAMMABLE	5000	1 (2) 3 4 5	40,000

*Circle one: 1. tons; (2.) gallons; 3. cubic yds; 4. drums - 55 gallon; or 5. Pounds

Item 5.

Immediate Emergency Response Information	24-hour emergency telephone numbers
KEEP AWAY FROM SPARKS AND OPEN FLAME. IF SPILLED COLLECT WITH ABSORBANT MATERIAL In the event of a spill, contact the National Response Center, U. S. Coast Guard, 800-424-8802	Hugo R. MANCO 816 474 1390 Chemtrec 800-424-9300
SPECIAL HANDLING INSTRUCTIONS IF UNDELIVERABLE RETURN TO GENERATOR	

Item 6.

Placards Provided or Affixed	
V	✓

Shipper's Check List			
V	DOT Labels Applied and Secure	✓	DOT Auth. Containers
V	Proper DOT Name on all Packages	✓	Checked for Proper Sealing
	Air Cargo Only		Peligro Label Applied

Item 7. GENERATOR CERTIFICATION. This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the Missouri Department of Natural Resources & EPA

Generator's Signature HUGO R MANCO, CONTRACTOR Date 4/23/84

Part 2

To be completed by the transporter

Item 8. TRANSPORTER CERTIFICATION. This is to certify acceptance of the hazardous waste shipment. Date accepted for Shipment: 4/23/84

Transporter's Signature [signature] Date 4/23/84

Part 3

Item 9. TSDF CERTIFICATION. This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

TSDF Signature [signature] Date 4/24/84

To 212 E T-50
GRM 4.24.84

Facility Copy

016613

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: ILD121276091
Manifest Document No.:
2. Page 1 of 8
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address: WIRE CLOTH PRODUCTS, 2801 EISENHOWER EXPWY, BELLWOOD IL 60104
A. State Manifest Document Number: INA 0162714
4. Generator's Phone: (312) 544-4600
B. Generator's ID: 0310155024
5. Transporter 1 Company Name: MR. FRANK, INC.
6. Use EPA ID Number: ILD089506160
C. State Transporter's ID: 0079
D. Transporter's Phone: 596-3377
7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:
9. Designated Facility Name and Site Address: AMERICAN CHEMICAL, 420 S. COLFAX, GRIFFITH, IND. 46319
10. Use EPA ID Number: IND016360265
G. State Facility's ID:
H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	Waste No.
a. WASTE TRICHLOROETHELENE ORM-A, UN 1710	001	TT	005 00	1	F001 D-001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above:
K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: D. HOLWICK
Signature: D. Holwick
Date: Month 11 Day 11 Year 87

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JOE WEBER
Signature: Joe Weber
Date: Month 11 Day 11 Year 87

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Date: Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: F DUNFEE
Signature: F Dunfee
Date: Month 11 Day 11 Year 87

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424 8802 or 202/426-2675.

INA 0162714

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

203TKT50M

012218

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. W I D 9 8 2 0 6 8 4 0 0 1 — Manifest Document No. 7 7 1 7 6 — 2. Page 1 of — Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
WISCONSIN BELL/AN AMERITECH COMPANY
316 W. WASHINGTON MADISON, WI 53703

4. Generator's Phone (414/678-2791

A. State Manifest Document Number: INA 0309633

B. State Generator's ID:

5. Transporter 1 Company Name: E&K HAZARDOUS WASTE SERVICES

6. Use EPA ID Number: W I D 9 8 2 2 1 9 5 2 9

C. State Transporter's ID: 11608

D. Transporter's Phone: 414/458-6030

7. Transporter 2 Company Name:

8. Use EPA ID Number:

E. State Transporter's ID:

F. Transporter's Phone:

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
420 S. COLFAX AVENUE
GRIFFITH, IN 46606

10. Use EPA ID Number: I N D 0 1 6 3 6 0 2 6 5

G. State Facility's ID:

H. Facility's Phone: 219/924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. "RQ", Waste Flammable Liquid, n.o.s., Flammable Liquid, UN1993, (EPA Ignitability)	001	DM	00055	G	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
pkg #1 of 1 — 2221 Highway 41, WI

NOTIFY CBC TRANSPORT (414) 754-7005 WITH ANY LOAD DISCREPANCIES. (OFF SPEC. MATERIAL)

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR — Printed/Typed Name: Roger W. Staven — Signature: Roger W. Staven — Date: Month 12 Day 12 Year 88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: [illegible] — Signature: [illegible] — Date: Month 12 Day 12 Year 88

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: — Signature: — Date: Month . Day . Year .

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19
Printed/Typed Name: Harold F Schmidt — Signature: Harold F Schmidt — Date: Month 12 Day 14 Year 88

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

204TCTSO/1b

COPY 5. TSD COPY

0015062

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: WID034814798 — Manifest Document No.: 0000
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
WISCONSIN DEPT. OF AGRICULTURE
6101 MINERAL POINT ROAD, MADISON, WI 53705

A. State Manifest Document Number: INA 0126414
B. State Generator's ID:
C. State Transporter's ID: 11536
D. Transporter's Phone: 414-764-7005
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID:
H. Facility's Phone: 312-768-3400

4. Generator's Phone (608) 266-2465

5. Transporter 1 Company Name: CBC TRANSPORT
6. Use EPA ID Number: WID047259288

7. Transporter 2 Company Name:
8. Use EPA ID Number:

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICES, INC.
420 S. COLFAX AVENUE
GRIFFITH, INDIANA 46319

10. Use EPA ID Number: IND016360265

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	Waste No.
a. WASTE FLAMMABLE LIQUID, N.O.S. FLAMMABLE LIQUID, UN 1993	008	DM	00440	G	
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Allan J. Lathrop — Signature: Allan J. Lathrop — Date: Month 05 Day 11 Year 87

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Bruce Benoit — Signature: [signature] — Date: Month 05 Day 11 Year 87

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: — Signature: — Date: Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: Harold F. Schmidt — Signature: [signature] — Date: Month 05 Day 13 Year 87

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0126414

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

MRK

8-204R TSD B

012214

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: WID034814798
Manifest Document No.: 0.0.9.4.1
2. Page 1 of 1
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Wisconsin Dept. of Agriculture/ Central Animal Health Lab
6101 Mineral Point Rd.
Madison, WI 53705 (608) 266-2465

A. State Manifest Document Number: INA 0200941
B. State Generator's ID:
C. State Transporter's ID: 11536
D. Transporter's Phone: (414) 458-6030
E. State Transporter's ID: 11605
F. Transporter's Phone: (414) 458-6030
G. State Facility's ID:
H. Facility's Phone: (219) 924-4370

4. Generator's Phone:
5. Transporter 1 Company Name: CBC Transport ~~E&K Hazardous Waste Service~~
6. Use EPA ID Number: WID047259288 ~~WID0022195 29~~
7. Transporter 2 Company Name: E&K Hazardous Waste Services Inc.
8. Use EPA ID Number: WID9722195 29
9. Designated Facility Name and Site Address
American Chemical Service
420 S. Calfax
Griffith, IN 46319
10. Use EPA ID Number: IND0166360265

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. "RQ", Waste Flammable Liquid, N.O.S., Flammable Liquid, UN 1993, (F003)	013	DM	0.0715	G	F003 D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
1a - Solvent Waste
B. - Transporter #1 Phone# (414) 764-7005

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: [illegible] Signature: [illegible] Date: Month 03 Day 14 Year 88

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: BRUCE BENOIT ENVIR. TECH. Signature: [illegible] Date: Month 03 Day 14 Year 88

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: James R. Ostwald Signature: James R. Ostwald Date: Month 03 Day 14 Year 88

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted item 19.
Printed/Typed Name: HARROLD F Schmidt Signature: [illegible] Date: Month 05 Day 16 Year 88

GENERATOR / TRANSPORTER / FACILITY

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0200941

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865 13-20 Pt T-50 3/13/88

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

0015059

State of Wisconsin
Department of Natural Resources
Bureau of Solid Waste Mgt.
Box 8094
Madison, Wisconsin 53708

FOR DNR USE ONLY

...for use on elite (12-pitch)
...TIONS ON REVERSE SIDE OF COPY 6.

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.
WI 0 0 5 4 8 4 4 7 8 8	1 0 2 N		

3. Generator's Name and Mailing Address
STATE OF WISCONSIN - DEPT OF AGRICULTURE
6101 MINERAL PT. RD MADISON WI 53705

4. Generator's Phone (414) 2608-7965

A. State Manifest Document Number: WI 72582
B. State Generator's ID:

5. Transporter 1 Company Name	6. US EPA ID Number	C. State Transporter's ID
CBC ADVANCE CO	WI D 0 5 4 8 4 7 2 8 8	D. Transporter's Phone 414/764-70[illegible]
7. Transporter 2 Company Name	8. US EPA ID Number	E. State Transporter's ID
		F. Transporter's Phone

9. Designated Facility Name and Site Address	10. US EPA ID Number	G. State Facility's ID
AMERICAN CHEMICAL SERVICES 420 S CONLEY AVE. GRIFFITH, IN 46319	I N D 0 0 1 6 3 6 0 2 6 5	H. Facility's Phone 219/924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE FLAMMABLE LIQUID NOS FLAMMABLE LIQUID UN1993	0 0 8	D M	0 0 4 4 0	G	D 0 0 1
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and according to the requirements of the Wisconsin Department of Natural Resources. Unless I am a small quantity generator who has been exempted by statute or regulation for the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage or disposal currently available to me which minimizes the present and future threat to human health and the environment.

GENERATOR

Printed/Typed Name & Position Title	Signature	Date (Month Day Year)
D.J. SPRECHER, D.V.M. Bureau Director	D.J. Sprecher	03 13 86

TRANSPORTER

17. TRANSPORTER 1 Acknowledgement of Receipt of Materials

Printed/Typed Name & Position Title	Signature	Date (Month Day Year)
GARY STERKEL	Gary Sterkel	03 17 86

18. TRANSPORTER 2 Acknowledgement of Receipt of Materials

Printed/Typed Name & Position Title	Signature	Date (Month Day Year)

FACILITY

19. Discrepancy Indication Space

20. FACILITY OWNER OR OPERATOR: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name & Position Title	Signature	Date (Month Day Year)
H. WHITAKER	H. Whitaker	3 13 86

Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

204 E T-50

Copy Distribution: 1 — BSWM 4 — Facility
2 — Generator 5 — Generator
3 — BSWM 6 — Transporter
BSWM Copies 1 & 3 mail to Wis. DNR at above address.

COPY 4

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I L D 0 5 6 6 2 9 3 9 7 | Manifest Document No. | 2. Page 1 of | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Wisconsin Tool
333 S Washington Mundelein Il 60060
4. Generator's Phone (312) 312 566 0820

A. State Manifest Document Number: INA 0205890
B. State Generator's ID:
C. State Transporter's ID: 1400
D. Transporter's Phone: 376 9343
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID: 9180890002
H. Facility's Phone: 312 768 3400

5. Transporter 1 Company Name: H Roskin Motor Service
6. Use EPA ID Number: I.L.D.0.4.5.6.9.5.7.1.5
7. Transporter 2 Company Name:
8. Use EPA ID Number:
9. Designated Facility Name and Site Address: American Chemical Service Griffith In 46319
10. Use EPA ID Number: I.N.D.0.1.6.3.6.0.5.6.2

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. Trichlor ORM-A UN ~~1897~~ 1710	~~28~~ 24	DM	1400	Gal	F001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR — Printed/Typed Name | Signature | Month | Day | Year

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials — Printed/Typed Name | Signature | Month | Day | Year
18. Transporter 2 Acknowledgement of Receipt of Materials — Printed/Typed Name | Signature | Month | Day | Year

FACILITY
19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: HAROLD F. SCHMIDT | Signature | Month: 11 | Day: 25 | Year

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0205890

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (pink) TRANSPORTER 2 COPY

INKT63 5/10/11

0015061

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: I.L.D.0.5.6.6.2.9.3.9.7 | Manifest Document No.: 0.6.1.9.9
2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Wisconsin Tool 333 S Washington
Mundelein IL 60060
4. Generator's Phone (312) 566 0820

A. State Manifest Document Number: INA 0322645
B. State Generator's ID:

5. Transporter 1 Company Name: H Roskin Motor Service
6. Use EPA ID Number: I.L.D.0.4.5.6.9.5.7.1.5
C. State Transporter's ID: 1400
D. Transporter's Phone: #312 3769343

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Service
Griffith IN 46319
10. Use EPA ID Number: I.N.D.0.1.6.3.6.0.5.6.2
G. State Facility's ID: 9180890002
H. Facility's Phone: 312 768 3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. Trichlor ORM-A UN1897	30	DM	1500	Gal	F001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR

Printed/Typed Name	Signature	Date Month	Day	Year
Bob Sass		07	11	89

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year
Mark Wassil		7	12	89

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year
		.	.	.

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name	Signature	Date Month	Day	Year
Harold F. Schmidt		07	14	89

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA0322645

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

.COPY 5. TSD COPY

IART63 7/88

0016490

IL 532-610
LPC 62 8/81

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

TO BE COMPLETED BY WASTE GENERATOR

0954815 (1–7)

Authorization Number ____ (8–13)

American Tool & Stamping Co. | 333 S. Washington | 312-439-6543 | 0971150009 (14) | G (24)
(Company Name) | Address | Phone Number | Generator Number

Mundelein | Illinois | 60060 | ILD056629397
City | State | Zip | EPA Number

WASTE HAULER(S)

H. Roskin | 4710 W. Roosevelt | S.W.H. Registration Number 1400001 (25–31)
Hauler Name | Hauler Address

3122617235 | ILD045695715
Phone Number | EPA Number

Hauler Name | Hauler Address | S.W.H. Registration Number (32–38)

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical | | 91808902 (39–46)
(Facility Name) | Address | Site Number

Griffith, | Indiana | 46319 | 3127683400 | IND016360265
City | State | Zip | Phone Number | EPA Number

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Trichlor | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
Spent Trichlor	ORM - A	UN1710	F001

WEIGHT FOR D.O.T. USE ____ LBS / TONS (circle one) — WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 2600 (47–52) 1 GALLONS (Circle One) / 2 CU. YDS. (53)

METHOD OF SHIPMENT (Circle One) (DRUMS 50 48 Number) TANK TRUCK OPEN TRUCK OTHER (Specify): Closed In

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Robert A. Stasek (Authorized Signature) DATE: 3/26/85

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Chuck Valentine (Authorized Signature) DATE: 3/26/85 (54–59)

(2) ____ (Authorized Signature) DATE: 3/27/85

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ____

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Frank Price (Authorized Signature) DATE: 3/27/85 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: ____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637 — OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV. # 4

SITE COPY - PART 3

120 T-T-63

009939

STATE OF ILLINOIS ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0610

LPC 62 8/81

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) EPA Form 8700-22 (3-84) Form Approved. OMB No. 2000-0404. Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I L D 0 5 6 6 2 9 3 9 7 — Manifest Document No.

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law, but is required by Illinois law.

3. Generator's Name and Mailing Address
American Tool & Stamping Co.
333 S. Washington Blvd.
Mundelein, Il 60060

A. Illinois Manifest Document Number: IL 1159037

B. Illinois Generator's ID: 0 9 7 1 1 5 0 0 0 9

4. Generator's Phone: (312) 439-6543

5. Transporter 1 Company Name: H. Roskin

6. US EPA ID Number: I L D 0 4 5 6 9 5 7 1 5

C. Illinois Tranporter's ID: 1 4 0 0 0 0 1

D. (312) 621-7235 Transporter's Phone

7. Transporter 2 Company Name

8. US EPA ID Number

E. Illinois Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical
Griffith, IN 46319

10. US EPA ID Number: I N D 0 1 6 3 6 0 2 6

G. Illinois Facility's ID: 9 1 8 0 8 9 0 2

H. Facility's Phone: 312-768-3400

	HM	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.		Spent Trichlor - ORM-A liquid	29	DM	1450	gal	EPA HW Number: F001; Authorization Number
b.							EPA HW Number; Authorization Number
c.							EPA HW Number; Authorization Number
d.							EPA HW Number; Authorization Number

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, and Illinois regulations.

Printed/Typed Name: Robert A. Sass — Signature: Robert A. Sass — Date: Month 9 Day 24 Year 86

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: CHARLES VALENTINE — Signature: Charles Valentine — Date: Month 9 Day 24 Year 86

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name — Signature — Date: Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: Harold F Schmidt — Signature — Date: Month 10 Day 02 Year 86

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV.# 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½ Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

120F 763

011436

Division of Land Pollution Control - Manifest
Indiana State Board of Heatth
P.O. Box 7035
Indianapolis, IN 46207-7035

DO NOT WRITE IN THIS SPACE

Please print or type. (Form designed for use on elite (12-pitch) typewriter)

Form Approved OMB No. 2000 0404 Expires 7 31 86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. ILD056629397 — Manifest Document No.

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law

3. Generator's Name
American Tool
333 S. Washington Mundelein Il 60060
4. Generator's Phone (312) 566 0820

A. State Manifest Document Number IN 089267
B. State Generator's ID

5. Transporter 1 Company Name: H Roskin Motor Service
6. US EPA ID Number: ILD045695715
C. State Transporter's ID 1400
D. Transporter's Phone 261 7236

7. Transporter 2 Company Name
8. US EPA ID Number
E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Service
Griffith In 46319
10. US EPA ID Number: INDO16360562
G. State Facility's ID 9180890002
H. Facility's Phone 768 3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. Tri-chlor O R M-A UN 1710	~~14~~ 16	DM	700	G	F001
b.					
c.					
d					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

GENERATOR

Printed/Typed Name ROBERT A SASS | Signature | Month | Day | Year

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name WILLIE SMITH | Signature | Date: Month | Day | Year

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Date: Month | Day | Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted item 19.
Printed/Typed Name | Signature | Month | Day 17 | Year

IN 089267

EPA Form 8700-22A (Rev. 11-85) — UHWM 2/LP2

T.S.D. DETACH AND RETAIN THIS COPY

MRh

013855

HAZARDOUS WASTE MANIFEST

1

MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

NAME OF CARRIER (SCAC) CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	ILD005116165	Wisconsin Tool 9521 Ainslie Schiller Park Il 60176 312 678 7573	
TRANSPORTER # 1	ILD045695715	H. Roskin 4710 W Roosevelt Chgo. Il. 60650 312 261 4645	
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chemical Service Griffith In 46319 312 768 3400	4/8/83
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
32 dr 32		F001	Trichlor	1710		None	55g	1550g		

SPECIAL HANDLING INSTRUCTIONS

If an RQ commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED Yes ☐ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

TOTAL CHARGES: $

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding.
$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."
_____ Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.
_____ (Signature of Consignor)

FREIGHT CHARGES
FREIGHT PREPAID except when box at right is checked ☐ Check box if charges are to be collect

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

[signature] 4-6-83
GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

[signature]
TRANSPORTER #1 SIGNATURE & DATE TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

[signature] 4/8/83
TSDF SIGNATURE DATE

5

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TSDF COPY

To IAK - 4.8.83 GRM T-63

006606

HAZARDOUS WASTE MANIFEST

1
MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

H ROSKIN
NAME OF CARRIER (SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	ILD005116165	Wisconsin Tool 9521 Ainslie Schiller Pk. Il 60176 312 678 7573	
TRANSPORTER # 1	ILDo45695715	H Roskin 4710 W Roosevelt Chgo Il 60650 312 2617236	
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chemical Griffith Ind 46319 312 768 3400	
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
19 17		F001	Trichlor	1710		None	55g	~~950g~~ 850		

SPECIAL HANDLING INSTRUCTIONS

If an RQ commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426 2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED
Yes ☐ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding.
$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."
_____ Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.
_____ (Signature of Consignor)

TOTAL CHARGES: $

FREIGHT CHARGES
FREIGHT PREPAID except when box at right is checked ☐ Check box if charges are to be collect

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

GENERATOR'S SIGNATURE DATE

TSDF SIGNATURE DATE

5

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TSDF COPY

On dock 7-20-83

To 120 KT-63
GM 8-10-87

006608

HAZARDOUS WASTE MANIFEST

2
MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

NAME OF CARRIER (SCAC) CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	ILD005116165	Wisconsin Tool 9521 Ainslie Schiller Park Il 60176 678 7573	
TRANSPORTER # 1	ILD045695715 1400 001	H Roskin 4710 W Roosevelt Chgo Il 60650 261 7236	
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chemical Griffith In 46319 312 768 3400	10/24/83
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
20dr		F001	Trichlor ORM-A	1710		none	~~1000g~~ 55g	~~1000g~~ 1250		

SPECIAL HANDLING INSTRUCTIONS

If an RQ commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED Yes ☐ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

TOTAL CHARGES: $

FREIGHT CHARGES

FREIGHT PREPAID except when box at right is checked ☐ Check box if charges are to be collect

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding
$ _____ per _____

"If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

_____ Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

_____ (Signature of Consignor)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE TRANSPORTER #2 SIGNATURE & DATE (If required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal:

TSDF SIGNATURE DATE 10/24/83

5

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

To 118 R T-63 6104 10-31-83

TSDF COPY

006607

IL 532-610
LPC 62 8/81

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0954812

Authorization Number

Wisconsin Tool & Stamping Co. (Company Name) | 9521 W. Ainslie Street (Address) | (312) 678-7573 (Phone Number) | 0 3 1 2 8 5 0 0 2 6 (Generator Number)

Schiller Park, (City) | Illinois (State) | 60176 (Zip) | I L D 0 0 5 1 1 6 1 6 5 (EPA Number)

WASTE HAULER(S)

H. Roskin (Hauler Name) | 4710 W. Roosevelt (Hauler Address) | S.W.H. Registration Number 1 4 0 0 0 0 1

(312) 261-7236 (Phone Number) | I L D 0 4 5 6 9 5 7 1 5 (EPA Number)

Hauler Name | Hauler Address | S.W.H. Registration Number

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical (Facility Name) | Address | 9 1 8 0 8 9 0 2 (Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip) | (312) 768-3400 (Phone Number) | I N D 0 1 6 3 6 0 2 6 5 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: TRICHLOR ORM A | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
Spent Trichlor	ORM-A	1 7 1 0	F 0 0 1

WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 765 (1 GALLONS (Circle One) / 2 CU. YDS.)

METHOD OF SHIPMENT (Circle One) (DRUMS 13 Number) TANK TRUCK OPEN TRUCK OTHER (Specify) Closed In

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION _____ (Authorized Signature) DATE: _____

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) _____ (Authorized Signature) DATE: 6/19/84

(2) _____ (Authorized Signature) DATE: 6/22/84

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO _____

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) DATE: 6/27/84

COMMENTS OR SPECIAL INSTRUCTIONS: _____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637 OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV. # 4

SITE COPY - PART 3

IBRT-63

006609

IL 532-610
LPC 62 8/81

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0954813 (1–7)

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number ____ (8–13)

Wisconsin Tool & Stamping Co. (Company Name) | 9521 W. Ainslie St. (Address) | 312-678-7573 (Phone Number) | 0312850026 (14–24 Generator Number)

Schiller Park, (City) | Illinois (State) | 60176 (Zip) | ILD005116165 (EPA Number)

WASTE HAULER(S)

H. Roskin (Hauler Name) | 4710 W. Roosevelt (Hauler Address) | S.W.H. Registration Number 1400001 (25–31)

312-261-7236 (Phone Number) | ILD045695715 (EPA Number)

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number (32–38)

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical (Facility Name) | (Address) | 91808902 (39–46 Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip) | 312-768-3400 (Phone Number) | IND016360265 (EPA Number)

(Alternate (Facility Name)) | (Address) | (39–46 Site Number)

(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: TRICHLOR - ORM-A WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
Spent Trichlor	ORM-A	1710	F001

WEIGHT FOR D.O.T. USE ____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 1485 (47–52) (1 GALLONS / 2 CU. YDS. (Circle One)) (53)

METHOD OF SHIPMENT (Circle One) (DRUMS 27 Number) TANK TRUCK OPEN TRUCK OTHER (Specify) Closed In

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION ____ (Authorized Signature) DATE: ____

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Chuck Wallenstein (Authorized Signature) DATE: 10/16/84 (54–59)

(2) ____ (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO____

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 10/18/84 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: ____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637 OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV. 8 4

SITE COPY - PART 3

120 F T-63

006611

IL 532-610
LPC 62 8/81

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0954821 (1–7)

Authorization Number (8–13)

Wisconsin Tool and Stamping Company (Company Name) | -9521 W. Ainslie (Address) | (312) 678-7573 (Phone Number) | 0 3 1 2 8 5 0 0 2 6 (14–24 Generator Number)

Schiller Park (City) | Illinois (State) | 60176 (Zip) | I L D 0 0 5 1 1 6 1 6 5 (EPA Number)

WASTE HAULER(S)

H. Roskin (Hauler Name) | 4710 W. Roosevelt (Hauler Address) | S.W.H. Registration Number 1 4 0 0 0 0 1 (25–31)

3 1 2 2 6 1 7 2 3 6 (Phone Number) | I L D 0 4 5 6 9 5 7 1 5 (EPA Number)

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number (32–38)

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical (Facility Name) | (Address) | 9 1 8 0 8 9 0 2 (39–46 Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip) | 3 1 2 7 6 8 3 4 0 0 (Phone Number) | I N D 0 1 6 3 6 0 2 6 5 (EPA Number)

(Alternate (Facility Name)) | (Address) | (39–46 Site Number)

(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Trichlor - ORM-A WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
Spent Trichlor	ORM-A	1710	F 0 0 1

WEIGHT FOR D.O.T. USE ____ LBS ____ TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: (47–52) 1,200

(1) GALLONS (Circle One) 2 CU. YDS. (53)

METHOD OF SHIPMENT (Circle One) (DRUMS 24 Number) TANK TRUCK DPEN TRUCK OTHER (Specify) Closed In.

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PRDPER CONDITION FDR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFDRMATION ____ (Authorized Signature) DATE: ____

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) M. Roskin (Authorized Signature) DATE: 4/17/84 (54)

(2) ____ (Authorized Signature) DATE: ____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO____

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

____ (Authorized Signature) DATE: 4/25/84 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: ____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637 OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV. # 4

SITE COPY - PART 3

To 120 K.T. 63 GKA To

006610

STATE OF ILLINOIS ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0610

LPC 62 8/81

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) **EPA Form 8700-22 (3-84)** Form Approved. OMB No. 2000-0404. Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: 0312850026 — Manifest Document No.:

2. Page 1 of — Information in the shaded areas is not required by Federal law, but is required by Illinois law.

3. Generator's Name and Mailing Address
Wisconsin Tool and Stamping Company
9521 West Ainslie Street - Schiller Park, Illinois 60176

4. Generator's Phone (312) 678-7573

A. Illinois Manifest Document Number: IL 1158768

B. Illinois Generator's ID: 0 0 5 1 1 6 1 6 5

5. Transporter 1 Company Name: H. Roskin — 6. US EPA ID Number: 1400001

C. Illinois Tranporter's ID: 45695715

D. (312) 261-7236 Transporter's Phone

7. Transporter 2 Company Name — 8. US EPA ID Number

E. Illinois Transporter's ID

F. ( ) Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical
Griffith, Indiana 46319

10. US EPA ID Number: 91808902

G. Illinois Facility's ID: 0 1 6 3 6 0 2 6 5

H. Facility's Phone: (312) 769-3400

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	Liquid Spent Trichlor ORM-A UN 1710 F001	13		690 gal.		EPA HW Number: F001; Authorization Number: 1710
b.						EPA HW Number; Authorization Number
c.						EPA HW Number; Authorization Number
d.						EPA HW Number; Authorization Number

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, and Illinois regulations.

Printed/Typed Name: E. Davis — Signature: — Date: Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Cleance Neal — Signature: H Roskin — Date: Month Day Year

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name — Signature — Date: Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: R Rushnak — Signature: R Rushnak — Date: Month Day Year: 12 21 88

GENERATOR — TRANSPORTER — FACILITY

IN ILLINOIS: 217 / 782-3637 "24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS" OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV.# 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983 Chapter 111½ Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

120 K T-63 006612

STATE OF ILLINOIS ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0610

LPC 62 8/81

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) **EPA Form 8700-22 (3-84)** Form Approved. OMB No. 2000-0404 Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: ILD005116165 — Manifest Document No.:

2. Page 1 of 1

Information in the shaded areas is not required by Federal law, but is required by Illinois law.

GENERATOR

3. Generator's Name and Mailing Address
Wisconsin Tool and Stamping Company
9521 West Ainslie Street
Schiller Park, Illinois 60176

4. Generator's Phone (312)678-7573

A. Illinois Manifest Document Number: IL 1158769

B. Illinois Generator's ID: 0 3 1 2 8 5 5 0 2 6

5. Transporter 1 Company Name: H. Roskin — 6. US EPA ID Number: I L D 0 4 5 6 9 5 7 1 5

C. Illinois Tranporter's ID: 1 4 0 0 0 0 1

D. (312) 261-7236 Transporter's Phone

7. Transporter 2 Company Name — 8. US EPA ID Number

E. Illinois Transporter's ID

F. ( ) Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical
Griffith, Indiana
43619

10. US EPA ID Number: I N D 0 1 6 3 5 0 2 6 5

G. Illinois Facility's ID: 9 1 8 0 8 9 0 2

H. Facility's Phone: (312) 768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. Spent Trichlor - ORM-A Liquid		16	Drums	880	gal	EPA HW Number: F001 / Authorization Number
b.						EPA HW Number / Authorization Number
c.						EPA HW Number / Authorization Number
d.						EPA HW Number / Authorization Number

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, and Illinois regulations.

Printed/Typed Name: EVERETT DAVIS — Signature: Everett Davis — Date (Month Day Year): 7-26-85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: CHUCK VALENTINE — Signature: Chuck Valentine — Date (Month Day Year): 3 26 85

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name — Signature — Date (Month Day Year)

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: FRANK PRICE — Signature: Frank Price — Date (Month Day Year): 3 27 85

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV.# 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½, Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

120 R T-63 009177

STATE OF ILLINOIS ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0610
LPC 62 8/81

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) **EPA Form 8700-22 (3-84)** Form Approved. OMB No. 2000-0404. Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. ILD005116165 — Manifest Document No.
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law, but is required by Illinois law.

GENERATOR

3. Generator's Name and Mailing Address
Wisconsin Tool and Stamping Company
9521 West Ainslie Street
Schiller Park, Il. 60176 (312) 678-7573

4. Generator's Phone

A. Illinois Manifest Document Number: IL 1158770

B. Illinois Generator's ID: 0312 8 5 5 0 2 6

5. Transporter 1 Company Name: H. Roskin

6. US EPA ID Number: ILDR 4 5 6 9 5 7 1 5

C. Illinois Tranporter's ID: 1 4 0 0 0 0 6

D. (312) 261-7236 Transporter's Phone

7. Transporter 2 Company Name

8. US EPA ID Number

E. Illinois Transporter's ID

F. ( ) Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical
Griffith, Indiana
43619

10. US EPA ID Number: IND 0 1 6 3 6 0 2 6 6

G. Illinois Facility's ID: 9 1 8 0 8 9 0 2

H. Facility's Phone: (312 768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. Spent Trichlor - ORM - A Liquid		XX	DRUMS	XXXXXXXX	gal	EPA HW Number: F001
b.		19		950	gal	EPA HW Number:
c.						EPA HW Number:
d.						EPA HW Number:

Authorization Number

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, and Illinois regulations.

Printed/Typed Name | Signature | Date (Month Day Year)

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature: Clyde Cmas | Date (Month Day Year)

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name | Signature | Date (Month Day Year)

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: FRANK PRICE | Signature: Frank Price | Date (Month Day Year): 8 12 85

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV.# 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½ Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

IBK T-63

009178

STATE OF ILLINOIS ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0610

LPC 62 8/81

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) **EPA Form 8700-22 (3-84)** Form Approved. OMB No. 2000-0404. Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: ILD005116165 — Manifest Document No.:

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law, but is required by Illinois law.

3. Generator's Name and Mailing Address:
Wisconsin Tool & Stamping Co.
9521 W. Ainslie St.
Schiller Park, IL 60176 (312) 678-7573

4. Generator's Phone

A. Illinois Manifest Document Number: IL 1159038

B. Illinois Generator's ID: 0312855026

5. Transporter 1 Company Name: H. Roskin

6. US EPA ID Number: ILD045697 15

C. Illinois Tranporter's ID: 1400001

D. (312) 261-7235 Transporter's Phone

7. Transporter 2 Company Name:

8. US EPA ID Number:

E. Illinois Transporter's ID:

F. Transporter's Phone

9. Designated Facility Name and Site Address:
American Chemical
Griffith, Indiana 43619

10. US EPA ID Number: IND01636026

G. Illinois Facility's ID: 91808902

H. Facility's Phone: (312) 768-3400

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a.	Spent Trichlor G ORM-A liquid	33	Drums	1550	gal.	EPA HW Number: F001 Authorization Number:
b.						EPA HW Number: Authorization Number:
c.						EPA HW Number: Authorization Number:
d.						EPA HW Number: Authorization Number:

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, and Illinois regulations.

Printed/Typed Name	Signature	Date (Month Day Year)
EVERETT DAVIS	Everett Davis	9 21 86

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)
CHUCK VALENTINE	Chuck Valentine	9 21 86

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name	Signature	Date (Month Day Year)
Harold E. Schmidt	Harold E. Schmidt	10 02 86

GENERATOR — TRANSPORTER — FACILITY

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV. # 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½ Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

120E 091611

Division of Land Pollution Control - Manifest
Indiana State Board of Health
P.O. Box 7035
Indianapolis, IN 46207-7035

DO NOT WRITE IN THIS SPACE

Please print or type. (Form designed for use on elite (12-pitch) typewriter) Form Approved OMB No. 2000 0404 Expires 7 31 86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I L D 0 0 5 1 1 6 1 6 5 — Manifest Document No.
2. Page 1 of 1
Information in the shaded areas is not required by Federal law

3. Generator's Name: Wisconsin Tool & Stamping Company
95?1 W Ainslie Shiller Park Il 60176
4. Generator's Phone (312) 678 7573

A. State Manifest Document Number: IN 089253
B. State Generator's ID: 0312855026
C. State Transporter's ID: 1400
D. Transporter's Phone: 261-7236
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID:
H. Facility's Phone: 312 768 3400

5. Transporter 1 Company Name: d Roskin Motor Service
6. US EPA ID Number: I L D 0 4 5 6 9 5 7 1 5
7. Transporter 2 Company Name:
8. US EPA ID Number:
9. Designated Facility Name and Site Address: American Chemical Service
Griffith In 46319
10. US EPA ID Number: I N D 0 1 6 3 6 0 2 6 5

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	15. Waste No.
a. Spent Trichlor O R M - A Liquid U N XXXX 1710	3 4	d m	1 7 0 0	1	F001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

Printed/Typed Name: Scott Rayfield — Signature — Month / Day / Year

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials — Date
Printed/Typed Name: Ray Zak — Signature — Month / Day / Year

18. Transporter 2 Acknowledgement of Receipt of Materials — Date
Printed/Typed Name — Signature — Month / Day / Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted item 19.
Printed/Typed Name — Signature — Month / Day / Year

IN 089253

EPA Form 8700-22A (Rev. 11-85) UHWM 2/LP2

T.S.D. DETACH AND RETAIN THIS COPY MRK 34-113 TGS B

01221S

Division of Land Pollution Control - Manifest
Indiana State Board of Health
P.O. Box 7035
Indianapolis, IN 46207-7035

DO NOT WRITE IN THIS SPACE

Please print or type. (Form designed for use on elite (12-pitch) typewriter)

Form Approved OMB No. 2000 0404 Expires 7 31 86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I L D 0 0 5 1 1 6 1 6 5 — Manifest Document No.

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law

3. Generator's Name
Wisconsin Tool & Stamping Company
9521 W Ainslie Shiller Park Il 60176
4. Generator's Phone (312) 678 7573

A. State Manifest Document Number IN 089253
B. State Generator's ID 0312855026

5. Transporter 1 Company Name: H Roskin Motor Service
6. US EPA ID Number: I L D 0 4 5 6 9 5 7 1 5
C. State Transporter's ID 1400
D. Transporter's Phone 261-7236

7. Transporter 2 Company Name
8. US EPA ID Number
E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Service
Griffith In 46319
10. US EPA ID Number: I N D 0 1 6 3 6 0 2 6 5
G. State Facility's ID
H. Facility's Phone 312 768 3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a. Spent Trichlor O R M - A Liquid U N XXXX 1710	3 4	d m	1 7 0 0	1	F001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION. I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

GENERATOR

Printed/Typed Name: Scott Rayfield — Signature — Month / Day / Year

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials — Date

Printed/Typed Name: Ray Zak — Signature — Month / Day / Year

18. Transporter 2 Acknowledgement of Receipt of Materials — Date

Printed/Typed Name — Signature — Month / Day / Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted item 19

Printed/Typed Name — Signature — Month / Day / Year

IN 089253

EPA Form 8700-22A (Rev. 11-85) UHWM 2/LP2

GENERATOR DETACH AND RETAIN THIS COPY

012210

Division of Land Pollution Control - Manifest
Indiana State Board of Health
P.O. Box 7035
Indianapolis, IN 46207-7035

DO NOT WRITE IN THIS SPACE

Please print or type. (Form designed for use on elite (12-pitch) typewriter)

Form Approved OMB No. 2000 0404 Expires 7 31 86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of	Information in the shaded areas is not required by Federal law
ILD005116165		1	

3. Generator's Name
Wisconsin Tool
9521 W Ainslie Schiller Park Il 60176

4. Generator's Phone (312 678 7573

A. State Manifest Document Number: IN 089282

B. State Generator's ID:

5. Transporter 1 Company Name: H Roskin

6. US EPA ID Number: ILD045695715

C. State Transporter's ID: 1400

D. Transporter's Phone: 261 7256

7. Transporter 2 Company Name:

8. US EPA ID Number:

E. State Transporter's ID:

F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Service
Griffith In 46319

10. US EPA ID Number: IND016360562

G. State Facility's ID: 9180890002

H. Facility's Phone: (312) 768 3400

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
GENERATOR a.	Trichlor O R M-A UN 1710	20	dm	1000	gal	F001
b.						
c.						
d.						

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

Printed/Typed Name	Signature	Month	Day	Year

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials — Date

Printed/Typed Name	Signature	Month	Day	Year

18. Transporter 2 Acknowledgement of Receipt of Materials — Date

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.

Printed/Typed Name	Signature	Month	Day	Year
HARRY F Lebrecht		04	24	89

EPA Form 8700-22A (Rev. 11-85) UHWM 2/LP2

T.S.D. DETACH AND RETAIN THIS COPY

24-113-TS3 B
4-204RTS3 B

IN 089282

012211

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE *(Form designed for use on elite (12-pitch) typewriter.)* *Form Approved. OMB No. 2050-0039. Expires 9-30-91*

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: I L D 0 0 5 1 1 6 1 8 5 | Manifest Document No.: 0 1 1 9 0
2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

GENERATOR

3. Generator's Name and Mailing Address
Wisconsin Tool 9521 W Ainslie
Schiller Park IL 60176
4. Generator's Phone (312) 6787573

A. State Manifest Document Number: INA 0322687
B. State Generator's ID:

5. Transporter 1 Company Name: H Roskin
6. Use EPA ID Number: I L D 0 4 5 6 9 5 7 1 5
C. State Transporter's ID: 1400
D. Transporter's Phone: 3123769343

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Service
Griffith IN 46319
10. Use EPA ID Number: I N D 0 1 6 3 6 0 5 6 2
G. State Facility's ID: 9180890002
H. Facility's Phone: 3127683400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. Trichlorethylene ORM-A UN1710	60	DM	3000	Gal	F001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: [illegible] D/L | Signature: | Date: Month / Day / Year

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: | Signature: | Date: Month / Day / Year

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: | Signature: | Date: Month / Day / Year

FACILITY

19. Discrepancy Indication Space
27-1 RCT63 2/6
33-1 RCT63 2/6

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: STEVE KULAVICK | Signature: Steve Kulavick | Date: Month 07 Day 29 Year 90

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA0322687

0018129

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE *(Form designed for use on elite (12-pitch) typewriter.)* *Form Approved. OMB No. 2050-0039. Expires 9-30-91*

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: ILD 0051161 65 — Manifest Document No.: 02 12 0
2. Page 1 of 1

Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Wisconsin Tool 9521 W Ainslie
Schiller Park IL 60176

4. Generator's Phone (708) 678 7573

A. State Manifest Document Number: INA 0322693

B. State Generator's ID:

5. Transporter 1 Company Name: H Roskin

6. Use EPA ID Number: ILD045695715

C. State Transporter's ID: 1400

D. Transporter's Phone: 3123769343

7. Transporter 2 Company Name:

8. Use EPA ID Number:

E. State Transporter's ID:

F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Service
Griffith IN 46319

10. Use EPA ID Number: IND016360562

G. State Facility's ID: 9180890002

H. Facility's Phone: 3127683400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. Trichlorethylene ORM-A UN1710 RQ	28	DM	1400	Gal	F001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: [illegible] Signature: [illegible] Month: [illegible] Day: [illegible] Year: [illegible]

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: [illegible] Signature: [illegible] Month: [illegible] Day: [illegible] Year: [illegible]

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name: Signature: Month: Day: Year:

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.

Printed/Typed Name: Harold F Schmidt Signature: [illegible] Month: [illegible] Day: [illegible] Year: [illegible]

GENERATOR / TRANSPORTER / FACILITY

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0322693

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY

1 BJCT63 2/20

0018130

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: I.L.D.0.0.5.1.1.6.1.6.5
Manifest Document No.:
2. Page 1 of 1
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Wisconsin Tool & Stamping
9521 W Ainslie, Schiller Park, Il. 60176
4. Generator's Phone (312) 678 7573

A. State Manifest Document Number: INA 0205872
B. State Generator's ID:

5. Transporter 1 Company Name: H. Roskin Motor Service
6. Use EPA ID Number: I.L.D.0.4.5.6.9.5.7.1.5
C. State Transporter's ID: 1400
D. Transporter's Phone: 376 9343

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Service
Griffith, In. 46319
10. Use EPA ID Number: I.N.D.0.1.6.3.6.0.5.6.2
G. State Facility's ID: 9180890002
H. Facility's Phone: 312 768 3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. Trichlor ORM-A UN 1710	37 ~~2.0~~	DM	18 ~~1.0.0.0~~	GAL	F001
b.			1850		
c.					
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Everett Davis
Signature: [signature]
Date: Month 2 Day 16 Year 88

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Date: Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: Mark W Cossiot
Signature: Mark W Cossiot
Date: Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: Harold F. [illegible]
Signature: [signature]
Month Day Year

GENERATOR / TRANSPORTER / FACILITY

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0205872

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865 37-1127 7-63 3/9/88

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

0015060

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: I L D 0 0 5 1 1 6 1 6 5
Manifest Document No.: 0 0 1 8 9
2. Page 1: 1 of 1
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Wisconsin Tool & Stamping 9521 Ainslie
Schiller Park IL 60176
4. Generator's Phone (312) 678 7573

A. State Manifest Document Number: INA 0249476
B. State Generator's ID:
C. State Transporter's ID: 1400
D. Transporter's Phone: 3123769343
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID: 9180890002
H. Facility's Phone: 312 768 3400

5. Transporter 1 Company Name: H. Roskin Motor Service
6. Use EPA ID Number: I L D 0 4 5 5 0 5 7 1 5
7. Transporter 2 Company Name:
8. Use EPA ID Number:
9. Designated Facility Name and Site Address: American Chemical Service Griffith IN 46319
10. Use EPA ID Number: I N D 0 1 6 3 6 0 5 6 2

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. Trichlor ORM-A UN 1710	~~35~~ 39	DM	1750	Gal	F001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Signature: Date Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: EVERETT DAVIS Signature: Date Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: CHUCK VALENTINE Signature: Date Month Day Year

19. Discrepancy Indication Space
1-12OCT63 3/2

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: [signature] Signature: [signature] Month Day Year 12/12/89

GENERATOR / TRANSPORTER / FACILITY

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0249476

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

37-1AT T63 1/27/89
1-20AT T63 3/1
0016508

WISC TOOL

MOORE SPEEDISET 228

SIGNATURE AND INFORMATION *MUST* BE LEGIBLE ON ALL COPIES

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE *(Form designed for use on elite (12-pitch) typewriter.)* *Form Approved. OMB No. 2050-0039. Expires 9-30-88*

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: I·L·D·0·0·5·1·1·6·1·6·5
Manifest Document No.:
2. Page 1 of
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Wisconsin Tool & Stamping
9521 W Ainslie Schiller Park Il 60176

4. Generator's Phone (312) 678 7573

A. State Manifest Document Number: INA 0205919
B. State Generator's ID:

5. Transporter 1 Company Name: H Roskin Motor Service
6. Use EPA ID Number: I·L·D·0·4·5·6·9·5·7·1·5
C. State Transporter's ID: 1400
D. Transporter's Phone: 1400

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Service
Griffith In 46319

10. Use EPA ID Number: I·N·D·0·1·6·3·6·0·5·6·2
G. State Facility's ID: 9180890002
H. Facility's Phone: 312 768 3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. Trichlor ORM-A UN 1710	~~50~~ 53	DM	2500	Gal	F001
b.					
c.					
d.					

THEY TOOK THE BLUE COPY

J. Additional Descriptions for Materials:
K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information:

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: EVERETT DAVIS
Signature: [signature]
Date: Month 9 Day 6 Year 88

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: CHUCK VALENTINE
Signature: [signature]
Date: Month 9 Day 6 Year 88

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Date: Month Day Year

19. Discrepancy Indication Space
120KT63 9/27A

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: Alvin Whitaker
Signature: [signature]
Date: Month 9 Day 6 Year 88

GENERATOR / TRANSPORTER / FACILITY

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0205919

001[illegible]

0181550

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

WASTE GENERATOR

Authorization Number ____

WRICO PACKAGING DIV. OF WM. WRIGLEY JR CO. (Company Name) — 3617 S ASHLAND AVE. (Address) — 0316000380 G (Generator Number)

CHICAGO (City) — ILL (State) — 60609 (Zip) — IDL 005 120498

WASTE HAULER(S)

(1) MR FRANK (Hauler Name) — 201 W. 155th ST. (Hauler Address) — S.W.H. Registration Number 0079019

SO. HOLLAND, IL. — ILD 069506160

(2) ____ (Hauler Name) — ____ (Hauler Address) — S.W.H. Registration Number ____

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERV. (Facility Name) — 420 S. COLFAX (Address) — 91808902 (Site Number)

GRIFFITH (City) — IND. (State) — 46319 (Zip) — IND. 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: INK SOLVENTS — WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: INK SOLVENTS UN 1993

HAZARD CLASS: FLAMMABLE

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 8-12-83 — Carl A. Cabi / P.G.M. (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 004500 (47–52) — 1 GALLONS (Circle One) 2 CU. YDS. ____ (53)

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER ____ (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) — DATE 08/12/83 (54–59)

(2) ____ (Authorized Signature) — DATE ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED

____ (Authorized Signature) — DATE 8/12/83 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: ____

IN ILLINOIS: 217 / 782 3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424 8802

DISTRIBUTION: PART 1 GENERATOR — PART 2 IEPA — PART 3 SITE — PART 4 HAULER — PART 5 IEPA — PART 6 GENERATOR

SITE COPY - PART 3

TO 122K T-63 GRM 8-12-83

005586

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0181557
1 7

Authorization Number OUT OF STATE (8–13)

WRICO PACKAGING
DIV: WM. WRIGLEY JR. CO (Company Name) — 3617 S. ASHLAND AVE (Address)
CHICAGO (City) — IL (State) — 60609 (Zip)
0216000380 G (14–24) Generator Number
ILD 005120498

WASTE HAULER(S)

(1) MR FRANK (Hauler Name) — 801 W. 155TH ST (Hauler Address)
S.W.H. Registration Number 0079069 (25–31)
ILD 069506061

(2) _____ (Hauler Name) — _____ (Hauler Address)
S.W.H. Registration Number _____ (32–38)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICES (Facility Name) — 420 S. COLFAX (Address)
9180890 02 (39–46) Site Number
GRIFFITH (City) — IND (State) — 46319 (Zip)
ILD 064506460

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: INK SOLVENT, N.O.S.
WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW.

SHIPPING DESCRIPTION: INK SOLVENTS
HAZARD CLASS: FLAMMABLE [redacted]
NA 1993

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 4-6-83 — Carol A Cali (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 00450 (47–52) — (1) GALLONS / 2 CU. YDS. (Circle One) — 1 (53)

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER _____ (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) Donald W. Burk (Authorized Signature) — DATE 04/06/83 (54–59)

(2) _____ (Authorized Signature) — DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

[signature] (Authorized Signature) — DATE 4683 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS 1215 gm 115 gm

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART 1 GENERATOR — PART 2 IEPA — PART 3 SITE — PART 4 HAULER — PART 5 IEPA — PART 6 GENERATOR

SITE COPY - PART 3

To 118K T-63 GPM 4.6.83

005573

STATE OF ILL...

TO BE COMPLETED BY WASTE GENERATOR

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0418100

Authorization Number 997371

Wm WRIGLEY JR. CO (Company Name) | 3617 S. ASHLAND (Address) | (312)5234040 (Phone Number) | 0316000380 (Generator Number)

City | State | Zip | IDL005120498 (EPA Number)

WASTE HAULER(S)

MR. FRANK (Hauler Name) | 201 W. 155TH ST. (Hauler Address) | SO HOLLAND ILL | S.W.H. Registration Number 0079021

5963377(312) (Phone Number) | ILD069506160 (EPA Number)

Hauler Name | Hauler Address | S.W.H. Registration Number

312-5963377 (Phone Number) | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERV. (Facility Name) | 420 S COLFAX (Address) | 918089 02 (Site Number)

GRIFFITH (City) | IND. (State) | 46319 (Zip) | (312)7683400 (Phone Number) | IND016360265 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: INK SOLVENTS | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: INK SOLVENTS | HAZARD CLASS: FLAMMABLE | UN1173 (UN or NA Number) | F003 (EPA HW Number)

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 005500 (47–52) | 1 GALLONS (Circle One) 2 CU. YDS. 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS _____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION: Carl A Cal (Authorized Signature) | DATE 5-7-81

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) David H Brett (Authorized Signature) | DATE 05/07/81 (54–59)

(2) _____ (Authorized Signature) | DATE __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[signature] (Authorized Signature) | DATE 5 7 81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO WEST AGIT T-50 5/7/81 JTM

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV # 3

SITE COPY - PART 3

001924

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0367633

Authorization Number OUT OF STATE

Wm WRIGLEY JR. CO	3617 S. ASHLAND	
(Company Name)	Address	
CHICAGO	IL	60609
City	State	Zip

~~0316000380~~ G
Generator Number 0316000380G

WASTE HAULER(S) 312-596-3377

MR. FRANK	201 W. 155TH ST S. HOLLAND IL	S.W.H. Registration Number 0079003
Hauler Name	Hauler Address	
		ILD069506160
Hauler Name	Hauler Address	S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE 312-768-3400

AMERICAN CHEMICAL SERV	420 S. COLFAX		91808902
(Facility Name)	Address		Site Number
GRIFFITH	IND	46319	IND016360265
City	State	Zip	

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: INK SOLVENT

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: F003

SHIPPING DESCRIPTION:	HAZARD CLASS:
INK SOLVENTS	FLAMMABLE
	UN 1993

WEIGHT FOR D.O.T. USE ~~LBS~~ TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 003000

Q GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 12-1-82. Carl A. Calvi (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) DATE: 12/01/82

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[signature] (Authorized Signature) DATE: 12/1/82

COMMENTS OR SPECIAL INSTRUCTIONS: #29 = 10" out pumped to IAK = 9" out
2750 gals.

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-88

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

TO IAK T-63 GRM 12-1-82

SITE COPY - PART 3

003620

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0367634
1 7

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 000000 (8-13)

WM. WRIGLEY JR. CO (Company Name) | 3417 S. ASHLAND AVE (Address) | OUT OF STATE DISPOSAL

CHICAGO (City) | ILL (State) | 60609 (Zip)

03160000380 G (14-24 Generator Number)

ILD 005120498

WASTE HAULER(S)

MR. FRANK (Hauler Name) | 201 W. 155TH ST. (Hauler Address) | S.W.H. Registration Number 0079018 (25-31)

FED# ILD 049506160

Hauler Name | Hauler Address | S.W.H. Registration Number (32-38)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICES (Facility Name) | 420 S. COLFAX (Address) | 91808902 (39-46 Site Number)

GRIFFITH (City) | IN. (State) | Zip | FED. ID.# IND077042E

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: INK SOLVENTS N.O.S. | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

UN 1993

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	WEIGHT FOR D.D.T. USE
INK SOLVENTS	FLAMMABLE	36,000 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000 (47-52)

1 GALLONS (Circle One)
2 CU. YDS. 1 (53)

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 1-21-83 | Carl A Coil (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) Robert Perkins (Authorized Signature) DATE 01/21/83 (54-59)

(2) (Authorized Signature) DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 1/21/83 (60-65)

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

To 118K T-63 6AM 1-21-83

SITE COPY - PART 3

005574

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. IND 082 706 196 | Manifest Document No. 220-02 | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
WOLVERINE GASKET & MFG
1500 W. PLEASANT
HILLSDALE, IN 46231

4. Generator's Phone (517) 849-8200

A. State Manifest Document Number: INA 0214064

B. State Generator's ID

5. Transporter 1 Company Name: DILLON BROTHERS | 6. Use EPA ID Number: IND 980 612 [illegible] | C. State Transporter's ID | D. Transporter's Phone 812 256 2411

7. Transporter 2 Company Name | 8. Use EPA ID Number | E. State Transporter's ID | F. Transporter's Phone

9. Designated Facility Name and Site Address
AMERICAN ULTRAMAFICS INC.
420 COLFAX
GRIFFITH, IN 46319 | 10. Use EPA ID Number: IND 063 102 213 | G. State Facility's ID | H. Facility's Phone

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE FLAMMABLE LIQUID NOS (FLAMMABLE LIQUID NOS)	20	DM	1100	G	D001
b. WASTE FLAMMABLE LIQUID NOS (FLAMMABLE LIQUID NOS) 1993	1	DM	220	G	F003
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name	Signature	Date Month	Day	Year
TERRY TED WHITAKER		10	17	88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year
LARRY CLAY		10	17	88

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year

FACILITY

19. Discrepancy Indication Space
1B-MARINE SHALE 8/8/89 914152

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.

Printed/Typed Name	Signature	Month	Day	Year
A. WHITAKER		10	17	88

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0214064

EPA Form 8700-22 (Rev. 9-86) Previous editions are obsolete. State Form 11865

DISTRIBUTION
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

20A-204TCTSD 10/6 1B-204TCTSD 10/17 1B MARINE SHALE 10/21/88 20K13

0015053

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: MI-D-0-8-2-7-6-1-9-6-6 — Manifest Document No.: 8-8-0-0-9
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

A. State Manifest Document Number: INA 0214072

3. Generator's Name and Mailing Address: WOLVERINE GASKET [illegible] [illegible] [illegible]

4. Generator's Phone: [illegible]

B. State Generator's ID:

5. Transporter 1 Company Name: DELANY [illegible]
6. Use EPA ID Number: MI-D-0-5-6-[illegible]-2
C. State Transporter's ID:
D. Transporter's Phone: [illegible]

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address: [illegible] SVC [illegible] [illegible] [illegible] INDIANA
10. Use EPA ID Number: [illegible]
G. State Facility's ID:
H. Facility's Phone:

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE FLAMMABLE LIQUID NOS FLAMMABLE LIQUID UN1993	20	DM	11.00	G	D001
b. WASTE FLAMMABLE LIQUID NOS FLAMMABLE LIQUID UN1993	.18	DM	99.0	G	D003
c.					
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable International and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: [illegible] — Signature: [illegible] — Month: 10 Day: 15 Year: 88

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: LARRY CLAY — Signature: Larry Clay — Month: 10 Day: 15 Year: 88

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: — Signature: — Month: Day: Year:

19. Discrepancy Indication Space
20A PAILS (120 GAL) ASH GROVE 12/5/88 90101
12B PAILS (72 GAL) ASH GROVE 3/15/89 90102

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: A. WHITAKER — Signature: [illegible] Whitaker — Month: 10 Day: 19 Year: 88

GENERATOR / TRANSPORTER / FACILITY

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0214072

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

12B-210K T50 10/19 (258 GAL) 5B-210K T50 10/20 18A (980g) 210K T50 10/20

0015054

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.
IND 080 706 196	5700		

GENERATOR

3. Generator's Name and Mailing Address
WOLVERINE GASKET CO.
1601 J. PLASSANT
WOLVERINE, MICHIGAN

A. State Manifest Document Number: INA 0214059
B. State Generator's ID:

4. Generator's Phone ( ) 219-224-3220

5. Transporter 1 Company Name: DRAKE TRUCKING
6. Use EPA ID Number: IND 056 082 872
C. State Transporter's ID:
D. Transporter's Phone: 312 962 3220

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
ENVIRONMENTAL SYSTEMS INC
400 COLFAX
GRIFFITH, INDIANA
10. Use EPA ID Number: IND 1.E.3.0.2.6.5
G. State Facility's ID:
H. Facility's Phone: 219 924 4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE FLAMMABLE LIQUID, N.O.S. (CONTAINS FLAMMABLE LIQUID WASTE)	55	DM	330.25	G	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
LADED AREAS IS REQUIRED BY INDIANA STATE LAW

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name	Signature	Month	Day	Year
T. W. TROUTFELDT	[signature]	1	0	88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
LARRY CLAY	[signature]	1	10	88

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Larry CLAY	[signature]	1	10	88

FACILITY

19. Discrepancy Indication Space
55 REJECTED - MATERIAL DOES NOT MATCH PRESHIPMENT SAMPLE

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.

Printed/Typed Name	Signature	Month	Day	Year
D WHITAKER	[signature]	1	2	88

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0214059

0015055

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: MID 0827 6 1966 — Manifest Document No.: 8 8 0 1 1
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address: WOLVERINE GASKET CORP. [illegible]
4. Generator's Phone (317) 841-8200
5. Transporter 1 Company Name: DELVIN BROTHERS
6. Use EPA ID Number: MID 0 5 6 9 8 8 8 9 2
7. Transporter 2 Company Name:
8. Use EPA ID Number:
9. Designated Facility Name and Site Address: AMERICAN CHEMICAL SVC 420 COLFAX GRIFFITH, INDIANA
10. Use EPA ID Number: IND 0 1 6 3 6 0 2 4 5

A. State Manifest Document Number: INA 0214073
B. State Generator's ID:
C. State Transporter's ID:
D. Transporter's Phone: 317-962-3224
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID:
H. Facility's Phone:

11. US DDT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	L Waste No.
a. WASTE FLAMMABLE LIQUID NOS FLAMMABLE LIQUID UN1993	1	DM	770	G	F003
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above:
K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information:

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable International and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: John Tolly/Pulski — Signature: [signature] — Date: Month 11 Day 02 Year 88

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: LARRY CLAY — Signature: Larry Clay — Date: Month 11 Day 08 Year 88

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: — Signature: — Date: Month Day Year

19. Discrepancy Indication Space:

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: WHITAKER A — Signature: [signature] — Date: Month 11 Day 18 Year 88

GENERATOR / TRANSPORTER / FACILITY

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0214073

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

12-204TCT50 11/9
2 MARINE STATE 8/16/89 9/16 hrs

0015052

INDIANA DEPARTMENT DF ENVIRDNMENTAL MANAGEMENT
OFFICE OF SDLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.
MIDC8761761	88012		

GENERATOR

3. Generator's Name and Mailing Address: WOLVERINE GASKET INC.

A. State Manifest Document Number: INA 0214074

B. State Generator's ID:

4. Generator's Phone ( ):

5. Transporter 1 Company Name: 6. Use EPA ID Number:

C. State Transporter's ID:

D. Transporter's Phone: 962-3234

7. Transporter 2 Company Name: 8. Use EPA ID Number:

E. State Transporter's ID:

F. Transporter's Phone:

9. Designated Facility Name and Site Address: 10. Use EPA ID Number:

G. State Facility's ID:

H. Facility's Phone: 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. [illegible]	14	DM	770	P	F003
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above:

K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name	Signature	Month	Day	Year
[illegible]	[illegible]	12	14	84

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Larry Clay	Larry Clay	12	14	85

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

19. Discrepancy Indication Space: 13-204 ATSO 12/15 MARINE SNAIL 8/8/89 9/14/52

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.

Printed/Typed Name	Signature	Month	Day	Year
Whitaker A	[illegible]	12	14	85

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATDR
PAGE 2 (goldenrod) GENERATDR MAIL TD GENERATDR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) DUT DF STATE GENERATOR/TSD MAIL TD IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0214074

015051

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: [illegible] Manifest Document No.: [illegible]
2. Page 1 of 1
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address: WOLVERINE GASKET [illegible]
4. Generator's Phone: (317) 241-2200

A. State Manifest Document Number: INA 0326567
B. State Generator's ID:
C. State Transporter's ID:
D. Transporter's Phone:
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID:
H. Facility's Phone:

5. Transporter 1 Company Name: DRURY [illegible]
6. Use EPA ID Number: [illegible]
7. Transporter 2 Company Name:
8. Use EPA ID Number:
9. Designated Facility Name and Site Address: AMERICAN CHEMICAL SERVICE, 420 COLFAX, GRIFFITH, INDIANA
10. Use EPA ID Number: [illegible]

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE FLAMMABLE LIQUID [illegible]	032	DM	1760	G	F003
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above:
K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information:

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Signature: Date Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JOHN [illegible] Signature: [illegible] Date Month Day Year: 02 17 89

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: LARRY CLAY Signature: Larry Clay Date Month Day Year: 02 16 89

19. Discrepancy Indication Space:

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted item 19.
Printed/Typed Name: [illegible] Signature: [illegible] Date Month Day Year: 02 17 89

GENERATOR / TRANSPORTER / FACILITY

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA0326567

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

29-204TCT502/20
3-MARINE SHALE 8/8/89 914152

COPY 5. TSD COPY

0016506

Division of Land Pollution Control - Manifest
Indiana State Board of Health
P.O. Box 7035
Indianapolis, IN 46207-7035

DO NOT WRITE IN THIS SPACE

Please print or type. (Form designed for use on elite (12-pitch) typewriter)

Form Approved OMB No. 2000 0404 Expires 7 31 86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: MID082761966
Manifest Document No.: 87001

2. Page 1 of 7

Information in the shaded areas is not required by Federal law

3. Generator's Name: FARMAN AUTOMOTIVE PRODUCTS 1900 W. PLEASANT [illegible] MI 48218

4. Generator's Phone ([illegible]) 841-[illegible]

A. State Manifest Document Number: IN 085557

B. State Generator's ID:

5. Transporter 1 Company Name: DRURY [illegible]

6. US EPA ID Number: MID[illegible]

C. State Transporter's ID:

D. Transporter's Phone:

7. Transporter 2 Company Name:

8. US EPA ID Number:

E. State Transporter's ID:

F. Transporter's Phone: [illegible]

9. Designated Facility Name and Site Address: AMERICAN CHEMICAL INC 420 COLFAX AVE GRIFFITH, INDIANA 46319

10. US EPA ID Number: IN[illegible]

G. State Facility's ID:

H. Facility's Phone:

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. FLAMMABLE LIQUID NOS WASTE FLAMMABLE LIQUID [illegible]	025	DM	1175	G	F003
b. Hazarded Flammable UN 1992					
c.					
d.					

J. Additional Descriptions for Materials Listed Above:

K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information: EMERGENCY SPILL INFORMATION [illegible] MATERIAL INTO METAL CONTAINERS AND PERSONAL CONTACT [illegible] AREA THOROUGHLY

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

Printed/Typed Name: John Tocrylunk
Signature: [signature]
Month Day Year: 02 05 87

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: LARRY CLAY
Signature: [signature]
Date: Month Day Year: 02 05 87

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Date: Month Day Year:

19. Discrepancy Indication Space:

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: [illegible] F Schmidt
Signature: [signature]
Month Day Year: 02 06 87

GENERATOR

TRANSPORTER

FACILITY

IN 085557

EPA Form 8700-22A (Rev 11-85)

T.S.D. DETACH AND RETAIN THIS COPY

013463

Division of Land Pollution Control - Manifest
Indiana State Board of Health
P.O. Box 7035
Indianapolis, IN 46207-7035

DO NOT WRITE IN THIS SPACE

Please print or type. (Form designed for use on elite (12-pitch) typewriter)

Form Approved OMB No. 2000 0404 Expires 7 31 86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. | Manifest Document No.

2. Page 1 of | Information in the shaded areas is not required by Federal law

3. Generator's Name

4. Generator's Phone ( )

A. State Manifest Document Number: IN 085558

B. State Generator's ID

5. Transporter 1 Company Name | 6. US EPA ID Number

C. State Transporter's ID

D. Transporter's Phone 235-6628

7. Transporter 2 Company Name | 8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address | 10. US EPA ID Number

G. State Facility's ID

H. Facility's Phone (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.					
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

GENERATOR

Printed/Typed Name | Signature | Month Day Year

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Larry Clay | Signature | Date: Month 04 Day 09 Year 87

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted item 19.

Printed/Typed Name: HARRold F. Schmidt | Signature | Month 04 Day 10 Year 87

IN 085558

EPA Form 8700-22A (Rev 11-85)

UHWM 2/LP2

T.S.D. DETACH AND RETAIN THIS COPY

MAR 013464

Division of Land Pollution Control - Manifest
Indiana State Board of Health
P.O. Box 7035
Indianapolis, IN 46207-7035

DO NOT WRITE IN THIS SPACE

Please print or type. (Form designed for use on elite (12-pitch) typewriter)

Form Approved OMB No. 2000 0404 Expires 7 31 86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. | Manifest Document No.

2. Page 1 of 1 | Information in the shaded areas is not required by Federal law

3. Generator's Name

4. Generator's Phone ( )

A. State Manifest Document Number: IN 054754

B. State Generator's ID

5. Transporter 1 Company Name | 6. US EPA ID Number

C. State Transporter's ID

D. Transporter's Phone

7. Transporter 2 Company Name | 8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address | 10. US EPA ID Number

G. State Facility's ID

H. Facility's Phone: 219 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.					
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

Printed/Typed Name: John D Trachsel | Signature | Month 01 | Day 12 | Year 87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Larry Clay | Signature | Date: Month 01 | Day 12 | Year 87

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Date: Month | Day | Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.

Printed/Typed Name: Harold F. Schmidt | Signature | Month 01 | Day 19 | Year 87

IN 054754

EPA Form 8700-22A (Rev. 11-85)

30 - 2072 - 7-00 9/1/87 WA

F.S.D. DETACH AND RETAIN THIS COPY

013465

OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. IND 006 276 194 | Manifest Document No. 013466

2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
FRANKLIN AUTOMOTIVE PRODUCTS
1960 W. PLEASANT
FRANKLIN, IN 46131

A. State Manifest Document Number: INA 0130807

4. Generator's Phone (317) 881-5000

B. State Generator's ID

5. Transporter 1 Company Name: DRURY MATTHEWS | 6. Use EPA ID Number: IND 056 728 892

C. State Transporter's ID

D. Transporter's Phone 317 398 2611

7. Transporter 2 Company Name | 8. Use EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SVC.
420 COLFAX AVE
GARY, IN 46406 | 10. Use EPA ID Number: IND 016 360 261

G. State Facility's ID

H. Facility's Phone

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE FLAMMABLE LIQUID NOS FLAMMABLE LIQUID UN 1993	2	DM	1595	G	F003
b. X RQ FLAMMABLE FLAMMABLE UN 1993					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: JOHN D. TOOMBS | Signature | Date: Month 10 Day 26 Year 87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: LARRY CLAY | Signature | Date: Month 10 Day 27 Year 87

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

013466

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: HAROLD F. SCHMIDT | Signature | Date: Month 10 Day 28 Year 87

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0130807

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865 12-204E T-50 10/23/87 jm
16-204E T-50 10/29/87 jm
1-204E T-50 10/30/87 jm

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: MID082761966 — Manifest Document No.: 7003
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address: FABRICON AUTOMOTIVE PRODUCTS, 1900 W. PLEASANT, RIVER ROUGE, MI 48218
4. Generator's Phone (313) 241-5000

A. State Manifest Document Number: INA 0130803
B. State Generator's ID:
C. State Transporter's ID:
D. Transporter's Phone: 517-288-2112
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID:
H. Facility's Phone: 219-924-4370

5. Transporter 1 Company Name: DRURY BROTHERS
6. Use EPA ID Number: MID056988892
7. Transporter 2 Company Name:
8. Use EPA ID Number:
9. Designated Facility Name and Site Address: AMERICAN CHEMICAL SVC, 420 COLFAX AVE, GRIFFITH, INDIANA
10. Use EPA ID Number: IND016360265

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE FLAMMABLE LIQUID NOS FLAMMABLE LIQUID UN 1993	024	DM	01320	G	F003
b. * PLACARDED FLAMMABLE UN 1993					
c.					
d.					

J. Additional Descriptions for Materials Listed Above:
K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information:

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: JOHN TOCZYLOWSKI — Signature: [signature] — Date: Month 05 Day 27 Year 87

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: [illegible] — Signature: [signature] — Date: Month 5 Day 8 Year 87

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: — Signature: — Date: Month Day Year

19. Discrepancy Indication Space

013467

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: Harrison F. Schmidt — Signature: [signature] — Date: Month 05 Day 29 Year 87

GENERATOR / TRANSPORTER / FACILITY

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0130803

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

MRK

24-204K T50 B

OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MID 0827 61966 — Manifest Document No. 87009

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address: FABRICON AUTOMOTIVE PRODUCTS, 1900 W. MCLEAN ST, RIVER ROUGE, MI 48218

4. Generator's Phone (313) 841-8200

A. State Manifest Document Number: INA 0130804

B. State Generator's ID

5. Transporter 1 Company Name: DRURY BROTHERS

6. Use EPA ID Number: MID 056 98 4892

C. State Transporter's ID

D. Transporter's Phone: 517 288-2611

7. Transporter 2 Company Name

8. Use EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address: AMERICAN CHEMICAL SVC, 420 COLFAX AVE, GRIFFITH, INDIANA

10. Use EPA ID Number: IVD 016360265

G. State Facility's ID

H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	Waste No.
a. WASTE FLAMMABLE LIQUID NOS FLAMMABLE LIQUID UN 1993	030	DM	01650	G	F003
b. * PLACARDED FLAMMABLE UN1993					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: JOHN D. Toczylowski — Signature: [signature] — Date: Month 07 Day 01 Year 87

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: LARRY CLAY — Signature: [signature] — Date: Month 07 Day 01 Year 87

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Date: Month Day Year

19. Discrepancy Indication Space

013468

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.

Printed/Typed Name: HARRY F. Schmidt — Signature: [signature] — Date: Month 07 Day 01 Year 87

GENERATOR / TRANSPORTER / FACILITY

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0130804

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

MRK

29-204R TSD B

1 MARING SNALE 12/71
78525

OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. IND 082276 1964	Manifest Document No. 00115	2. Page 1 of 1	Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.
3. Generator's Name and Mailing Address AMERICAN AUTOMOTIVE PRODUCTS 1600 W. PLEASANT RUN HOBART, IN 46342		A. State Manifest Document Number INA 0117615	
4. Generator's Phone (219) 942-0000		B. State Generator's ID	
5. Transporter 1 Company Name MURPHY OIL PRODUCTS	6. US EPA ID Number IND 056 [illegible]	C. State Transporter's ID	
7. Transporter 2 Company Name	8. US EPA ID Number	D. Transporter's Phone 219-322-2412	
9. Designated Facility Name and Site Address ROMACO ENVIRONMENTAL SVC 400 E. COLUMBIA AVE GRIFFITH, INDIANA	10. US EPA ID Number IND 016360265	E. State Transporter's ID	
		F. Transporter's Phone	
		G. State Facility's ID	
		H. Facility's Phone	

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE FLAMMABLE LIQUID NOS FLAMMABLE LIQUID UN1993	30	DM	1650	G	F003
b. * RQ WASTE FLAMMABLE LIQUID NOS FLAMMABLE LIQUID UN1993					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: SPECIAL WASTE AGENCY APPROVAL #IN-0117615 (if applicable)

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name	Signature	Month	Day	Year
[illegible]	[signature]	08	04	87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
LARRY CLAY	[signature]	08	04	87

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

19. Discrepancy Indication Space 16-7

013469

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.

Printed/Typed Name	Signature	Month	Day	Year
JAMES MURPHY	[signature]	08	04	87

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0117615

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

29-204R-T50B
1 MARINE SHALE 12/7/87 78525

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. IND.0.8.2.6.7.8.9.6 | Manifest Document No. 8.2.9.0.8 | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
AMERICAN AUTO PRODUCTS
1100 W. PLEASANT JAMESTOWN IN

A. State Manifest Document Number INA 0130808

B. State Generator's ID

4. Generator's Phone (317) 241-8201

5. Transporter 1 Company Name: DAVE BAILEY

6. Use EPA ID Number: IND.0.5.6.7.8.9.2

C. State Transporter's ID

D. Transporter's Phone 219.288.2611

7. Transporter 2 Company Name

8. Use EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SVC
420 COLFAX
GRIFFITH INDIANA

10. Use EPA ID Number: IND.0.0.7.6.3.6.0.2.6.5.7

G. State Facility's ID

H. Facility's Phone

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE FLAMMABLE LIQUID FLAMMABLE LIQUID NOS UN1993	33	DM	1760	G	F003
b.					
c. ¥ REDEMIXED FLAMMABLE UN1993					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR

Printed/Typed Name: H.D. TEMPLEWSKI | Signature | Date: Month 01 Day 25 Year 89

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: LARRY CLAY | Signature | Date: Month 01 Day 25 Year 89

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted item 19.

Printed/Typed Name: HAROLD F SCHMIDT | Signature | Date: Month 01 Day 25 Year 89

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0130808

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

2 - 204π T-50 1/12/88
3 - 204π T-50 1/12/88
23 DRUMS (163 GAL) ACTUAL GROSS 1/12/88 - 4W265222

#MARINE GRADE (SEA TOTE) 1152 GAL - 204π T-50 1/12/88

014868

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MID082761966 | Manifest Document No. 50001 | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address: FABRICON AUTOMOTIVE PRODUCTS, 1900 W. PLEASANT RIVER ROUGE, MI 48218
4. Generator's Phone (313) 841-8200

A. State Manifest Document Number: INA 0160180
B. State Generator's ID:
C. State Transporter's ID:
D. Transporter's Phone: 517 288 2611
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID:
H. Facility's Phone:

5. Transporter 1 Company Name: DRURY BROTHERS
6. Use EPA ID Number: MID056788892
7. Transporter 2 Company Name:
8. Use EPA ID Number:
9. Designated Facility Name and Site Address: AMERICAN CHEMICAL SVC, 420 COLFAX AVE, GRIFFITH, INDIANA
10. Use EPA ID Number: IND016360265

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE FLAMMABLE LIQUID NOS FLAMMABLE LIQUID UN 1993	27	DM	1485	G	F003
b. PLACARDED FLAMMABLE UN1993					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: JOHN D. TOCZYLOWSKI | Signature: [signature] | Month 02 | Day 15 | Year 88

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: LARRY CLAY | Signature: [signature] | Month 02 | Day 15 | Year 88

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: | Signature: | Month | Day | Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: HARROLD F. SCHMIDT | Signature: [signature] | Month 02 | Day 15 | Year 88

GENERATOR / TRANSPORTER / FACILITY

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424 8802 or 202/426-2675.

INA 0160180

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865 27-2048 T-50 2/17/88

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

014864

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. IND 082714964 — Manifest Document No.
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
FARICIA AUTOMOTIVE PRODUCTS
1700 W. SPRING ST
MUNCIE, IN 47302
4. Generator's Phone (317) 741-2260

A. State Manifest Document Number: INA 0214076
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone: 317 288 2611

5. Transporter 1 Company Name: DELPHI SERVICES — 6. Use EPA ID Number: INED 056 788 893
7. Transporter 2 Company Name — 8. Use EPA ID Number
E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SVC
400 CALUMET
GRIFFITH, INDIANA — 10. Use EPA ID Number: IND 016 302 455
G. State Facility's ID
H. Facility's Phone

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE FLAMMABLE LIQUID NOS, FLAMMABLE LIQUID UN 1993	29	DM	1595	G	D001
b. X PROHIBITED FLAMMABLE WASTE					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR — Printed/Typed Name: JOHN D TOCZYLOWSKI — Signature — Date: Month 03 Day 29 Year 88

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials — Printed/Typed Name: Larry Clay — Signature — Date: Month 03 Day 29 Year 88
18. Transporter 2 Acknowledgement of Receipt of Materials — Printed/Typed Name — Signature — Date: Month . Day . Year .

FACILITY
19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: Harold F Schmidt — Signature — Date: Month 03 Day 29 Year 88

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0214076

EPA Form 8700-22 (Rev. 9-86) Previous editions are obsolete. State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

2-M204TC 3/20/91
1-M204TC 3/20/91
MAILING SIMLS 10/21/88 204/93

U14866

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MID082761966 | Manifest Document No. 2003 | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
FAMICON AUTOMOTIVE PRODUCTS
INC CO PLANT #1
[illegible] 111J
4. Generator's Phone ( ) 841-6200

A. State Manifest Document Number: INA 0214902
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone 219-285-2611

5. Transporter 1 Company Name: DILUNY CLOTHING | 6. Use EPA ID Number: MID056988892
7. Transporter 2 Company Name | 8. Use EPA ID Number
E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SVC
420 COLFAX
GRIFFITH INDIANA
10. Use EPA ID Number: IND016361245
G. State Facility's ID
H. Facility's Phone

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE FLAMMABLE LIQUID NOS FLAMMABLE LIQUID UN1993	005	DM	0.1.925	G	F003
b. * FLAMMABLE FLAMMABLE UN1993					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR — Printed/Typed Name: John D. Tomlinson | Signature | Date: Month 05 Day 04 Year 89

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: LARRY CLAY | Signature | Date: Month 05 Day 09 Year 89
18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Date: Month Day Year

FACILITY
19. Discrepancy Indication Space
34 PAILS (204 GAL) - ASH GROVE 11/15/88 AR265282
4 DR (222 GAL) - MARINE SHALE 1/18/89 901098
2 DR (110 GAL) - MARINE SHALE 12/13/88 78526
204 K - 1320
204 K - 42
MARINE SHALE - 27
PAILS - 204
MARINE SHALE 110+222
1926
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.
Printed/Typed Name: HAROLD F SCHMIDT | Signature | Date: Month 05 Day 09 Year 89

EPA Form 8700-22 (Rev. 9-86) Previous editions are obsolete.
State Form 11065

DISTRIBUTION: PAGE 1 (white) TSD MAIL TO GENERATOR; PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE; PAGE 3 (light green) TSD MAIL TO TSD STATE; PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM; PAGE 5 (light blue) TSD COPY; PAGE 6 (canary) GENERATOR COPY; PAGE 7 (white) TRANSPORTER 1 COPY; PAGE 8 (white) TRANSPORTER 2 COPY

19-204K TSD 5/10/89
1320 GAL 5-204K TSD 5/11/89 27 GAL MARINE SHALE 12/21/88 [illegible]
1(42 GAL 204K [illegible]

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0214902

014864

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: MID.082761966 — Manifest Document No.: 88-0041

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address: FABRICON AUTOMOTIVE PRODUCTS, 1900 W. PLEASANT RIVER HOUSE MI 48219

4. Generator's Phone (313) 841-8200

A. State Manifest Document Number: INA 0214903

B. State Generator's ID:

5. Transporter 1 Company Name: DRURY TRUTHERS

6. Use EPA ID Number: MID.056.788892

C. State Transporter's ID:

D. Transporter's Phone: 517-208-2611

7. Transporter 2 Company Name:

8. Use EPA ID Number:

E. State Transporter's ID:

F. Transporter's Phone:

9. Designated Facility Name and Site Address: AMERICAN CHEMICAL SVC, 420 COLFAX, GRIFFITH, INDIANA

10. Use EPA ID Number: IND.016.36.0215

G. State Facility's ID:

H. Facility's Phone:

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE FLAMMABLE LIQUID NOS FLAMMABLE LIQUID UN1993	0.78	DM	1540	G	F003
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: JOHN TOCZYLOWSKI — Signature: [signature] — Date: Month 07 Day 18 Year 88

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: LARRY CLAY — Signature: [signature] — Date: Month 07 Day 18 Year 88

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name: — Signature: — Date: Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.

Printed/Typed Name: FRANK PRICE — Signature: Frank Price — Date: Month 7 Day 18 Year 88

GENERATOR — TRANSPORTER — FACILITY

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0214903

EPA Form 8700-22 (Rev. 9-86) Previous editions are obsolete. State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

2E 2047C VSD 7/13
3 MARINE STREET 10/21/88 804073

014865

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.D. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: MID082761966 — Manifest Document No.: 88005
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address: FABRICON AUTOMOTIVE PRODUCTS, 1900 W. PLEASANT, RIVER ROUGE, MI 48218
4. Generator's Phone (313) 841-8200

A. State Manifest Document Number: INA 0214904
B. State Generator's ID:
C. State Transporter's ID:
D. Transporter's Phone: 517-288-2611
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID:
H. Facility's Phone:

5. Transporter 1 Company Name: DRURY BROTHERS
6. Use EPA ID Number: MID056988892
7. Transporter 2 Company Name:
8. Use EPA ID Number:
9. Designated Facility Name and Site Address: AMERICAN CHEMICAL SVC, 420 COLFAX, GRIFFITH, INDIANA
10. Use EPA ID Number: IND016210265

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE FLAMMABLE LIQUID NOS FLAMMABLE LIQUID UN1993	40	DM	2200	G	F003
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above:
K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information
204R - 2036
PAILS - 108
MARINE - 56
2200

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: John Stanylewski — Signature: [signature] — Date: Month 09 Day 07 Year 88

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: LARRY CLAY — Signature: [signature] — Date: Month 09 Day 07 Year 88

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: — Signature: — Date: Month Day Year

19. Discrepancy Indication Space
9 PAILS (54 GALS) ASH GROVE 11/15/88 - AR265282
9 PAILS (54 GAL) ASH GROVE 8/15/89 90103
1 - MARINE SHALE 8/8/89 - 914152
1 GAL 204R TSD 8/15/89
1 GAL MARINE SHALE 10/21/88 204093

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: FRANK PRICE — Signature: Frank Price — Month 9 Day 7 Year 88

GENERATOR / TRANSPORTER / FACILITY

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0214904

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

29-204R TSD 9/8/89 6-204R TSD 11/8/89 2-204R TSD 11/8/89

014870

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MID082766966 | Manifest Document No. 88-1-302
2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
FABRICON AUTOMOTIVE PRODUCTS
1900 W. PLEASANT
RIVER ROUGE, MI 48218
4. Generator's Phone (313) 841-8200

A. State Manifest Document Number: INA 0214905
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone 317-288-2644
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone

5. Transporter 1 Company Name: DRURY BROTHERS
6. Use EPA ID Number: MID056788923
7. Transporter 2 Company Name
8. Use EPA ID Number
9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SVC
420 COLFAX
GRIFFITH, INDIANA
10. Use EPA ID Number: IND010426265

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE FLAMMABLE LIQUID, NOS, FLAMMABLE LIQUID, UN1993	50	DM	2750	G	F003
b.					
c.					
d. ACCEPTED	0.43	Dm	02365	G	F003

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
1(7GAL) 204E T50 12/1/88
8 PAILS (48GAL) ASH GROVE 12/5/88 9010

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR — Printed/Typed Name: JOHN JOLLY (WEST) | Signature | Date Month 09 Day 13 Year 88

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials — Printed/Typed Name: LARRY CLAY | Signature | Date Month 09 Day 13 Year 88
18. Transporter 2 Acknowledgement of Receipt of Materials — Printed/Typed Name: LARRY CLAY | Signature | Date Month 09 Day 13 Year 88

FACILITY
19. Discrepancy Indication Space
REJECTED 1 DRUMS - MAT'L DOES NOT MATCH PRESHIPMENT SAMPLE
5 PAILS (30 GAL) - ASH GROVE - 11/15/88 - AR265282
2 (7GAL) - 204E T50 12/2/88
204E - 1430 GAL
204Z - 715
MAINE SN - 45
DAC - 30
INV - 55
204Z - 70

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: STEVE KULAVICK | Signature | Date Month 09 Day 13 Year 88

EPA Form 8700-22 (Rev. 9-86) Previous editions are obsolete.
State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

(1450) 26-204E T50 9/14/88 (3) (715 GAL) 204Z T50 9/14/88 65 GALS

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0214905

01466

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: MID082761966 — Manifest Document No.: 88C07
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address: WOLVERINE GASKET & MFG, 1900 W. PLEASANT, VIOLA HOUSE, MI 48[illegible]
4. Generator's Phone: (317) 241-3200
A. State Manifest Document Number: INA 0214906
B. State Generator's ID:
5. Transporter 1 Company Name: DAVAY BROTHERS
6. Use EPA ID Number: MID056988892
C. State Transporter's ID:
D. Transporter's Phone: 317-282-2611
7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:
9. Designated Facility Name and Site Address: AMERICAN CHEMICAL SVC, 420 COLFAX, GRIFFITH, INDIANA
10. Use EPA ID Number: IND01636026[illegible]
G. State Facility's ID:
H. Facility's Phone:

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE FLAMMABLE LIQUID NOS FLAMMABLE LIQUID UN1993	53	D.M.	29.15	G	F003
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: John Tomylinski — Signature: [signature] — Date: Month 09 Day 19 Year 88

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: LARRY CLAY — Signature: Larry Clay — Date: Month 09 Day 19 Year 88

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: — Signature: — Date: Month Day Year

19. Discrepancy Indication Space
14 (PAILS) 84 GAL ASH GROVE 12/5/88 90101
8 PAILS (48 GAL) ASH GROVE 3/15/89 90102

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: ALVIN WHITAKER — Signature: Alvin Whitaker — Date: Month 09 Day 19 Year 88

GENERATOR / TRANSPORTER / FACILITY

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0214906

EPA Form 8700-22 (Rev. 9-86) Previous editions are obsolete. State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

1(26 GAL) 204 TK T50 12/1/88
47-204 TK T50 9/20/89
2-204 TK T50 12/21/88
2(62 GAL) 204 TK T50 3/1/89

0015056

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. M·I·D·9·9·6·0·2·0·0·6·8
Manifest Document No. 1
2. Page 1 of 1
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Wolverine Printing Company
315 Grandville Avenue, SW Grand Rapids, MI 49503
4. Generator's Phone (616) 451-2075

A. State Manifest Document Number INA 0157789
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone
E. State Transporter's ID
F. Transporter's Phone

5. Transporter 1 Company Name: Haviland Products Co.
6. Use EPA ID Number: M·E·D·0·0·6·0·2·8·4·9·1
7. Transporter 2 Company Name
8. Use EPA ID Number

9. Designated Facility Name and Site Address
American Chemical Service Co.
420 S. Colfax
Griffith, IN 46319
10. Use EPA ID Number: I·N·D·0·0·1·6·3·6·0·2·6·5
G. State Facility's ID
H. Facility's Phone (219) 924-6370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. Waste Ink Thinner Flammable Liquid UN-1993	9	DM	495	G	F-003
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: Also D-001
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
Keep away from sparks and Flames. No Smoking.
Clean up any spills.

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR

Printed/Typed Name	Signature	Month	Day	Year
Robert O. Braniff	Robert O. Braniff	07	13	88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Bill Pepantoni	Bill Pepantoni	07	13	88

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.

Printed/Typed Name	Signature	Month	Day	Year
John S. Mirda	John S. Mirda	07	13	88

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0157789

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

204KT50 7/13A

015050

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE *(Form designed for use on elite (12-pitch) typewriter.)* *Form Approved. OMB No. 2050-0039. Expires 9-30-88*

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: I.N.D.0.0.6.0.2.0.0.6.9 | Manifest Document No.: 1 | 2. Page 1 of 8 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
WOLVERINE PRINTING COMPANY
315 GRANDVILLE AVE., S.W. - GRAND RAPIDS, MI 49503
4. Generator's Phone (616) 451-2075

A. State Manifest Document Number: INA 0248847
B. State Generator's ID:
C. State Transporter's ID:
D. Transporter's Phone: 616-361-6691
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID:
H. Facility's Phone: (219)924-4370

5. Transporter 1 Company Name: HAVILAND PRODUCTS COMPANY | 6. Use EPA ID Number: M.I.D.0.0.6.0.2.8.4.9.5
7. Transporter 2 Company Name | 8. Use EPA ID Number
9. Designated Facility Name and Site Address: AMERICAN CHEMICAL SERVICE COMPANY, 420 S. COLFAX, GRIFFITH, IN 46319 | 10. Use EPA ID Number: I.N.0.0.1.6.3.6.0.2.6.3

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE INK THINNER FLAMMABLE LIQUID UN-1993	5	D,M	250	G	F-003
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: ALSO D-001
K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information
KEEP AWAY FROM SPARKS AND FLAMES. NO SMOKING.
CLEAN UP ANY SPILLS.

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR — Printed/Typed Name: ROBERT O. BRANIFF | Signature: Robert O Braniff | Month 10 | Day 20 | Year 89

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials — Printed/Typed Name: STEVE RYSKO | Signature: Steve Rysko | Month 10 | Day 24 | Year 89
18. Transporter 2 Acknowledgement of Receipt of Materials — Printed/Typed Name | Signature | Month | Day | Year

FACILITY
19. Discrepancy Indication Space
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19. — Printed/Typed Name: Whitaker A | Signature: A Whitaker | Month 10 | Day 31 | Year 89

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0248847

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

0016505

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: NEP000000052 — Manifest Document No.: 0 0 0 0 1
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Wood Specialties
12510 No. 108th St.; Omaha, NE. 68142
4. Generator's Phone (402-571-2405

A. State Manifest Document Number: INA 0230216
B. State Generator's ID: N/A

5. Transporter 1 Company Name: Watts Trucking Service, Inc. — 6. Use EPA ID Number: I L D 0 4 5 3 7 6 1 0 0
C. State Transporter's ID: 0 2 2 5
D. Transporter's Phone: 309-788-3421

7. Transporter 2 Company Name — 8. Use EPA ID Number
E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Services
420 So. Colfax Ave.
Griffith, IN. 46319
10. Use EPA ID Number: I N D 0 1 6 3 6 0 2 6 5
G. State Facility's ID
H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. "RQ" Waste Flammable Liquid, N.O.S.(DO 01) Flammable Liquid UN1993	001	D M	00055	GALS	D 0 0 1
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name	Signature	Month	Day	Year
James L. Barsell	James L. Barsell	04	26	88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Paul Myers	Paul Myers	04	26	88

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name	Signature	Month	Day	Year
Harold F Schmidt	Harold F Schmidt	05	02	88

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0230216

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

204 ET 5/16

0015057

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE *(Form designed for use on elite (12-pitch) typewriter.)* *Form Approved. OMB No. 2050-0039. Expires 9-30-91*

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: ILD005258785 — Manifest Document No.: 15202
2. Page 1 of 1

Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address: WOOD LAWN ENGINEERING, 325 FAY, ADDISON, IL 60101 — ATTN. GENE SKUMMER
4. Generator's Phone (312) 543-3550

A. State Manifest Document Number: INA 0315202
B. State Generator's ID: ILL-0430055049

5. Transporter 1 Company Name: PRECISION ENERGY SYSTEMS
6. Use EPA ID Number: ILD982208084
C. State Transporter's ID: 1505
D. Transporter's Phone: 312-916-1661

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address: AMERICAN CHEMICAL SERVICES, 420 S. COLFAX, GRIFFITH, IND 46319
10. Use EPA ID Number: IND016360265
G. State Facility's ID: 9180890002
H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE ORM A, N.O.S, ORM-A NA1693 F001	001	DM	00055	G	F001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: PERCHLOROETHYLENE
K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information:

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: GENE SKUMMER — Signature: [signature] — Date: Month 12 Day 01 Year 88

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: MIKE WILK — Signature: [signature] — Date: Month 12 Day 01 Year 88

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: — Signature: — Date: Month Day Year

19. Discrepancy Indication Space:

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19
Printed/Typed Name: [illegible] — Signature: [illegible] — Date: Month 12 Day 06 Year 88

GENERATOR — TRANSPORTER — FACILITY

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA0315202

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY

120 TCT 63 1/27

0015058

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: I.L.D.9.8.2.6.2.8.8.0.2 | Manifest Document No.: [illegible] | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
WOODMAC INDUSTRIES, INC.
3233 HOLEMAN AVENUE SOUTH CHICAGO HEIGHTS, IL. 60411
4. Generator's Phone (708) 755-3545

A. State Manifest Document Number: INA 0397417
B. State Generator's ID: 0312945016

5. Transporter 1 Company Name: MR. FRANK, INC.
6. Use EPA ID Number: I.L.D.9.8.4.7.7.5.0.4.9
C. State Transporter's ID: 0079
D. Transporter's Phone: (708) 720-0700

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICES
COLFAX AVE. @ C&I R.R.
GRIFFITH, IN. 46319
10. Use EPA ID Number: I.N.D.0.1.6.3.6.0.2.6.5
G. State Facility's ID: 91X0270002
H. Facility's Phone: (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. RQ, WASTE FLAMMABLE LIQUID N.O.S., FLAMMABLE LIQUID, UN1993 ALIPHATIC NAPTHA, MINERAL SPIRITS	008	D.M	4.4.0	1	F003
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR — Printed/Typed Name: JAMES R. ANDERSON | Signature: [signature] | Date: Month 05 Day 23 Year 90

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: RON DRINKWATER | Signature: [signature] | Date: Month 05 Day 23 Year 90
18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: | Signature: | Date: Month . Day . Year .

FACILITY
19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19
Printed/Typed Name: WHITAKER H | Signature: [signature] | Date: Month 5 Day 24 Year 90

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY

2047550545 (20)

0018128

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0397417

STATE OF ILLINOIS ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0610

LPC 62 8/81

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) EPA Form 8700-22 (3-84) Form Approved. OMB No. 2000-0404 Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. # APPLIED FOR | Manifest Document No. | 2. Page 1 of | Information in the shaded areas is not required by Federal law, but is required by Illinois law.

3. Generator's Name and Mailing Address
WOODWORK INT'L INC.
471 Lively Boulevard
Elk Grove Village, IL 60007

4. Generator's Phone (312) 593-6110

A. Illinois Manifest Document Number: IL 1520813

B. Illinois Generator's ID: I L 0 3 1 4 4 0 5 2 0 3

5. Transporter 1 Company Name: LANDGREBE MOTOR TRANSIT
6. US EPA ID Number: IND009842824

C. Illinois Transporter's ID: 1 8 7 5

D. Transporter's Phone

7. Transporter 2 Company Name
8. US EPA ID Number

E. Illinois Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
420 S. Colfax Avenue
Griffith, IN 46319

10. US EPA ID Number: IND016360265

G. Illinois Facility's ID: 9 1 8 0 8 9 0 0 0 2

H. Facility's Phone: 219 924-4370

GENERATOR

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	X FLAMMABLE LIQUID N.O.S. IRRITABLE UN-1993	4	DM	200		EPA HW Number D001 / Authorization Number
b.						EPA HW Number / Authorization Number
c.						EPA HW Number / Authorization Number
d.						EPA HW Number / Authorization Number

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above In Item #14
1 = Gallons 2 = Cubic Yards

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and Illinois regulations.

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

Printed/Typed Name: IRENE KLEIN | Signature: Irene Klein | Date Month Day Year: 10 27 86

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Fred L. Koselke | Signature: Fred L Koselke | Date Month Day Year: 10 27 86

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Date Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name: HAROLD F. Schmidt | Signature: Harold F. Schmidt | Date Month Day Year: 10 29 86

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV #6

GENERATOR COPY – PART 1 - DO NOT REMOVE PART 1 FROM SET UNTIL COMPLETED.

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½ Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

204 R TSO

STATE OF ILLINOIS ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0610
LPC 62 8/81

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) EPA Form 8700-22 (3-84) Form Approved. OMB No. 2000-0404 Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's EPS EPA ID No. | Manifest Document No. | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but is required by Illinois law.

3. Generator's Name and Mailing Address
WOODWORK INT'L INC.
471 Lively Boulevard
Elk Grove Village, IL 60007

4. Generator's Phone (312) 593-6110

A. Illinois Manifest Document Number: IL 1520812

B. Illinois Generator's ID: 0 3 1 4 4 0 5 2 0 3

5. Transporter 1 Company Name: LANDGREBE MOTOR TRANSIT
6. US EPA ID Number: IND009842824
C. Illinois Transporter's ID: 1 8 7 5
D. Transporter's Phone

7. Transporter 2 Company Name
8. US EPA ID Number
E. Illinois Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
420 S. Colfax Avenue
Griffith, IN 46319
10. US EPA ID Number: IND016360265
G. Illinois Facility's ID: 9 1 8 0 8 9 0 0 0 2
H. Facility's Phone: 219 924-4370

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. FAAMMABLE LIQUID N.O.S. INNITABLE UN-1993	X	2	DM	110	1	EPA HW Number D001 / Authorization Number
b.						EPA HW Number / Authorization Number
c.						EPA HW Number / Authorization Number
d.						EPA HW Number / Authorization Number

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above In Item #14
1 = Gallons 2 = Cubic Yards

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and Illinois regulations.

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

Printed/Typed Name: Alan T. Koeppel | Signature | Date: Month 4 Day 15 Year 86

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Fred L. Koselke | Signature: Fred L. Koselke | Date: Month 4 Day 15 Year 86

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name: [illegible] | Signature | Date: Month 4 Day 16 Year 86

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV #6

GENERATOR COPY – PART 1 - DO NOT REMOVE PART 1 FROM SET UNTIL COMPLETED.

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983 Chapter 111½ Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center

FACILITY COPY - PART 3

204 F 1609

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I L D 0 6 4 4 1 9 6 0 9 — Manifest Document No.

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
WOODWORK INTERNATIONAL, INC.
471 Lively Boulevard
Elk Grove Village, IL 60007

A. State Manifest Document Number: INA 0125503

4. Generator's Phone (312) 593-6110

5. Transporter 1 Company Name: LANDCREEK MOTOR TRANSIT

6. Use EPA ID Number: I N D 0 0 8 4 2 8 4 2 4

C. State Transporter's ID:

D. Transporter's Phone: (219)462-4181

7. Transporter 2 Company Name

8. Use EPA ID Number

E. State Transporter's ID: ICC2980

F. Transporter's Phone

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
420 S. Colfax Ave.
Griffith, IN 46319

10. Use EPA ID Number: I N D 0 1 6 3 6 0 2 6 3

G. State Facility's ID

H. Facility's Phone: (219)924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	Waste No.
a. FLAMMABLE LIQUID N.O.S. IGNITABLE, UN-1993	0 0 4	DM	0 0 2 0 0	GAL	
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name	Signature	Month	Day	Year

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name	Signature	Month	Day	Year

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0125503

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

MRIC
4-204K T50 B

012213

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE *(Form designed for use on elite (12-pitch) typewriter.)* *Form Approved. OMB No. 2050-0039. Expires 9-30-88*

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I L D 0 6 4 4 1 9 6 0 9 — Manifest Document No.
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
WOODWORK INTERNATIONAL, INC.
970 NICHOLAS BLVD.
ELK GROVE VILLAGE, IL 60007

A. State Manifest Document Number: INA 0125505

B. State Generator's ID

4. Generator's Phone (312) 593-6110

5. Transporter 1 Company Name: LANDGREBE MOTOR TRANSIT
6. Use EPA ID Number: I N D 0 0 9 8 4 2 8 2 4
C. State Transporter's ID
D. Transporter's Phone (219) 462-4181

7. Transporter 2 Company Name
8. Use EPA ID Number
E. State Transporter's ID ICC2980
F. Transporter's Phone

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
420 S. COLFAX AVENUE
GRIFFITH, IN 46319
10. Use EPA ID Number: I N D 0 1 6 3 6 0 2 6 5
G. State Facility's ID
H. Facility's Phone (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. X FLAMMABLE LIQUID N.O.S. IGNITABLE UN-1993	0 0 2	D M	0 0 1 1 0	G	D001
b. 1875					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR — Printed/Typed Name: CATHY R. BUSTAMANTE — Signature — Date: Month 0 1 Day 2 8 Year 8 8

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials — Printed/Typed Name: FRED KOSELKE — Signature — Date: Month 0 1 Day 2 9 Year 8 8
18. Transporter 2 Acknowledgement of Receipt of Materials — Printed/Typed Name — Signature — Date: Month . Day . Year .

FACILITY
19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: HAROLD F. SCHMIDT — Signature — Date: Month 0 1 Day 3 0 Year 8 8

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0125505

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865 2-1268 T-63 1/21/88

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

015048

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. ILD064419609 | Manifest Document No. | 2. Page 1 of | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address: WOODSTORK INTERNATIONAL, INC. 970 NICHOLAS BLVD. ELK GROVE VILLAGE, IL 60007

A. State Manifest Document Number: INA 0125506

4. Generator's Phone (312) 593-6110

B. State Generator's ID

5. Transporter 1 Company Name: LANDGREBE MOTOR TRANSPORT | 6. Use EPA ID Number: IND009842828 | C. State Transporter's ID | D. Transporter's Phone (219) 462-4181

7. Transporter 2 Company Name | 8. Use EPA ID Number | E. State Transporter's PCC2980 | F. Transporter's Phone

9. Designated Facility Name and Site Address: AMERICAN CHEMICAL SERVICE 420 S. COLFAX AVE. GRIFFITH, INDIANA 46319 | 10. Use EPA ID Number: IND016360226 | G. State Facility's ID | H. Facility's Phone

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. X FLAMMABLE LIQUID' N.O.B. IGNITABLE UN-1993	002	DM	00110	G	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above | K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: DEBRA ANDERSON | Signature | Date: Month 11 Day 01 Year 88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: DENNY STOLLINGS | Signature | Date: Month 11 Day 04 Year 88

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.

Printed/Typed Name: WHAKER A | Signature | Month 11 Day 7 Year 88

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0125506

EPA Form 8700-22 (Rev. 9-86) Previous editions are obsolete.
State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

015049

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I L D 0 6 4 4 1 9 6 0 9 | Manifest Document No. | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
WOODWORK INTERNATIONAL, INC
970 NICHOLAS BLVD.
ELK GROVE VILLAGE, IL 60007

A. State Manifest Document Number: INA 0125501

4. Generator's Phone (312) 593-6110

B. State Generator's ID

5. Transporter 1 Company Name

6. Use EPA ID Number

C. State Transporter's ID

D. Transporter's Phone (219) 462-4181

7. Transporter 2 Company Name

8. Use EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
429 COFAX AVE.
GRIFFITH, IN 46319

10. Use EPA ID Number I N D 0 1 6 3 6 0 2 6 5

G. State Facility's ID

H. Facility's Phone (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I Waste No.
a. X FLAMMABLE LIQUID N.O.S. IGNITABLE UN-1993	0 0 4	D M	0 0 2 2 0	G	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR

Printed/Typed Name	Signature	Date Month	Day	Year
Dean A. Anderson		02	13	87

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year
FRED Koselke	Fred Koselke	02	13	87

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year
		.	.	.

TRANSPORTER

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.

Printed/Typed Name	Signature	Date Month	Day	Year
W. Mitakos A		02	14	87

FACILITY

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0125501

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

DISTRIBUTION: 2/16

PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

2047CTSD

0016504

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I L D 0 6 4 4 1 9 6 0 9 | Manifest Document No. 0 0 0 1 | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
WOODWORK INTERNATIONAL, INC.
970 NICHOLAS BLVD.; ELK GROVE, IL 60007-2513

A. State Manifest Document Number: INA 0125508

4. Generator's Phone (708) 593-6110

B. State Generator's ID

5. Transporter 1 Company Name: LANDGREBE MOTOR TRANSIT
6. Use EPA ID Number: I N D 0 0 9 8 4 2 8 2 4
C. State Transporter's ID: 1875
D. Transporter's Phone: 219/462-4181

7. Transporter 2 Company Name
8. Use EPA ID Number
E. State Transporter's ID: ICC 2980
F. Transporter's Phone

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
420 S. COLFAX AVE.
GRIFFITH, IN 46319
10. Use EPA ID Number: I N D 0 6 3 6 0 2 6 5
G. State Facility's ID
H. Facility's Phone: 219/924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	L Waste No.
a. X FLAMMABLE LIQUID N.O.S. IGNITABLE UN-1993	0 0 9	D M	0 0 4 9 5	GAL.	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR — Printed/Typed Name: C.R. BUSTAMANTE | Signature | Date Month 0 4 Day 0 6 Year 9 0

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: LANDGrebe Fred Koepke | Signature: Landgrebe Fred Koepke | Date Month 0 4 Day 0 6 Year 9 0
18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Date Month . Day . Year .

FACILITY
19. Discrepancy Indication Space
5-204RTSO 4/17
3-204RTSO 4/17
1 - MARINE SHALE 5/8/90 915940

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: WHITAKER A | Signature | Month . Day . Year .

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0125508

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

001812

DNR
MICHIGAN DEPARTMENT OF NATURAL RESOURCES

DO NOT WRITE IN THIS SPACE
ATT. ☐ DIS. ☐ REJ. ☐

Required under authority of Act 64, P.A. 1979, as amended and Act 136, P.A. 1969.

Failure to file is punishable under section 299.548 MCL or Section 10 of Act 136, P.A. 1969.

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved OMB No 2000-0404 Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: MIG000006990 — Manifest Document No.: 26708
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Worden Manufacturing
200 E. 17th St., Holland, MI 49423

4. Generator's Phone (616) 392-7091

A. State Manifest Document Number: MI 0626708
B. State Generator's ID:

5. Transporter 1 Company Name: ValleyCityRefuseDisposal,Inc.
6. US EPA ID Number: MID055855373
C. State Transporter's ID:
D. Transporter's Phone: (616) 538-8499

7. Transporter 2 Company Name:
8. US EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Services, Inc.
420 S. ~~Griffith~~ Colfax
Griffith, IN 46319

10. US EPA ID Number: IND016360265
G. State Facility's ID:
H. Facility's Phone: (219) 924-4370

11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER).	HM		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.	N/H
a.	H	Waste Paint Related Material Flammable Liquid NA1263	4	DR	220	G	D001	H
b.								
c.								
d.								

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, including applicable state regulations.

Printed/Typed Name: Jack Krause — Signature: Jack Krause — Date (Month Day Year): 07 03 85

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Arnold Dykstra — Signature: Arnold Dykstra — Date (Month Day Year): 07 03 85

18. Transporter 2 Acknowledgement or Receipt of Materials
Printed/Typed Name: — Signature: — Date (Month Day Year):

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Harold F Schmidt — Signature: Harold F Schmidt — Date (Month Day Year): 07 03 85

GENERATOR — TRANSPORTER — FACILITY

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOURS PER DAY.

EPA Form 8700-22 (3-84)

TSDF COPY

PR 5110 Rev. 7/84

204 E T-50

009175

DNR

MICHIGAN DEPARTMENT OF NATURAL RESOURCES

DO NOT WRITE IN THIS SPACE
ATT. ☐ DIS. ☐ REJ. ☐

Required under authority of Act 64, P.A. 1979, as amended and Act 136, P.A. 1969.

Failure to file is punishable under section 299.548 MCL or Section 10 of Act 136, P.A. 1969.

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2000-0404 Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MIG0000069902 Manifest Document No. 26733

2. Page 1 of 1

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
WORDEN MANUFACTURING
200 E. 17TH STREET, HOLLAND, MI 49423

4. Generator's Phone (616) 392-7091

A. State Manifest Document Number MI 0626733

B. State Generator's ID

5. Transporter 1 Company Name: VALLEY CITY REFUSE DISPOSAL, INC.

6. US EPA ID Number: MID055855373

C. State Transporter's ID

D. Transporter's Phone (616) 538-8499

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICES, INC.
420 S. COLFAX, P.O. Box 190
GRIFFITH, IN 46319

10. US EPA ID Number: IND016360265

G. State Facility's ID

H. Facility's Phone (219) 924-4370

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER). HM		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.	N/H
a.	X	WASTE PAINT RELATED MATERIAL FLAMMABLE LIQUID UN1263	5	DM	1	G	D001	H
b.								
c.								
d.								

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, including applicable state regulations.

GENERATOR

Printed/Typed Name	Signature	Date (Month Day Year)
Jack Krause	Jack Krause	1/21/85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)
Roger Norton	Roger Norton	1/21/85

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name	Signature	Date (Month Day Year)
FRANK PRICE	Frank Price	1/22/85

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOURS PER DAY.

EPA Form 8700-22 (3-84)

TSDF COPY 20 ET-50

PR 5110 Rev. 7/84

009176

DNR
MICHIGAN DEPARTMENT OF NATURAL RESOURCES

DO NOT WRITE IN THIS SPACE
ATT. ☐ DIS. ☐ REJ. ☐

Required under authority of Act 64, P.A. 1979, as amended and Act 136, P.A. 1969.

Failure to file is punishable under section 299.548 MCL or Section 10 of Act 136, P.A. 1969.

Please print or type.

Form Approved OMB No. 2000-0404 Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: MIG000006990 — Manifest Document No.: 028618
2. Page 1 of 1

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
WORDEN MANUFACTURING
200 E. 17th Street, Holland, MI 49423

4. Generator's Phone (616) 392-7091

A. State Manifest Document Number: MI 0828618
B. State Generator's ID: [redacted]

5. Transporter 1 Company Name: VALLEY CITY REFUSE DISPOSAL, INC.
6. US EPA ID Number: MID055855373

C. State Transporter's ID: [redacted]
D. Transporter's Phone: (616) 538-8499

7. Transporter 2 Company Name:
8. US EPA ID Number:

E. State Transporter's ID: [redacted]
F. Transporter's Phone: [redacted]

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE, INC.
420 S. Colfax, P.O. Box 190
Griffith, IN 46319

10. US EPA ID Number: IND016360265

G. State Facility's ID: [redacted]
H. Facility's Phone: (219) 924-4370

11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER). HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.	N/H
a. X WASTE PAINT RELATED MATERIAL Flammable Liquid UN1263	5	DM	275	G	D001	H
b.						
c.						
d.						

[redacted]

K. Handling Codes for Wastes Listed Above: [redacted]
a/ [redacted]
b/ [redacted]
c/ [redacted]
d/ [redacted]

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage or disposal currently available to me which minimizes the present and future threat to human health and the environment.

Printed/Typed Name: Jack Krause — Signature: Jack Krause — Date (Month Day Year): 03 26 86

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Earl W. Coons — Signature: Earl W. Coons — Date (Month Day Year): 03 26 86

18. Transporter 2 Acknowledgement or Receipt of Materials
Printed/Typed Name: — Signature: — Date (Month Day Year):

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: FRANK PRICE — Signature: Frank Price — Date (Month Day Year): 3 26 86

GENERATOR — TRANSPORTER — FACILITY

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOURS PER DAY.

EPA Form 8700-22 (Rev. 4-85)

PR 5110 Rev. 4/85

TSDF COPY 204 E TSO 011607

DNR

MICHIGAN DEPARTMENT OF NATURAL RESOURCES

DO NOT WRITE IN THIS SPACE
ATT. ☐ DIS. ☐ REJ. ☐

Required under authority of Act 64, P.A. 1979, as amended and Act 136, P.A. 1969.

Failure to file is punishable under section 299.548 MCL or Section 10 of Act 136, P.A. 1969.

Please print or type.

Form Approved. OMB No. 2000-0404 Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. / Manifest Document No.: MIG0000069902375 7

2. Page 1 of 1

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
WORDEN MANUFACTURING
200 E. 17th Street; Holland, MI 49423

4. Generator's Phone (616) 392-7091

A. State Manifest Document Number: MI 0923757

B. State Generator's ID:

5. Transporter 1 Company Name: VALLEY CITY REFUSE DISPOSAL, INC.

6. US EPA ID Number: MID055855373

C. State Transporter's ID:

D. Transporter's Phone: (616) 538-2499

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID:

F. Transporter's Phone:

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE, INC.
420 S. Colfax; P.O. Box 190
Griffith, IN 46319-0190

10. US EPA ID Number: IND016360265

G. State Facility's ID:

H. Facility's Phone:

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
GENERATOR a.	X WASTE PAINT RELATED MATERIAL (Ignitabel) Flammable Liquid UN1263	2	DM	110	G
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above: a/ b/ c/ d/

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage or disposal currently available to me which minimizes the present and future threat to human health and the environment.

Printed/Typed Name	Signature	Date (Month Day Year)
Jack Krause	Jack Krause	09 25 87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)
JIM REITSMA	Jim Reitsma	09 25 87

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name	Signature	Date (Month Day Year)
HAROLD F. SCHMIDT	Harold F. Schmidt	09 25 87

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOURS PER DAY.

EPA Form 8700-22 (Rev. 4-85)

TSDF COPY

MRIL 2-204T T50 13

PR 5110 Rev. 2/2/86

012211

...NA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
...OF SOLID AND HAZARDOUS WASTE MANAGEMENT
...7035
...apolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. [illegible] Manifest Document No. 59130
2. Page 1 of 1
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
WORDEN MANUFACTURING
200 E. 17th St. Holland, MI 49423

A. State Manifest Document Number INA 0159130

4. Generator's Phone (616) 392-7091

B. State Generator's ID

5. Transporter 1 Company Name VALLEY CITY REFUSE DISPOSAL, INC.
6. Use EPA ID Number MID981956063

C. State Transporter's ID
D. Transporter's Phone (616) 235-1500

7. Transporter 2 Company Name
8. Use EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Service
420 S. Colfax, P.O. Box 190
Griffith, IN 46319-0190

10. Use EPA ID Number IND016360265

G. State Facility's ID
H. Facility's Phone (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	Waste No.
a. WASTE PAINT RELATED MATERIAL (Ignitible) Flammable Liquid UN1263	10	DM	550	G	[illegible]
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Jack Krause
Signature: Jack Krause
Date: Month 09 Day 15 Year 87

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Roger Norton
Signature: Roger Norton
Date: Month 09 Day 15 Year 87

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: Milton Popa
Signature: Milton Popa
Month 9 Day 15 Year 87

GENERATOR

TRANSPORTER

FACILITY

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424 8802 or 202/426-2675.

INA 0159130

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865 10-126R-T-63 9/12/87

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

012212

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: M I D 0 0 6 0 1 2 1 3 2
Manifest Document No.: 8 9 4 2 9
2. Page 1 of 1
Information in the shaded areas is not required by Federal law, but Items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
WORDEN MANUFACTURING
200 E. 17th St., Holland, MI 49423
4. Generator's Phone (616) 392-7091

A. State Manifest Document Number: INA 0189429
B. State Generator's ID:

5. Transporter 1 Company Name: VALLEY CITY REFUSE DISPOSAL, INC.
6. Use EPA ID Number: M I D 9 8 1 9 5 6 0 6 3
C. State Transporter's ID:
D. Transporter's Phone: (616) 235-1500

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Service
420 S. Colfax, P.O. Box 190
Griffith, IN 46319-0190
10. Use EPA ID Number: I N D 0 1 6 3 6 0 2 6 5
G. State Facility's ID:
H. Facility's Phone: (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE PAINT RELATED MATERIAL (P005) Flammable Liquid NA1263	4	DM	220	G	P005
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR

Printed/Typed Name: SCOTT SWINEBERT
Signature: Scott Swinebert
Date: Month 6 Day 1 Year 88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Roger Norton
Signature: Roger Norton
Date: Month 6 Day 1 Year 88

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: HARRold F. Schmidt
Signature: Harold F. Schmidt
Date: Month 6 Day 1 Year 88

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0189429

EPA Form 8700-22 (Rev. 9-86) Previous editions are obsolete.
State Form 11865 4-2047 T-50 2/22/88

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

015044

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: M I D 0 0 6 0 1 2 1 3 2
Manifest Document No.: 8 9 4 7 9
2. Page 1 of 1
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
WORDEN MANUFACTURING
200 E. 17th. ST. HOLLAND, MI. 49423

A. State Manifest Document Number: INA 0189479

4. Generator's Phone (616) 392-7091

B. State Generator's ID

5. Transporter 1 Company Name: VALLEY CITY REFUSE DISPOSAL, INC.
6. Use EPA ID Number: M I D 9 8 1 9 5 6 0 6 3
C. State Transporter's ID
D. Transporter's Phone (616) 235-1500

7. Transporter 2 Company Name
8. Use EPA ID Number
E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
420 S. Colfax, P.O. Box 190
Griffith, IN 46319-0190
10. Use EPA ID Number: I N D 0 1 6 3 6 0 2 6 5
G. State Facility's ID
H. Facility's Phone (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE PAINT RELATED MATERIAL (FOOS) FLAMMABLE LIQUID NA1263	003	DM	165T	G	F005
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR

Printed/Typed Name	Signature	Month	Day	Year
Jack Krause	Jack Krause	04	19	91

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Roger Norton	Roger Norton	04	19	88

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name	Signature	Month	Day	Year
Harris Fishman		04	19	91

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

EPA Form 8700-22 (Rev. 9-86) DISTRIBUTION:
Previous editions are obsolete.
State Form 11865 2 - 1 LRTG3 4/20M
1 - 204 TC TSD 4/21 M

PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

INA 0189479

015045

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I.N.D.0.0.6.0.1.2.1.3.2 | Manifest Document No. 3.5.3.6.2 | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
WORDEN MANUFACTURING
200 E. 17th. ST. HOLLAND, MI. 49423

4. Generator's Phone (616) 392-7091

A. State Manifest Document Number INA 0235362

5. Transporter 1 Company Name: VALLEY CITY REFUSE DISPOSAL, INC.
6. Use EPA ID Number: M.I.D.9.8.1.9.5.6.0.6.3
C. State Transporter's ID
D. Transporter's Phone (616) 235-1500

7. Transporter 2 Company Name
8. Use EPA ID Number
E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
420 S. Colfax, P.O. Box 190
Griffith, IN 46319-0190
10. Use EPA ID Number: I.N.D.0.1.6.3.6.0.2.6.5
G. State Facility's ID
H. Facility's Phone (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE PAINT RELATED MATERIAL (FOOS) FLAMMABLE LIQUID NA1263	001	DM	55	G	F005
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR — Printed/Typed Name: Jack Krause | Signature: Jack Krause | Month 5 | Day 26 | Year 88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials — Printed/Typed Name: Roger Morton | Signature: Roger Morton | Month 5 | Day 27 | Year 88

18. Transporter 2 Acknowledgement of Receipt of Materials — Printed/Typed Name | Signature | Month | Day | Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: MILT POPA | Signature: Milt Popa | Month 5 | Day 26 | Year 88

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0235362

EPA Form 8700-22 (Rev. 9-86) Previous editions are obsolete.
State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATDR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

204 KTSD 5/27/88

015046

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. / Manifest Document No.: M I D 0 0 6 0 1 2 1 3 2 4 4 6 2 9

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
WORDEN MANUFACTURING
200 E. 17th. ST. HOLLAND, MI. 49423

4. Generator's Phone (616) 392-7091

A. State Manifest Document Number: INA 0244629

B. State Generator's ID

5. Transporter 1 Company Name: VALLEY CITY REFUSE DISPOSAL, INC.

6. Use EPA ID Number: M I D 9 8 1 9 5 6 0 6 3

C. State Transporter's ID

D. Transporter's Phone: (616) 235-1500

7. Transporter 2 Company Name

8. Use EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
420 S. Colfax, P.O. Box 190
Griffith, IN 46319-0190

10. Use EPA ID Number: I N D 0 1 6 3 6 0 2 6 5

G. State Facility's ID

H. Facility's Phone: (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE PAINT RELATED MATERIAL (FOOS) FLAMMABLE LIQUID NA1263	003	DM	1/1.5	G	FOOS
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: LADED AREAS IS REQUIRED BY INDIANA STATE LAW

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR

Printed/Typed Name: Jack Krause — Signature: Jack Krause — Date: Month 07 Day 07 Year 88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Roger Norton — Signature: Roger Norton — Date: Month 07 Day 07 Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: Allen Whitaker — Signature: Allen Whitaker — Date: Month 7 Day 7 Year 88

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA T 0244629

EPA Form 8700-22 (Rev. 9-86) Previous editions are obsolete. State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

204T507

015047

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE *(Form designed for use on elite (12-pitch) typewriter.)* *Form Approved. OMB No. 2050-0039. Expires 9-30-88*

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.
M I D 0 0 6 0 1 2 1 3 2	4 4 6 6 5		

3. Generator's Name and Mailing Address
HORDEN MANUFACTURING
200 E. 17th.ST. HOLLAND, MI. 49423

4. Generator's Phone (616) 392-7091

A. State Manifest Document Number INA 0244665

B. State Generator's ID

5. Transporter 1 Company Name VALLEY CITY REFUSE DISPOSAL, INC.

6. Use EPA ID Number M I D 9 8 1 9 5 6 0 6 3

C. State Transporter's ID

D. Transporter's Phone (616) 235-1500

7. Transporter 2 Company Name

8. Use EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
420 S. Colfax, P.O. Box 190
Griffith, IN 46319-0190

10. Use EPA ID Number I N D 0 1 6 3 6 0 2 6 5

G. State Facility's ID

H. Facility's Phone (219) 924-4370

11. US DOT Description *(Including Proper Shipping Name, Hazard Class, and ID Number)*	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE PAINT RELATED MATERIAL (FOOS) FLAMMABLE LIQUID NA1263	1	D.M	21	G	FOOS
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name	Signature	Month	Day	Year
JACK KRAUSE	Jack Krause	08	26	88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Roger Nester	Roger Nester	08	26	88

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.

Printed/Typed Name	Signature	Month	Day	Year
ALVIN WHITAKER	Alvin Whitaker	8	26	88

GENERATOR

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0244665

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

204RT50 9/29

015043

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: M.I.D.0.0.6.0.1.2.1.3.2 | Manifest Document No.: 6.5.9.1.7 | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
WORDEN MANFACTURING
200 E. 17th. ST. HOLLAND, MI. 49423
4. Generator's Phone (616) 392-7091

A. State Manifest Document Number: INA 0266917
B. State Generator's ID:

5. Transporter 1 Company Name: VALLEY CITY REFUSE DISPOSAL, INC.
6. Use EPA ID Number: M.I.D.9.8.1.9.5.6.0.6.3
C. State Transporter's ID:
D. Transporter's Phone: (616) 235-1500

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
420 S. Colfax, P.O. Box 190
Griffith, IN 46319-0190
10. Use EPA ID Number: I.N.D.0.1.6.3.6.0.2.6.5
G. State Facility's ID:
H. Facility's Phone: (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE PAINT RELATED MATERIAL (F005) FLAMMABLE LIQUID NA1263	1	DM	55	G	F005
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR

Printed/Typed Name | Signature | Month | Day | Year

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Roger Norton | Signature | Month 11 | Day 2 | Year 88

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: SCOTT DANIELSEK | Signature | Month | Day | Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19
Printed/Typed Name: Whitaker A | Signature | Month 11 | Day 4 | Year 88

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0266917

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY 204KTSD 11/7

015041

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: MID006012132 — Manifest Document No.: 66954
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Worden Manufacturing
200 E 17th St., Holland, MI 49423

4. Generator's Phone (616) 392-7091

A. State Manifest Document Number: INA 0266954
B. State Generator's ID:

5. Transporter 1 Company Name: VALLEY CITY REFUSE DISPOSAL, INC.
6. Use EPA ID Number: MID981956063
C. State Transporter's ID:
D. Transporter's Phone: (616) 235-1500

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
420 S. Colfax, P.O. Box 190
Griffith, IN 46319-0190
10. Use EPA ID Number: IND016360265
G. State Facility's ID:
H. Facility's Phone: (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No
a. Waste Paint Related Material (F005) Flammable Liquid NA1263	5	DM	275	G	F005
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above:
K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information:

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Jack Krause — Signature: Jack Krause — Date: Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Roger Norton — Signature: — Date: Month Day Year 12 [illegible]

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: — Signature: Roger Norton — Date: Month Day Year 12 [illegible]

19. Discrepancy Indication Space:

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: Whitaker A — Signature: A Whitaker — Date: Month Day Year 12 [illegible]

GENERATOR — TRANSPORTER — FACILITY

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0266954

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

4-2043 TSD 12/29/86

COPY 5. TSD COPY 12043 TSD 1/25

015042

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-3(

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. M I D 0 0 6 0 1 2 1 3 2 — Manifest Document No. 6 6 9 9 2
2. Page 1 of 1 — Information in the shaded area: not required by Federal law. Items D, F, H and I are required State law.

3. Generator's Name and Mailing Address
Worden Manufacturing
200 E 17th St, Holland MI 49423
4. Generator's Phone (616) 392-7091

A. State Manifest Document Number: INA 0266992
B. State Generator's ID:

5. Transporter 1 Company Name: VALLEY CITY REFUSE DISPOSAL, INC.
6. Use EPA ID Number: M I D 9 8 1 9 5 6 0 6 3
C. State Transporter's ID:
D. Transporter's Phone: (616) 235-15(

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
420 S. Colfax, P.O. Box 190
Griffith, IN 46319-0190
10. Use EPA ID Number: I N D 0 1 6 3 6 0 2 6 5
G. State Facility's ID:
H. Facility's Phone: (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. Waste Paint Related Material (F005) Falmmable Liquid NA1263	1	D M	25	G	F005
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I ha determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to r which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good fa effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR — Printed/Typed Name: DAVE ANDERSON — Signature: Dave Anderson — Date: Month 12 Day 10 Ye

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jim Crowell II — Signature: — Date: Month Day Ye
18 Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: — Signature: — Date: Month Day Ye

FACILITY
19. Discrepancy Indication Space
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted item 19
Printed/Typed Name: STEVE KULANICK — Signature: Steve Kulanick — Month 12 Day 18 Ye

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

2 1 NC 750 4/10

COPY 5. TSD COPY

0016501

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-3

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. M I D 0 0 6 0 1 2 1 3 2 | Manifest Document No. 6 6 9 7 6

2. Page 1 of 1 | Information in the shaded area not required by Federal law. Items D, F, H and I are required State law.

3. Generator's Name and Mailing Address
Worden Manufacturing
200 E 17th St, Holland, MI 49423

4. Generator's Phone (616) 392-7091

A. State Manifest Document Number: INA 0266976

B. State Generator's ID:

5. Transporter 1 Company Name: VALLEY CITY REFUSE DISPOSAL, INC.

6. Use EPA ID Number: M I D 9 8 1 9 5 6 0 6 3

C. State Transporter's ID:

D. Transporter's Phone: (616) 235-15(

7. Transporter 2 Company Name:

8. Use EPA ID Number:

E. State Transporter's ID:

F. Transporter's Phone:

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
420 S. Colfax, P.O. Box 190
Griffith, IN 46319-0190

10. Use EPA ID Number: I N D 0 1 6 3 6 0 2 6 5

G. State Facility's ID:

H. Facility's Phone: (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. Waste Paint Related Material (F005) Flammable Liquid NA1263	2	DM	110	G	F005
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I ha determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to r which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good fa effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR

Printed/Typed Name: DAVE ANDERSON | Signature: Dave Anderson | Date: Month 8 Day 18 Ye

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Kenneth F Watkins | Signature: Kenneth F Watkins | Date: Month 8 Day 18 Ye

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name: | Signature: | Date: Month . Day . Ye .

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.

Printed/Typed Name: Whitaker A | Signature: Al Whitaker | Month 08 Day 18 89

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

1-123TCT63 1/2

COPY 5. TSD COPY 1204TCT63 1/2

0016493

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas not required by Federal law. Items D, F, H and I are required State law.
I·D·0·0·6·0·1·2·1·3·2·1	5·0·4·9·		

3. Generator's Name and Mailing Address
Worden Manufacturing
200 E 17th St, Holland MI 49423

4. Generator's Phone (616) 392-7091

A. State Manifest Document Number: INA 0316049

B. State Generator's ID:

5. Transporter 1 Company Name: VALLEY CITY REFUSE DISPOSAL, INC.

6. Use EPA ID Number: I D 9 8 1 9 5 6 0 6 3

C. State Transporter's ID:

D. Transporter's Phone: (616) 235-1500

7. Transporter 2 Company Name:

8. Use EPA ID Number:

E. State Transporter's ID:

F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Service
420 S Colfax PO Box 190
Griffith IN 46319-0190

10. Use EPA ID Number: I N D 0 1 6 3 6 0 2 6 5

G. State Facility's ID:

H. Facility's Phone: (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. Waste Paint Related Material (F005) Flammable Liquid NA1263	5	DM	295	G	F005
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I hav determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to m which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good fai effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR

Printed/Typed Name: DAVE ANDERSON | Signature: Dave Anderson | Date: Month 7 Day 26 Year 89

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Roger Martin | Signature: Roger Martin | Date: Month 7 Day 26 Year 89

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name: | Signature: | Date: Month . Day . Year .

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: WHITAKER A | Signature: A Whitaker | Date: Month 7 Day 28 Year 89

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

204 TO TSD 7/31

COPY 5. TSD COPY

0016502

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 703S
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: I I D 0 0 6 0 1 2 1 3 2 5 — Manifest Document No.: 5 9 0 7

2. Page 1 of 1

Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Worden Manufacturing
200 E 17th St, Holland MI 49423

4. Generator's Phone (616) 392-7091

A. State Manifest Document Number: INA 0355907

B. State Generator's ID

5. Transporter 1 Company Name: VALLEY CITY REFUSE DISPOSAL, INC.

6. Use EPA ID Number: I I D 9 8 1 9 5 6 0 6 3

C. State Transporter's ID

D. Transporter's Phone: (616) 235-1500

7. Transporter 2 Company Name

8. Use EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Service
420 S Colfax PO Box 190
Griffith IN 46319-0190

10. Use EPA ID Number: I N D 0 1 6 3 6 0 2 6 5

G. State Facility's ID

H. Facility's Phone: (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No
a. Waste Paint Related Material (F005) Flammable Liquid NA1263	1	DM	330	G	F005
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: DAVE ANDERSON — Signature: Dave Anderson — Date: Month / Day / Year

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Roger Norton — Signature: Roger Norton — Date: Month / Day / Year

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Date: Month / Day / Year

19. Discrepancy Indication Space

20. Facility Owner or Operator. Certification of receipt of hazardous materials covered by this manifest except as noted Item 19
Printed/Typed Name: WHITAKER A — Signature: A Whitaker — Month / Day / Year: 11 / 7 / 89

GENERATOR — TRANSPORTER — FACILITY

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA0355907

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY

4 - 20 YR TSD 11/8 — 35 GAL - MARINE SHALE 11/28/89 912397
1 (20 GAL) 20 YR TSD 11/28/89

0016503

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE *(Form designed for use on elite (12-pitch) typewriter.)* *Form Approved. OMB No. 2050-0039. Expires 9-30-91*

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: M·I·D·0·0·6·0·1·2·1·3·2 | Manifest Document No.: 5·5·9·2·8
2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

GENERATOR

3. Generator's Name and Mailing Address
Worden Mfg
200 E 17th St, Holland MI 49423
4. Generator's Phone (616) 392-7091

A. State Manifest Document Number: INA 0355928
B. State Generator's ID:

5. Transporter 1 Company Name: VALLEY CITY REFUSE DISPOSAL, INC.
6. Use EPA ID Number: M·I·D·9·8·1·9·5·6·0·6·3
C. State Transporter's ID:
D. Transporter's Phone: (616) 235-1500

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Service
420 S. Colfax, PO Box 190
Griffith IN 46319-1090
10. Use EPA ID Number: I·N·D·0·1·6·3·6·0·2·6·5
G. State Facility's ID:
H. Facility's Phone: (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. Waste Paint Related Material Flammable Liquid NA1263 (Ignitable)	8	DM	440	G	F005
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: DAVE ANDERSON | Signature: Dave Anderson | Date: Month 01 Day 22 Year 90

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Arno J. Dykstra | Signature: Arnold Dykstra | Date: Month 01 Day 22 Year 90

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: | Signature: | Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: STEVE KULAVICK | Signature: Steve Kulavick | Date: Month 01 Day 23 Year 90

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA0355928

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY

0018125

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE *(Form designed for use on elite (12-pitch) typewriter.)* *Form Approved. OMB No. 2050-0039. Expires 9-30-91*

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: M.I.D.0.0.6.0.1.2.1.3.2
Manifest Document No.: 5.5.9.8.0
2. Page 1 of 1
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Worden Mfg
200 E 17th St, Holland MI 49423
4. Generator's Phone (616) 392-7091

A. State Manifest Document Number: INA 0355980
B. State Generator's ID:

5. Transporter 1 Company Name: VALLEY CITY REFUSE DISPOSAL, INC.
6. Use EPA ID Number: M.I.D.9.8.1.9.5.6.0.6.3
C. State Transporter's ID:
D. Transporter's Phone: (616) 235-1500

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Service
420 S. Colfax, PO Box 190
Griffith IN 46319-1090
10. Use EPA ID Number: I.N.D.0.1.6.3.6.0.2.6.5
G. State Facility's ID:
H. Facility's Phone: (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. Waste Paint Related Material Flammable Liquid NA1263 (Ignitable)	8	D.M	440	G	F005
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above:
K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information:

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Kevin Kehrwecker
Signature: [signature]
Date: Month 05 Day 03 Year 90

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Roger Norton
Signature: Roger Norton
Date: Month 05 Day 03 Year 90

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Date: Month Day Year

19. Discrepancy Indication Space:

20. Facility Owner or Operator. Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: STEVE KUIAVICK
Signature: [signature]
Date: Month 05 Day 04 Year 90

GENERATOR / TRANSPORTER / FACILITY

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA0355980

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY

0018126

HAZARDOUS WASTE MANIFEST

1
MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

NAME OF CARRIER (SCAC) CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER		World Generator 530 # 162 South Holland Il.60473 312 339 1200	
TRANSPORTER # 1	ILD045695715	H. Roskin Motor Service 4710 W. Roosevelt Chgo Il. 60650 312 261 7236	
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	INDO 16360265	American Chemical Service Griffith Ind 46319 312 768 3400	3/24/85
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY			

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
6 dr		F001	Trichlor	1710		NONE	55 g	300 g		

SPECIAL HANDLING INSTRUCTIONS

If an RQ commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED Yes ☐ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

TOTAL CHARGES: $

FREIGHT CHARGES

FREIGHT PREPAID except when box at right is checked ☐ Check box if charges are to be collect

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding.
$ _____ per _____

"If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

_____ Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement.
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges

_____ (Signature of Consignor)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

_____
GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

_____ _____
TRANSPORTER #1 SIGNATURE & DATE TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

_____ 3/24/85
TSDF SIGNATURE DATE

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TSDF COPY

TOIART-63 GRW 4.8.83

004561

HAZARDOUS WASTE MANIFEST

2

MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

NAME OF CARRIER (SCAC) CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER		339 1200 World Generator 530 162nd South Holland Il 60473	
TRANSPORTER # 1	ILD045695715	H Roskin 4710 Roosevelt Chgo Il 60650 2617236	
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chem Ser Griffith In 46319 312 768 3400	
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
4dr		F001	Trichlor ORM-A	1710		none	55g	200g		

SPECIAL HANDLING INSTRUCTIONS

If an RQ commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED Yes ☐ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

TOTAL CHARGES: $

FREIGHT CHARGES — FREIGHT PREPAID except when box at right is checked ☐ Check box if charges are to be collect

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding.
$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

_____ Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

_____ (Signature of Consignor)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

TSDF SIGNATURE DATE

5

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TSDF COPY

To 118E T-63 6/M 12-7-83
004349

IL 532-61
LPC 62 8/

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0996714
1 7

Authorization Number 8 13

World Generator Co. (Company Name) | 530 W. 162nd St. Address | 3 12 339 1200 Phone Number | 14 0312970016 Generator Number G 24

Spnth Holland City | IL State | 60473 Zip | EPA Number

WASTE HAULER(S)

H. Roskin Motor Hauler Name | 4710 Roosevelt Rd. Chicago, IL 60650 Hauler Address | S.W.H. Registration Number 1400001 25 31

312 261 4645 Phone Number | EPA Number

Hauler Name | Hauler Address | S.W.H. Registration Number 32 38

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | Address | 39 9 1 8 0 8 9 0 7 Site Number 46

Griffith City | IN State | Zip | 312 768 3400 Phone Number | ILD 0 0 4 6 3 6 0 2 6 5 EPA Number

Alternate (Facility Name) | Address | 39 Site Number 46

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Trichlorethylene | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Trichlorethylene | HAZARD CLASS: ORM -3

1710 UN or NA Number | F001 EPA HW Number

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 47 312 62

(1 GALLONS (Circle One) 2 CU. YDS.) 53

METHOD OF SHIPMENT (Circle One) (DRUMS 6 Number) TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Douglas B Vanderley (Authorized Signature) DATE: 10-12-84

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) _____ (Authorized Signature) DATE: 10/12/84 54 59

(2) _____ (Authorized Signature) DATE: / / 54 59

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO_____

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) DATE: 10/18/84 60 65

COMMENTS OR SPECIAL INSTRUCTIONS _____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637 OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV. # 4

SITE COPY - PART 3

120K T-63 ✓

006605

Division of Land Pollution Control - Manifest
Indiana State Board of Health
P.O. Box 7035
Indianapolis, IN 46207-7035

DO NOT WRITE IN THIS SPACE

Please print or type. (Form designed for use on elite (12-pitch) typewriter) Form Approved OMB No. 2000 0404 Expires 7 31 86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. | Manifest Document No. | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law

3. Generator's Name: World Generator, 530 W 162nd
4. Generator's Phone (South) Holland Il 60473

A. State Manifest Document Number: IN 089237
B. State Generator's ID: 0312975016

5. Transporter 1 Company Name: H Roskin Motor Service
6. US EPA ID Number: ILD045695715
C. State Transporter's ID: 1400
D. Transporter's Phone: 261 7236

7. Transporter 2 Company Name:
8. US EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address: American Chemical Service, Griffith In 46319
10. US EPA ID Number: IND016360562
G. State Facility's ID: 9180890002
H. Facility's Phone: 312 768 3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a. Trichloroethylene ORM - A UN 1710	6	DM	330	G	F001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

Printed/Typed Name: Gary McQuillen | Signature: [signature] | Month 1 Day 1 Year 8

17. Transporter 1 Acknowledgement of Receipt of Materials | Date
Printed/Typed Name: [illegible] | Signature: [signature] | Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials | Date
Printed/Typed Name | Signature | Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: Harold F Schmidt | Signature: [signature] | Month Day Year

IN 089237

EPA Form 8700-22A (Rev. 11-85) UHWM 2/LP2

T.S.D. DETACH AND RETAIN THIS COPY

GMY 6-~~[illegible]~~ TO3 6 LA

012208

Division of Land Pollution Control - Manifest
Indiana State Board of Health
P.O. Box 7035
Indianapolis, IN 46207-7035

DO NOT WRITE IN THIS SPACE

Please print or type. (Form designed for use on elite (12-pitch) typewriter) Form Approved OMB No. 2000 0404 Expires 7 31 86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: Small Generator
Manifest Document No.:
2. Page 1 of 1
Information in the shaded areas is not required by Federal law

3. Generator's Name: World Generator
530 W 162nd South Holland Il 60473
4. Generator's Phone (312) 339 1200

A. State Manifest Document Number: IN 089271
B. State Generator's ID: 0312975016

5. Transporter 1 Company Name: H Roskin Motor Service
6. US EPA ID Number: ILD045695715
C. State Transporter's ID: 1400
D. Transporter's Phone: 261 7236

7. Transporter 2 Company Name:
8. US EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address: American Chemical Service
Griffith In 46319
10. US EPA ID Number: IND016360562
G. State Facility's ID: 9180890002
H. Facility's Phone: 312 768 3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a. Tri-chlor O R M-A UN 1710	8	dm	400	G	F001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

Printed/Typed Name: Doug Vanderploug
Signature: [signature]
Month Day Year: 4 30 87

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Ray Zak
Signature: [signature]
Month Day Year: 4 30 87

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Month Day Year:

19. Discrepancy Indication Space

...ity Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Typed Name: Roland F Schmidt
Signature: [signature]
Month Day Year: 5 15 87

IN 089271

8700-22A (Rev. 11-85) UHWM 2/LP2

T.S.D. DETACH AND RETAIN THIS COPY

MRG 8-118R TCS 13

012209

Division of Land Pollution Control - Manifest
Indiana State Board of Health
P.O. Box 7035
Indianapolis, IN 46207-7035

DO NOT WRITE IN THIS SPACE

Please print or type. (Form designed for use on elite (12-pitch) typewriter) Form Approved OMB No. 2000 0404 Expires 7 31 86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: ILD052528047
Manifest Document No.:
2. Page 1 of
Information in the shaded areas is not required by Federal law

3. Generator's Name: World Generator
530 W 162nd South Holland Il 60473

A. State Manifest Document Number: IN 089292

4. Generator's Phone (312) 339 1200

B. State Generator's ID: 0312975016

5. Transporter 1 Company Name: H Roskin Motor service
6. US EPA ID Number: ILD045695715

C. State Transporter's ID: 1400
D. Transporter's Phone: 376-9343

7. Transporter 2 Company Name:
8. US EPA ID Number:

E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address: American Chemical Service
Griffith In 46319
10. US EPA ID Number: IND016360562

G. State Facility's ID: 9180890002
H. Facility's Phone: 312 768 3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a. Trichlor ORM-A un 1710	11	dm	550	Gal	F001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

Printed/Typed Name: Louis [illegible] | Signature: [illegible] | Month Day Year: 10 26 87

17. Transporter 1 Acknowledgement of Receipt of Materials | Date

Printed/Typed Name: [illegible] | Signature: [illegible] | Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials | Date

Printed/Typed Name | Signature | Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.

Printed/Typed Name: [illegible] | Signature: [illegible] | Month Day Year: 11 [illegible] 87

GENERATOR

TRANSPORTER

FACILITY

IN 089292

EPA Form 8700-22A (Rev. 11-85) UHWM 2/LP2

11-1BTR-T-63 11/9/87

T.S.D. DETACH AND RETAIN THIS COPY

012210

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: I.L.D.0.0.5.2.3.0.3.1.3
Manifest Document No.:
2. Page 1 of
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address: World Generator 530 W 162nd South Holland Il 60473
4. Generator's Phone (312) 3391200
A. State Manifest Document Number: INA 0249457
B. State Generator's ID:
5. Transporter 1 Company Name: H Roskin
6. Use EPA ID Number: I.L.D.0.4.5.6.9.5.7.1.5
C. State Transporter's ID: 1400
D. Transporter's Phone: 3223769343
7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:
9. Designated Facility Name and Site Address: American Chemical Service Griffith In 46319
10. Use EPA ID Number: I.N.D.0.1.6.3.6.0.5.6.2
G. State Facility's ID: 9180890002
H. Facility's Phone: 312 7683400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. Trichlor ORM-A U N 1710	~~15~~ 17	~~DM~~ DAI	~~750~~ 880	Gal	F001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: GARY McQUILLEN
Signature: Gary McQuillen
Date: Month 10 Day 17 Year 88

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Cyl Walks
Signature: Cyl Walks
Date: Month 10 Day 17 Year 88

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Date: Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: WHITAKER A
Signature: Alan W Baker
Date: Month 10 Day 27 Year 88

GENERATOR / TRANSPORTER / FACILITY

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0249457

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

1 ATCT 63 10/20

015040

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of	Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.
I L D 0 2 5 2 5 8 0 4 7			

GENERATOR

3. Generator's Name and Mailing Address
World Generator 530 W 162nd St
South Holland Il 60473

4. Generator's Phone (312) 339 1200

A. State Manifest Document Number: INA 0205883

B. State Generator's ID: 0312975016

5. Transporter 1 Company Name: H Roskin Motor Service

6. Use EPA ID Number: I.L.D.0.4.5.6.9.5.7.1.5

C. State Transporter's ID: 1400

D. Transporter's Phone: 3769343

7. Transporter 2 Company Name

8. Use EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Service
Griffith In 46319

10. Use EPA ID Number: I.N.D.0.1.6.3.6.0.5.6.2

G. State Facility's ID: 9180890002

H. Facility's Phone: 312 768 3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I Waste No.
a. Trichlor ORM-A UN1897	11	DM	550	Gal	F001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name	Signature	Month	Day	Year
Gary McGuire	Gary McGuire	5	15	88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
CLARENCE NEAL				

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name	Signature	Month	Day	Year
HARRUP F. [illegible]		5	15	88

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0205883

EPA Form 8700-22 (Rev. 9-86) Previous editions are obsolete.
State Form 11865 11-1187 T63 4/2/23 8

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

015039

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I L D 0 0 5 2 3 0 3 1 3 | Manifest Document No. 0 4 1 1 9
2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
World Generator 530 W 162nd
South Holland IL 60473
4. Generator's Phone (312) 339 1200

A. State Manifest Document Number: INA 0322627
B. State Generator's ID:

5. Transporter 1 Company Name: H Roskin Motor Service
6. Use EPA ID Number: I L D 0 4 5 6 9 5 7 1 5
C. State Transporter's ID: 1400
D. Transporter's Phone: 312 376 9343

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Service
Griffith IN 46319
10. Use EPA ID Number: I N D 0 1 6 3 6 0 5 6 2
G. State Facility's ID:
H. Facility's Phone: 9180890002

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. Trichlorethylene ORM-A UN 1710	14	DM	700	Gal	F001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR — Printed/Typed Name: GARY McCallister | Signature: Gary McCallister | Date: Month 4 Day 12 Year 89

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials — Printed/Typed Name: [illegible] | Signature: [illegible] | Date: Month 4 Day 12 Year 89
18. Transporter 2 Acknowledgement of Receipt of Materials — Printed/Typed Name: | Signature: | Date: Month . Day . Year .

FACILITY
19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19
Printed/Typed Name: HAROLD F SCHMIDT | Signature: [illegible] | Date: Month 4 Day 14 Year 89

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0322627

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY

0016500

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.
ILD005230313	032200		

3. Generator's Name and Mailing Address
World Generator 530 W 162nd
South Holland IL 60473

4. Generator's Phone (708) 339 1200

A. State Manifest Document Number: INA 0322701

B. State Generator's ID:

5. Transporter 1 Company Name: H Roskin

6. Use EPA ID Number: ILD045695715

C. State Transporter's ID: 1400

D. Transporter's Phone: 3123769343

7. Transporter 2 Company Name:

8. Use EPA ID Number:

E. State Transporter's ID:

F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Service
Griffith IN 46319

10. Use EPA ID Number: ILD016366052

G. State Facility's ID: 9180890002

H. Facility's Phone: 3127683400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. Trichlorethylene ORM-A UN1710	13	DM	650	Gal	F001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR — Printed/Typed Name: GARY McQUILLEN — Signature: Gary McQuillen — Date: Month 3 Day 23 Year 90

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: CLARENCE NEAL — Signature: Clarence Neal — Date: Month 03 Day 23 Year 90

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: — Signature: — Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: WHALOR A — Signature: — Date: Month 4 Day 6 Year 90

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0322701

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

12 (575 GAL) - 1BR T63 4/9/90

40 GAL 204R TSO 6/11/90
15 GAL MARINE SNAKE 6/12/90 903143

COPY 5. TSD COPY

0018124

STATE OF ILLINOIS ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0610
LPC 62 8/81

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) **EPA Form 8700-22 (3-84)** Form Approved. OMB No. 2000-0404. Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. | Manifest Document No.

2. Page 1 of 1

Information in the shaded areas is not required by Federal law, but is required by Illinois law.

GENERATOR

3. Generator's Name and Mailing Address
World Generator Co., Inc.
P.O. Box 276
South Holland, IL 60473

4. Generator's Phone (312) 339-1200

A. Illinois Manifest Document Number: IL 1155882

B. Illinois Generator's ID: 0 3 1 2 9 7 5 0 1 6

5. Transporter 1 Company Name: H. Roskin Motor

6. US EPA ID Number: I L D 0 4 5 6 9 5 7 1 5

C. Illinois Tranporter's ID: 1 4 0 1 0

D. (312) 261-4645 Transporter's Phone

7. Transporter 2 Company Name

8. US EPA ID Number

E. Illinois Transporter's ID

F. ( ) Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Service
Griffith, IN

10. US EPA ID Number: I N D 0 1 6 3 6 0 2 6 5

G. Illinois Facility's ID: 9 1 1 8 0 1 8 9 0 0 0 0 2

H. Facility's Phone: (312) 768-3400

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a.	HM X Trichlorethylene, ORM-A, 1710	1 1	D M	5 7 2	1	EPA HW Number: P 0 0 1; Authorization Number:
b.						EPA HW Number: ; Authorization Number:
c.						EPA HW Number: ; Authorization Number:
d.						EPA HW Number: ; Authorization Number:

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, and Illinois regulations.

Printed/Typed Name: Douglas B. Vander Ploeg | Signature: Douglas B Vander Ploeg | Date: Month 5 Day 22 Year 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: CHUCK VALENTINE | Signature: Chuck Valentine | Date: Month 5 Day 22 Year 85

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name | Signature | Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: E DUNLEE | Signature: E Dunlee | Date: Month 6 Day 3 Year 85

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV.# 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½ Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

1184 T-63

009174

STATE OF ILLINOIS ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0610

LPC 62 8/81

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) **EPA Form 8700-22 (3-84)** Form Approved. OMB No. 2000-0404. Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. | Manifest Document No.

2. Page 1 of | Information in the shaded areas is not required by Federal law, but is required by Illinois law.

3. Generator's Name and Mailing Address: WORLD Generator Co. P O Box 276 South Holland IL 60473

4. Generator's Phone (312) 339-1200

A. Illinois Manifest Document Number: IL 1155883

B. Illinois Generator's ID: 0311297501 6

5. Transporter 1 Company Name: H Roskin Motor

6. US EPA ID Number: IL D045695715

C. Illinois Tranporter's ID: 11400

D. (312) 261-9645 Transporter's Phone

7. Transporter 2 Company Name

8. US EPA ID Number

E. Illinois Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address: American Chemical Service Griffith, IN

10. US EPA ID Number: IND016360265

G. Illinois Facility's ID: 9180890002

H. Facility's Phone: (312) 768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a.	X	Trichlorethylene, ORM-A, 1710	009	DM	468	1	EPA HW Number: F001 Authorization Number
b.							EPA HW Number Authorization Number
c.							EPA HW Number Authorization Number
d.							EPA HW Number Authorization Number

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national govemmental regulations, and Illinois regulations.

Printed/Typed Name: Douglas B Vander Ploeg | Signature: Douglas B Vander Ploeg | Date: Month 04 Day 18 Year 86

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: CLARENCE NEAL | Signature: Clarence Neal | Date: Month Day Year

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name | Signature | Date: Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: A Whitaker | Signature: A Whitaker | Date: Month 4 Day 18 Year 86

GENERATOR

TRANSPORTER

FACILITY

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV.# 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½ Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

IBF763 1004

STATE OF ILLINOIS ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0610

LPC 62 8/81

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) **EPA Form 8700-22 (3-84)** Form Approved. OMB No. 2000-0404. Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. | Manifest Document No.

2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but is required by Illinois law.

GENERATOR

3. Generator's Name and Mailing Address
World Generator Co.
P.O Box 276 South Holland, IL 60473

4. Generator's Phone (312) 339-1200

A. Illinois Manifest Document Number: IL 1155884

B. Illinois Generator's ID: 034297501 6

5. Transporter 1 Company Name: H Roskin Motor

6. US EPA ID Number: ILD045695715

C. Illinois Tranporter's ID: 11400

D. (312) 261-4645 Transporter's Phone

7. Transporter 2 Company Name

8. US EPA ID Number

E. Illinois Transporter's ID

F. ( ) Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Service
Griffith, IN

10. US EPA ID Number: IND016360265

G. Illinois Facility's ID: 9 118089 0002

H. Facility's Phone (312) 768-3400

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a.	Trichloroethylene, ORM-A, 1710	X	5	DM	260	1	EPA HW Number: F001 / Authorization Number:
b.							EPA HW Number: / Authorization Number:
c.							EPA HW Number: / Authorization Number:
d.							EPA HW Number: / Authorization Number:

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, and Illinois regulations.

Printed/Typed Name	Signature	Date (Month Day Year)
Douglas B Vander Ploeg	Douglas B Vander Ploeg	5 19 86

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)
CLARENCE NEAL	Clarence Neal	5 20 86

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name	Signature	Date (Month Day Year)
MURPHY		5 20 86

IN ILLINOIS: 217 / 782-3637 24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV. # 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½, Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

01T0005

STATE OF ILLINOIS ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0610
LPC 62 8/81

Please print or type. (Form designed for use on elite (12-pitch) typewriter) **EPA Form 8700-22 (3-84)** Form Approved. OMB No. 2000-0404 Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. | Manifest Document No. | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but is required by Illinois law.

3. Generator's Name and Mailing Address: World Generator Co
P.O Box 276
South Holland, IL 60473

A. Illinois Manifest Document Number: IL 1155885

4. Generator's Phone (312) 339-1200

B. Illinois Generator's ID: 0131219750116

5. Transporter 1 Company Name: H. Roslin Motor | 6. US EPA ID Number: ILD045695715 | C. Illinois Tranporter's ID: 14010 | D. (312) 361-4445 Transporter's Phone

7. Transporter 2 Company Name | 8. US EPA ID Number | E. Illinois Transporter's ID | F. ( ) Transporter's Phone

9. Designated Facility Name and Site Address: American Chemical Service
Griffith, IN | 10. US EPA ID Number: IND016360265 | G. Illinois Facility's ID: 9118089000 12 | H. Facility's Phone: (312) 768-3400

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	X	5	DM	275 GAL	1	EPA HW Number: F001 / Authorization Number
b.						EPA HW Number / Authorization Number
c.						EPA HW Number / Authorization Number
d.						EPA HW Number / Authorization Number

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, and Illinois regulations.

Printed/Typed Name	Signature	Date (Month Day Year)
Douglas B VanderPloeg	Douglas B VanderPloeg	8 12 86

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials		Date
Printed/Typed Name: CLARENCE NEAL	Signature: Clarence Neal	8 20 86
18. Transporter 2 Acknowledgement or Receipt of Materials		Date
Printed/Typed Name	Signature	Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name	Signature	Date (Month Day Year)
G MURPHY	G Murphy	08 25 86

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV # 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½, Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

8/11/86

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: M I G 0 0 0 0 1 7 5 9 5
Manifest Document No.: 1
2. Page 1 of 1
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
World Magnetics Company
810 Hastings Street
Traverse City, MI 49684
4. Generator's Phone

A. State Manifest Document Number: INA 0157785
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone 616-361-6691
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone

5. Transporter 1 Company Name: Haviland Products Co.
6. Use EPA ID Number: M I D 0 0 6 0 2 8 4 9 2
7. Transporter 2 Company Name
8. Use EPA ID Number

9. Designated Facility Name and Site Address
American Chemical Services Inc.
420 S. Colfox Avenue
Griffith, IN 46319
10. Use EPA ID Number: I N D 0 1 6 3 [illegible] 5

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. Waste Methanol Solution UN-1230 Flammable Liquid	2	DM	110	G	P-003
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
Clean up any spills

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR

Printed/Typed Name	Signature	Month	Day	Year
Charles P. Stecker		0 8	0 2	8 8

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Bill Pierantoni		0 8	0 2	8 8

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted item 19.

Printed/Typed Name	Signature	Month	Day	Year
Frank Price	Frank Price			8 8

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0157785

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

015038

See reverse side for instructions
Please TYPE or PRINT clearly using a ball point pen — PRESS HARD

State of Minnesota
HAZARDOUS WASTE SHIPPING PAPER

① SHIPMENT NO. 000003

002521

GENERATOR (SHIPPER)

GENERATOR—SHIPPER NAME ② Worm Chemical Co.	SITE I.D. NO. ③ 1230017
PICKUP ADDRESS ④ 7130 Kasota Ave	EPA I.D. MND 006213664
CITY, STATE, ZIP CODE ⑤ St Paul Minn 55108	PHONE NO. ⑥ 612-645-9224
BUSINESS ADDRESS ⑦ Same	

⑧ No.	QUANTITY SHIPPED	HAZ. MAT.	KIND OF UNIT—PROPER DOT SHIPPING NAME	DOT HAZ. CLASS	SHIPPING WEIGHT
1	[illegible]	V	[illegible]	[illegible]	28050
2	[illegible]	V	[illegible]	[illegible]	[illegible]
3					
4					
5					

⑨ Does Generator Plan authorize commingling? ☐ YES ☐ NO
(If "YES", attach sheet listing other generators and quantities of waste.)

⑩ No.	WASTE CODE	MPCA HAZARDOUS PROPERTY	APPROXIMATE PRODUCTION DATES From	To
1	[illegible]	[illegible]		
2	[illegible]	[illegible]		
3				
4				
5				

4868 gal.

⑪ SPECIAL INSTRUCTIONS

Incineration

389,769

☐ SPECIAL EMERGENCY PROCEDURE ATTACHED

SHIPPER'S CERTIFICATION: This is to certify that the above named materials are properly classified, described, packaged, marked and labelled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and EPA.

The wastes described above were consigned to the Carrier named. The Hazardous Waste Facility can and will accept this shipment of hazardous waste, and has a valid permit to do so. I certify that the foregoing is true and correct to the best of my knowledge.

DATE ⑫ SHIPPED	AUTHORIZED SIGNATURE ⑬	TITLE ⑭
12/21/92	x [signature]	

TRANSPORTER NAME ⑮ Worm Chemical Co.	MPCA REGISTRATION NO. ⑯ TR0014
BUSINESS ADDRESS ⑰ 7130 Kasota Ave	EPA I.D. MND 006213664
CITY, STATE, ZIP CODE ⑱ St Paul Minn 55108	PHONE NO. ⑲ 612-645-9224
DATE RECEIVED ⑳ 12/21/92	The wastes described above were received by me for shipment to the named Hazardous Waste Facility.
AUTHORIZED SIGNATURE ㉑ [signature]	TITLE ㉒ DRIVER
SHIPMENT INTERLINED ㉓	MPCA REGISTRATION NO. / EPA I.D. / MPCA REGISTRATION NO. / EPA I.D.
DATE RECEIVED ㉔ 12/21/92	/ /
AUTHORIZED SIGNATURE ㉕	

FACILITY NAME ㉖ American Chemical Service Inc	STATE PERMIT/LICENSE NO. ㉗
SITE ADDRESS ㉘ 420 S. Colfax Ave	EPA I.D. IND 016380265
CITY, STATE, ZIP CODE ㉙ Gary Ind 56319	PHONE NO. ㉚ 219-924-4370
DATE RECEIVED ㉛ 12/22/92	The wastes described above have been received for processing as per current and valid state permit and/or other applicable laws and ordinances. ㉛a ☐ For exceptions see attachment.
AUTHORIZED SIGNATURE ㉜ [signature]	TITLE ㉝
DATE WASTE DISPOSED ㉞ 12/25/92	I certify that the above named wastes have been processed and/or disposed.
AUTHORIZED SIGNATURE ㉟ [signature]	TITLE ㊱ [signature]

MAIL TO: HAZARDOUS WASTE, MIS
322 W. SHINGTON AVE. S.
HO. KINS, MN 553-3

In case of a spill in Minnesota, immediately call the MPCA 24-hour emergency number (612) 296-7373, and the National Response Center (800) 424-8802.

1. White—Hazardous Waste Facility Mail to Generator
2. Yellow—Generator (Shipper) Mail to ㊲
3. Pink—Hazardous Waste Facility Mail to ㊲
4. Orange—Hazardous Waste Facility Mail to Generator
5. Gold—Hazardous Waste Facility Retain
6. Blue—Transporter (Carrier) Retain
7. Green—Generator (Shipper) Retain

PQ-00280-02
HC 5406 (4-80)

[illegible] 50 GRIM 12-28-92

See reverse side for instructions
Please TYPE or PRINT clearly using a ball point pen — PRESS HARD

State of Minnesota
HAZARDOUS WASTE SHIPPING PAPER

① SHIPMENT NO. 000001

GENERATOR (SHIPPER)

GENERATOR—SHIPPER NAME ② Worun Chemical Co.	SITE I.D. NO. ③ 1230017
PICKUP ADDRESS ④ 2130 Kasota Ave	EPA I.D. MND 006213664
CITY, STATE, ZIP CODE ⑤ St Paul Minn 55108	PHONE NO. ⑥ 612-645-9224
BUSINESS ADDRESS ⑦ Same	

⑧ No.	QUANTITY SHIPPED	HAZ. MAT.	KIND OF UNIT—PROPER DOT SHIPPING NAME	DOT HAZ. CLASS	SHIPPING WEIGHT
1	94	✓	WASTE Drums Flammable Liquid, N.O.S. UN 1993	Flammable Liquid	37500#
2					
3					
4					
5					

⑨ Does Generator Plan authorize commingling? ☐ YES ☐ NO
(If "YES", attach sheet listing other generators and quantities of waste.)

⑩ No.	WASTE CODE	MPCA HAZARDOUS PROPERTY	APPROXIMATE PRODUCTION DATES From	To
1	[illegible]	Flammable Liquid		
2				
3				
4				
5				

⑪ SPECIAL INSTRUCTIONS
For Incineration-
Hoerner Waldorf - 33 Drums
Meyers Printing - 33 Drums
Worun Chemical Co - 18 Drums

4620 gal

☐ SPECIAL EMERGENCY PROCEDURE ATTACHED

SHIPPER'S CERTIFICATION: This is to certify that the above named materials are propari[illegible] marked and labelled and are in proper condition for transportation according to the applica[illegible] of Transportation and EPA.

The wastes described above were consigned to the Carrier named. The Hazardous Waste F[illegible] shipment of hazardous waste, and has a valid permit to do so. I certify that the foregoing is [illegible] of my knowledge.

DATE ⑫ SHIPPED	12/7/82	AUTHORIZED SIGNATURE ⑬ x [illegible]

4620 gal

TRANSPORTER NAME ⑮ Worun Chemical Co	MPCA REGISTRATION NO. ⑯ TR0014
BUSINESS ADDRESS ⑰ 2130 Kasota Ave	EPA I.D. MND 006213664
CITY, STATE, ZIP CODE ⑱ St Paul Minn 55108	PHONE NO. ⑲ 612-645-9224
DATE RECEIVED ⑳ 12/7/82	The wastes described above were received by me for shipment to the named Hazardous Waste Facility.
AUTHORIZED SIGNATURE ㉑ x [illegible]	TITLE ㉒ Driver
SHIPMENT INTERLINED ㉓	MPCA REGISTRATION NO. / EPA I.D. / MPCA REGISTRATION NO. / EPA I.D.
DATE RECEIVED ㉔	/ / / /
AUTHORIZED SIGNATURE ㉕	

FACILITY NAME ㉖ American Chemical Service Inc	STATE PERMIT/LICENSE NO. ㉗
SITE ADDRESS ㉘ 4[illegible] So [illegible] Ave	EPA I.D. IND-016360[illegible]
CITY, STATE, ZIP CODE ㉙ Greenleaf Township 46319	PHONE NO. ㉚ 219-924-4370
DATE RECEIVED ㉛ 12/8/82	The wastes described above have been received for processing as per current and valid state permit and/or other applicable laws and ordinances. ㉛a ☐ For exceptions see attachment.
AUTHORIZED SIGNATURE ㉜ x [illegible]	TITLE ㉝ Unloader
DATE WASTE DISPOSED ㉞ 12/8/82	I certify that the above named wastes have been processed and/or disposed.
AUTHORIZED SIGNATURE	TITLE ㊱ [illegible]

㊲ MAIL TO: HAZARDOUS WASTE MIS
322 WASHINGTON AVE S
HOPKINS MN 55343

In case of a spill in Minnesota immediately call the MPCA 24-hour emergency number (612) 296-7373 and the National Response Center (800) 424-8802

—Hazardous Waste Facility Mail to Generator
—Generator (Shipper) Mail to ㊲
—Hazardous Waste Facility Mail to ㊲
—Hazardous Waste Facility Mail to Generator

5. Gold—Hazardous Waste Facility Retain
6. Blue—Transporter (Carrier) Retain
7. Green—Generator (Shipper) Retain

PQ-00280-02
HC 5406 (4-80)

002522

See reverse side for instructions
Please TYPE or PRINT clearly using a ball point pen — PRESS HARD

State of Minnesota
HAZARDOUS WASTE SHIPPING PAPER

(1) SHIPMENT NO 1 0 2 4 5

GENERATOR

(2) GENERATOR—SHIPPER NAME [redacted]	(3) SITE I.D. NO [redacted]
(4) PICKUP ADDRESS 2130 Kasota Ave	EPA I.D. MND 006213464
(5) CITY, STATE, ZIP CODE St Paul Minn 55108	(6) PHONE NO. 612 645-7924
(7) BUSINESS ADDRESS [redacted]	

(8) No.	QUANTITY SHIPPED	HAZ. MAT.	KIND OF UNIT—PROPER DOT SHIPPING NAME	DOT HAZ. CLASS	SHIPPING WEIGHT
1	60	X	Waste Flammable Liquid	Flammable	3300
2	5	X	Waste Oxidizer, Solid, N.O.S. (Calcium Hypochlorite)	Oxidizer	275
3					
4					
5					

(9) Does Generator Plan authorize commingling? ☒ YES ☐ NO
(If "YES", attach sheet listing other generators and quantities of waste.)

(10) No.	WASTE CODE	MPCA HAZARDOUS PROPERTY	APPROXIMATE PRODUCTION DATES From	To
1	7 W X X 1 2	Flammable Liquid - Toxic		
2	2 W X X 1 2	Waste Oxidizer, Solid, N.O.S.		
3				
4				
5				

(11) SPECIAL INSTRUCTIONS Dispose of [redacted]
Chemical Int'l - Hopkins, Waste - Flammable
Electron Packing 2 Waste - Oxidizer
American Can - St Paul
Custom Electroplating
Waste Chemical Co. 10 [redacted]

☐ SPECIAL EMERGENCY PROCEDURE ATTACHED

SHIPPER'S CERTIFICATION: This is to certify that the above named materials are properly classified, described, packaged, marked and labelled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and EPA.

The wastes described above were consigned to the Carrier named. The Hazardous Waste Facility can and will accept this shipment of hazardous waste, and has a valid permit to do so. I certify that the foregoing is true and correct to the best of my knowledge.

(12) DATE SHIPPED	AUTHORIZED SIGNATURE (13)	TITLE
2/9/83	[redacted]	

TOT 20 WRT-50
6RM 2.15.83

TRANSPORTER (CARRIER)

(15) TRANSPORTER NAME [redacted]	(16) MPCA REGISTRATION NO. [redacted]
(17) BUSINESS ADDRESS 213 Kasota Ave	EPA I.D. MND 006213464
(18) CITY, STATE, ZIP CODE St Paul Minn 55108	(19) PHONE NO. 612 645-7924

(20) DATE RECEIVED 2/9/83 — The wastes described above were received by me for shipment to the named Hazardous Waste Facility.

(21) AUTHORIZED SIGNATURE x [redacted] — (22) TITLE [redacted]

(23) SHIPMENT INTERLINED	MPCA REGISTRATION NO.	MPCA REGISTRATION NO.
	EPA I.D.	EPA I.D.
(24) DATE RECEIVED	/ /	/ /
(25) AUTHORIZED SIGNATURE	x	x

HAZARDOUS WASTE FACILITY

(26) FACILITY NAME [redacted]	(27) STATE PERMIT/LICENSE NO.
(28) SITE ADDRESS 4444 S Robert Ave	EPA I.D. IND 016360265
(29) CITY, STATE, ZIP CODE Cottage Grove Minn 55119	(30) PHONE NO. 459-7744

(31) DATE RECEIVED / / — The wastes described above have been received for processing as per current and valid state permit and/or other applicable laws and ordinances. ☐ For exceptions see attachment.

AUTHORIZED SIGNATURE x [redacted] — TITLE [redacted]

(34) DATE WASTE DISPOSED / / — I certify that the above named wastes have been processed and/or disposed.

(35) AUTHORIZED SIGNATURE x Frank Pace — (36) TITLE [redacted]

(37) MAIL TO: HAZARDOUS WASTE, MIS
322 WASHINGTON AVE. S.
HOPKINS, MN 55343

In case of a spill in Minnesota, immediately call the MPCA 24-hour emergency number, (612) 296-7 and the National Response Center, (800) 424-8802

1. White—Hazardous Waste Facility Mail to Generator
2. Yellow—Generator (Shipper) Mail to (37)
3. Pink—Hazardous Waste Facility Mail to (37)
4. Orange—Hazardous Waste Facility Mail to Generator
5. Gold—H
6. Blue—Transporter (Carrier) Retain
7. Green—Generator (Shipper) Retain

PQ-00280-02
HC 5406 (4-80)

On dock 2.9.83 6RM

65 drms = 3,575

004350

See reverse side for instructions
Please TYPE or PRINT clearly using a ball point pen — PRESS HARD

State of Minnesota
HAZARDOUS WASTE SHIPPING PAPER

(1) SHIPMENT NO. 0 0 0 0 0 9

006221

GENERATOR/SHIPPER

(2) GENERATOR—SHIPPER NAME: WORUM CHEMICAL COMPANY	(3) SITE I.D. NO.: 1230017
(4) PICKUP ADDRESS: 2130 Kasota Avenue	EPA I.D.: MND 006213664
(5) CITY, STATE, ZIP CODE: St. Paul, MN 55108	(6) PHONE NO.: 612-645-9224
(7) BUSINESS ADDRESS: Same	

(8) No.	QUANTITY SHIPPED	HAZ. MAT.	KIND OF UNIT—PROPER DOT SHIPPING NAME	DOT HAZ. CLASS	SHIPPING WEIGHT
1	49X55 (2695)	X	Drums-Waste Flammable Liquid N.O.S. UN 1993	Flammable Liquid	21022#
2					
3	26X55 (1430)	X	Drums-Waste Oil NOS NA 1270	Combustible Liquid	14300#
4					
5	9X55 (495)	X	Drums-Waste ORM-A, NOS, NA1693	ORM-A	6300#

(9) Does Generator Plan authorize commingling? ☐ YES ☐ NO
(If "YES", attach sheet listing other generators and quantities of waste.)

(10) No.	WASTE CODE	MPCA HAZARDOUS PROPERTY	APPROXIMATE PRODUCTION DATES From	To
1	D001	Flammable Liquid		
2				
3	D001	Waste Oil with Flammable		
4	F002	Mixed Chlorinated Solvents		
5	F002	Mixed Chlorinated Solvents		

(11) SPECIAL INSTRUCTIONS: Incineration

Electro Painter	8	American Can - St. Paul	26
Brown Blodgett	2	Worum Chemical	9
Merillat Ind.	6		
P D I	3		
Worum Chemical	30		

☐ SPECIAL EMERGENCY PROCEDURE ATTACHED

SHIPPER'S CERTIFICATION: This is to certify that the above named meterials are prope marked and labelled and are in proper condition for transportation according to the applic of Transportation and EPA.

The wastes described above were consigned to the Carrier named. The Hazardous Waste shipment of hazardous waste, and has a valid permit to do so. I certify that the foregoing i of my knowledge.

(12) DATE SHIPPED	AUTHORIZED SIGNATURE (13)	TITLE (14)
12/08/83	x	

49 drums = 2695 gal
26 drums = 1430 gal
9 drums = 495 gal

TRANSPORTER

(15) TRANSPORTER NAME: Polaris Transport Inc.	(16) MPCA REGISTRATION NO
BUSINESS ADDRESS: 327 - 8th Ave. N.W.	EPA I.D. MND 070735048
CITY, STATE, ZIP CODE: New Brighton, MN 55112	(19) PHONE NO.: 612-633-1523
(20) DATE RECEIVED: 12/8/83	The wastes described above were received by me for shipment to the named Hazardous Waste Facility.
(21) AUTHORIZED SIGNATURE: x	TITLE (22)

(23) SHIPMENT INTERLINED	MPCA REGISTRATION NO.	MPCA REGISTRATION NO.
	EPA I.D.	EPA I.D.
(24) DATE RECEIVED	/ /	/ /
(25) AUTHORIZED SIGNATURE	x	x

WASTE DISPOSAL

(26) FACILITY NAME: American Chemical Services	(27) STATE PERMIT/LICENSE NO.
SITE ADDRESS (28): 420 So. Colfax Avenue	EPA I.D. IND 016350265
CITY, STATE, ZIP CODE (29): Griffith, Indiana 56319	PHONE NO. (30): 219-924-4370
DATE RECEIVED (31): 12/9/83	The wastes described above have been received for processing as per current and valid state permit and/or other applicable laws and ordinances. (33) ☐ For exceptions see attachment.
AUTHORIZED SIGNATURE (32): x	TITLE (35): SUP
DATE WASTE DISPOSED (34): / /	I certify that the above named wastes have been processed and/or disposed.
AUTHORIZED SIGNATURE	TITLE (36)

(37) MAIL TO: HAZARDOUS WASTE, MIS
322 WASHINGTON AVE. S.
HOPKINS, MN 55343

In case of a spill in Minnesota, immediately call the MPCA 24-hour emergency number, (612) 296-7373, and the National Response Center, (800) 424-8802

te—Hazardous Waste Facility Mail to Generator
ow—Generator (Shipper) Mail to (37)
3. Pink—Hazardous Waste Facility Mail to (37)
4. Orange—Hazardous Waste Facility Mail to Generator
5. Gold—Hazardous Waste Facility Retain
6. Blue—Transporter (Carrier) Retain
7. Green—Generator (Shipper) Retain

PQ-00280-02
HC 5406 (4-80)

To 204 F T-50
ORM 12.12.83

See reverse side for instructions
Please TYPE or PRINT clearly using a ball point pen — PRESS HARD

State of Minnesota
HAZARDOUS WASTE SHIPPING PAPER

(1) SHIPMENT NO. 00008

GENERATOR

(2) GENERATOR—SHIPPER NAME: Ware Chemical Co.	(3) SITE I.D. NO.: MN500017
(4) PICKUP ADDRESS: 2130 KNAPP ST. AVE.	EPA I.D.: MND 006213664
(5) CITY, STATE, ZIP CODE: ST PAUL MINN. 55108	(6) PHONE NO.: 612-645-7934
(7) BUSINESS ADDRESS: SAME	

TRANSPORTER

(15) TRANSPORTER NAME: DELAWARE TRANSPORT INC.	(16) MPCA REGISTRATION NO.
(17) BUSINESS ADDRESS: 300 4TH AVE N.W.	EPA I.D.: MND 070735098
(18) CITY, STATE, ZIP CODE: NEW BRIGHTON MINN. 55112	(19) PHONE NO.: 612-633-1523
(20) DATE RECEIVED: 11/20/83	The wastes described above were received by me for shipment to the named Hazardous Waste Facility.
(21) AUTHORIZED SIGNATURE: [signature]	(22) TITLE: DRIVER
(23) SHIPMENT INTERLINED	MPCA REGISTRATION NO. / EPA I.D.
(24) DATE RECEIVED	/ /
(25) AUTHORIZED SIGNATURE	

(8) No.	QUANTITY SHIPPED	HAZ. MAT.	KIND OF UNIT — PROPER DOT SHIPPING NAME	DOT HAZ. CLASS	SHIPPING WEIGHT
1	5360	X	Bulk Waste Flammable	Flammable	39520#
2	GALS		Liquid, N.O.S. UN1993	Liquid	
3					
4					
5					

(9) Does Generator Plan authorize commingling? ☐ YES ☐ NO (If "YES", attach sheet listing other generators and quantities of waste.)

(10) No.	WASTE CODE	MPCA HAZARDOUS PROPERTY	APPROXIMATE PRODUCTION DATES From	To
1	D001	Flammable Liquids		
2				
3				
4				
5				

FACILITY

(26) FACILITY NAME: American Chemical Service Inc.	STATE PERMIT/LICENSE NO. (27)
(28) SITE ADDRESS: 1120 So Colfax Ave	EPA I.D.: IND 016360265
(29) CITY, STATE, ZIP CODE: Griffith Indiana 46319	(30) PHONE NO.: 219-924-4370
(31) DATE RECEIVED: 11/21/83	The wastes described above have been received for processing as per current and valid state permit and/or other applicable laws and ordinances. (32) ☐ For exceptions see attachment.
(32) AUTHORIZED SIGNATURE: [signature]	(33) TITLE: Loader
(34) DATE WASTE DISPOSED: / /	I certify that the above named wastes have been processed and/or disposed.
(35) AUTHORIZED SIGNATURE	(36) TITLE

(11) SPECIAL INSTRUCTIONS: Incineration

W.T.# 12993

5360 gal

☐ SPECIAL EMERGENCY PROCEDURE ATTACHED

SHIPPER'S CERTIFICATION: This is to certify that the above named ... marked and labelled and are in proper condition for transportation acc... of Transportation and EPA.

The wastes described above were consigned to the Carrier named. The Hazardous Waste Facility can and will accept this shipment of hazardous waste, and has a valid permit to do so. I certify that the foregoing is true and correct to the best of my knowledge.

(12) DATE SHIPPED	AUTHORIZED SIGNATURE (13)	TITLE (14)
11/20/83	[signature]	

(37) MAIL TO: HAZARDOUS WASTE, MIS
1322 WASHINGTON AVE. S.
HOPKINS, MN 55343

In case of a spill in Minnesota, immediately call the MPCA 24-hour emergency number, (612) 296-7373, and the National Response Center, (800) 424-8802

1. White—Hazardous Waste Facility Mail to Generator
2. Yellow—Generator (Shipper) Mail to (37)
3. Pink—Hazardous Waste Facility Mail to (37)
4. Orange—Hazardous Waste Facility Mail to Generator
5. Gold—Hazardous Waste Facility Retain
6. Blue—Transporter (Carrier) Retain
7. Green—Generator (Shipper) Retain

PQ-00280-02
HC 5406 (4-80)

T0210 RT-50 6RM 11-21-83

672900

See reverse side for instructions
Please TYPE or PRINT clearly using a ball point pen — PRESS HARD

State of Minnesota
HAZARDOUS WASTE SHIPPING PAPER

(1) SHIPMENT NO. 000007

006250

GENERATOR (SHIPPER)

GENERATOR—SHIPPER NAME (2) WORUM CHEMICAL CO.	SITE I.D. NO. (3) 1230017
PICKUP ADDRESS (4) 2130 KASOTA AVE	EPA I.D. MND 006213664
CITY, STATE, ZIP CODE (5) ST PAUL MINN. 55108	PHONE NO. (6) 612-645-7224
BUSINESS ADDRESS (7) SAME	

(8) No	QUANTITY SHIPPED	HAZ. MAT.	KIND OF UNIT—PROPER DOT SHIPPING NAME	DOT HAZ. CLASS	SHIPPING WEIGHT
1	4 X 55	X	DRUMS - WASTE FLAMMABLE LIQUID N.O.S. UN1133	FLAMMABLE LIQUID	37800#
2					
3					
4			4620		
5					

(9) Does Generator Plan authorize commingling? ☐ YES ☐ NO
(If "YES", attach sheet listing other generators and quantities of waste.)

(10) No	WASTE CODE	MPCA HAZARDOUS PROPERTY	APPROXIMATE PRODUCTION DATES From	To
1	D001	FLAMMABLE LIQUIDS		
2				
3				
4				
5				

(11) SPECIAL INSTRUCTIONS INCINERATION

DIAMOND VOGEL PAINTS
(MARWIN PAINTS)

4620 gal

☐ SPECIAL EMERGENCY PROCEDURE ATTACHED

SHIPPER'S CERTIFICATION: This is to certify that the above named materials are properly classified, described, packaged, marked and labelled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and EPA.

The wastes described above were consigned to the Carrier named. The Hazardous Waste Facility can and will accept this shipment of hazardous waste, and has a valid permit to do so. I certify that the foregoing is true and correct to the best of my knowledge.

DATE SHIPPED (12)	AUTHORIZED SIGNATURE (13)	TITLE
10/26/83	X	

TRANSPORTER (CARRIER)

TRANSPORTER NAME (15) DELARIA TRANSPORT INC	MPCA REGISTRATION NO (16)
BUSINESS ADDRESS (17) 327 - 8TH AVE. N.W	EPA I.D. MND 070735042
CITY, STATE, ZIP CODE NEW BRIGHTON MINN 55112	PHONE NO. (19) 612-633-1523

DATE RECEIVED (20) 10/26/83 — The wastes described above were received by me for shipment to the named Hazardous Waste Facility.

AUTHORIZED SIGNATURE (21) X — TITLE (22) DRIVER

	MPCA REGISTRATION NO.	MPCA REGISTRATION NO.
SHIPMENT INTERLINED (23)		
	EPA I.D.	EPA I.D.
DATE RECEIVED (24)	/ /	/ /
AUTHORIZED SIGNATURE (25)	X	X

DISPOSAL (OPERATOR)

FACILITY NAME (26) AMERICAN CHEMICAL SERVICES INC	STATE PERMIT/LICENSE NO. (27)
SITE ADDRESS (28) 420 So COLFAX AVE	EPA I.D. IND 016360265
CITY, STATE, ZIP CODE (29) GRIFFITH, INDIANA 46319	PHONE NO. (30) 219-924-4370

DATE RECEIVED (31) 10/27/83 — The wastes described above have been received for processing as per current and valid state permit and/or other applicable laws and ordinances. (31a) ☐ For exceptions see attachment.

AUTHORIZED SIGNATURE (32) X — TITLE (33) SUP

DATE WASTE DISPOSED (34) / / — I certify that the above named wastes have been processed and/or disposed.

AUTHORIZED SIGNATURE (35) X — TITLE (36)

(37) MAIL TO: HAZARDOUS WASTE, MIS
322 WASHINGTON AVE. S.
HOPKINS, MN 55343

In case of a spill in Minnesota, immediately call the MPCA 24-hour emergency number, (612) 296-7373, and the National Response Center, (800) 424-8802

1. White—Hazardous Waste Facility Mail to Generator
2. Yellow—Generator (Shipper) Mail to (37)
3. Pink—Hazardous Waste Facility Mail to (37)
4. Orange—Hazardous Waste Facility Mail to Generator
5. Gold—Hazardous Waste Facility Retain
6. Blue—Transporter (Carrier) Retain
7. Green—Generator (Shipper) Retain

PQ-00280-02
HC 5406 (4-80)

TO 204 KT-50 GRM 10.27.83

See reverse side for instructions
Please TYPE or PRINT clearly using a ball point pen — PRESS HARD

State of Minnesota
HAZARDOUS WASTE SHIPPING PAPER

(1) SHIPMENT NO. 00050

006251

GENERATOR (SHIPPER)

GENERATOR—SHIPPER NAME	SITE I.D. NO.
(2) Worum Chemical Co.	(3) 1230017
PICKUP ADDRESS	EPA I.D.
(4) 2130 Kasota Ave	MND 006213664
CITY, STATE, ZIP CODE	PHONE NO.
(5) St Paul Minn 55108	(6) 612-645-9224
BUSINESS ADDRESS	
(7) Same	

TRANSPORTER (CARRIER)

TRANSPORTER NAME	MPCA REGISTRATION NO.
(15) ABC Services Inc	(16)
BUSINESS ADDRESS	EPA I.D.
(17) 5400 - 49th Street	WID 076159237
CITY, STATE, ZIP CODE	PHONE NO.
(18) Kenosha Wisc 53142	(19) 414-657-6222

DATE RECEIVED (20) 5/24/83 — The wastes described above were received by me for shipment to the named Hazardous Waste Facility.

AUTHORIZED SIGNATURE (21) — TITLE (22)

SHIPMENT INTERLINED (23) — MPCA REGISTRATION NO. — EPA I.D.

DATE RECEIVED (24) — AUTHORIZED SIGNATURE (25)

(8) No.	QUANTITY SHIPPED	HAZ. MAT.	KIND OF UNIT—PROPER DOT SHIPPING NAME	DOT HAZ. CLASS	SHIPPING WEIGHT
1	22	✓	Waste Flammable Liquids, N.O.S.	Flammable Liquids	10775
2			UN 1993		
3					
4			121800		
5					

(9) Does Generator Plan authorize commingling? ☐ YES ☐ NO
(If "YES", attach sheet listing other generators and quantities of waste.)

(10) No.	WASTE CODE	MPCA HAZARDOUS PROPERTY	APPROXIMATE PRODUCTION DATES From	To
1	D001	Flammable Liquids		
2				
3				
4				
5				

TREATMENT/DISPOSAL FACILITY

FACILITY NAME (26) American Chemical Services Inc — STATE PERMIT/LICENSE NO. (27)

SITE ADDRESS (28) 420 So Colfax Ave — EPA I.D. IND 016360265

CITY, STATE, ZIP CODE (29) Griffith Indiana 56319 — PHONE NO. (30) 219-924-4390

DATE RECEIVED (31) 5/27/83 — The wastes described above have been received for processing as per current and valid state permit and/or other applicable laws and ordinances. (31a) ☐ For exceptions see attachment.

AUTHORIZED SIGNATURE (32) — TITLE (33)

DATE WASTE DISPOSED (34) 5/27/83 — I certify that the above named wastes have been processed and/or disposed.

AUTHORIZED SIGNATURE (35) — TITLE (36)

(37) MAIL TO: HAZARDOUS WASTE, MIS
322 WASHINGTON AVE. S.
HOPKINS, MN 55343

(11) SPECIAL INSTRUCTIONS Disposal
7- PDI Inc.
2. Wm. Poppenberger
10- Meyers Printing
2- Electro Phenter
1- Ultra Mfg Co.

22 drums =
1210 gal

☐ SPECIAL EMERGENCY PROCEDURE ATTACHED

In case of a spill in Minnesota, immediately call the MPCA 24-hour emergency number, (612) 296-7373, and the National Response Center, (800) 424-8802

SHIPPER'S CERTIFICATION: This is to certify that the above named materials are properly classified, described, packaged, marked and labelled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and EPA.

The wastes described above were consigned to the Carrier named. The Hazardous Waste Facility can and will accept this shipment of hazardous waste, and has a valid permit to do so. I certify that the foregoing is true and correct to the best of my knowledge.

DATE SHIPPED (12) 5/25/83 — AUTHORIZED SIGNATURE (13) — TITLE (14)

1. White—Hazardous Waste Facility Mail to Generator
2. Yellow—Generator (Shipper) Mail to (37)
3. Pink—Hazardous Waste Facility Mail to (37)
4. Orange—Hazardous Waste Facility Mail to Generator
5. Gold—Hazardous Waste Facility Retain
6. Blue—Transporter (Carrier) Retain
7. Green—Generator (Shipper) Retain

PQ-00280-02
HC 5406 (4-80)

On dock To 204F T-50 6/01 6-1-83

See reverse side for instructions
Please TYPE or PRINT clearly using a ball point pen — PRESS HARD

State of Minnesota
HAZARDOUS WASTE SHIPPING PAPER

#5

(1) SHIPMENT NO. [ ][ ][ ][ ][ ][ ]

006252

GENERATOR (SHIPPER)

(2) GENERATOR—SHIPPER NAME: [illegible] Chemical Company	(3) SITE I.D. NO.: 1230017
(4) PICKUP ADDRESS: 312 S. Klein Ave	EPA I.D.: MND 006213664
(5) CITY, STATE, ZIP CODE: St Paul Minn 55108	(6) PHONE NO.: 612-645-9724
(7) BUSINESS ADDRESS: Same	

TRANSPORTER (CARRIER)

(15) TRANSPORTER NAME: ABC Services Inc	(16) MPCA REGISTRATION NO
(17) BUSINESS ADDRESS: [illegible] 147th Street	EPA I.D.: IND 076159837
CITY, STATE, ZIP CODE: Kenosha Wisc 53140	(19) PHONE NO.: 414-[illegible]

(20) DATE RECEIVED: 4/4/83 — The wastes described above were received by me for shipment to the named Hazardous Waste Facility.

(21) AUTHORIZED SIGNATURE: x [signature] — (22) TITLE: Pres.

(23) SHIPMENT INTERLINED — MPCA REGISTRATION NO. — EPA I.D.

(24) DATE RECEIVED: / / — (25) AUTHORIZED SIGNATURE: x

(8) No.	QUANTITY SHIPPED	HAZ. MAT.	KIND OF UNIT—PROPER DOT SHIPPING NAME	DOT HAZ. CLASS	SHIPPING WEIGHT
1	41	X	Waste Flammable liquids, NOS UNIT3	Flammable liquids	17850#
2					
3					
4					
5					

2255 gal

(9) Does Generator Plan authorize commingling? ☐ YES ☐ NO
(If "YES", attach sheet listing other generators and quantities of waste.)

(10) No.	WASTE CODE	MPCA HAZARDOUS PROPERTY	APPROXIMATE PRODUCTION DATES From	To
1	D001	Flammable liquids		
2				
3				
4				
5				

HAZARDOUS WASTE FACILITY

(26) FACILITY NAME: Ameriland Chemical Services Inc	(27) STATE PERMIT/LICENSE NO.
(28) SITE ADDRESS: 410 So Collins Ave	EPA I.D.: IND 016360415
CITY, STATE, ZIP CODE: Crossett Indiana 61319	(30) PHONE NO.: 219-924-4320

(31) DATE RECEIVED: 4/7/83 — The wastes described above have been received for processing as per current and valid state permit and/or other applicable laws and ordinances. (31a) ☐ For exceptions see attachment.

(32) AUTHORIZED SIGNATURE: x [signature] — TITLE: Receiver

(34) DATE WASTE DISPOSED: 4/7/83 — I certify that the above named wastes have been processed and/or disposed.

(35) AUTHORIZED SIGNATURE: x [signature] — (36) TITLE: Supr

(11) SPECIAL INSTRUCTIONS: Disposal

12- Applied Acr
11- Meyers Printing
10- Brown Bloodgett (Dawson Patterson)
3- Merillat Ind
2- Walburn Ltd (Smith-Ocl)
1- Flecing Painter
1- Worun Chemical Co

☐ SPECIAL EMERGENCY PROCEDURE ATTACHED

41 drms = 2255 gal

SHIPPER'S CERTIFICATION: This is to certify that the above named materials are prop marked and labelled and are in proper condition for transportation according to the appli of Transportation and EPA.

The wastes described above were consigned to the Carrier named. The Hazardous Was shipment of hazardous waste, and has a valid permit to do so. I certify that the foregoing of my knowledge.

(12) DATE SHIPPED: 4/4/83 — (13) AUTHORIZED SIGNATURE: x [signature] — (14)

(37) MAIL TO: HAZARDOUS WASTE, MIS
322 WASHINGTON AVE. S.
HOPKINS, MN 55343

In case of a spill in Minnesota, immediately call the MPCA 24-hour emergency number, (612) 296-7373, and the National Response Center, (800) 424-8802

ite—Hazardous Waste Facility Mail to Generator
llow—Generator (Shipper) Mail to (37)
nk—Hazardous Waste Facility Mail to (37)
ange—Hazardous Waste Facility Mail to Generator

5. Gold—Hazardous Waste Facility Retain
6. Blue—Transporter (Carrier) Retain
7. Green—Generator (Shipper) Retain

PQ-00280-02
HC 5406 (4-80)

To 204 E T-50 GRM 4.7.83

See reverse side for instructions
Please TYPE or PRINT clearly using a ball point pen — PRESS HARD

State of Minnesota
HAZARDOUS WASTE SHIPPING PAPER

(1) SHIPMENT NO. 1984-1

GENERATOR (SHIPPER)

GENERATOR—SHIPPER NAME (2) Worum Chemical Company	SITE I.D. NO. (3) 1230017
PICKUP ADDRESS (4) 2130 Kasota Avenue	EPA I.D. MND 006213664
CITY, STATE, ZIP CODE (5) St. Paul, MN 55108	PHONE NO. (6) 612-645-9224
BUSINESS ADDRESS (7) Same	

(8) No.	QUANTITY SHIPPED	HAZ. MAT.	KIND OF UNIT—PROPER DOT SHIPPING NAME	DOT HAZ. CLASS	SHIPPING WEIGHT
1	39X55	X	Drums-Waste Flammable	Flammable	17550#
2			Liquid, N.O.S. UN 1993	Liquid	
3					
4					
5					

(9) Does Generator Plan authorize commingling? ☐ YES ☐ NO
(If "YES", attach sheet listing other generators and quantities of waste.)

(10) No.	WASTE CODE	MPCA HAZARDOUS PROPERTY	APPROXIMATE PRODUCTION DATES From	To
1	D001	Flammable Liquid		
2				
3				
4				
5				

39 dms = 2145

(11) SPECIAL INSTRUCTIONS

Incineration
Marwin Paints Inc. 38 drums
Ultra Mfg. Co. 1 drum

☐ SPECIAL EMERGENCY PROCEDURE ATTACHED

SHIPPER'S CERTIFICATION: This is to certify that the above named materials are properly classified, described, packaged, marked and labelled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and EPA.

The wastes described above were consigned to the Carrier named. The Hazardous Waste Facility can and will accept this shipment of hazardous waste, and has a valid permit to do so. I certify that the foregoing is true and correct to the best of my knowledge.

DATE (12) SHIPPED	AUTHORIZED SIGNATURE (13) x	TITLE (14)
2/14/84	[signature]	

TRANSPORTER (CARRIER)

TRANSPORTER NAME (15) Delaria Transport Inc.	MPCA REGISTRATION NO. (16)
BUSINESS ADDRESS (17) 327 - 8th Avenue N.W.	EPA I.D. MND 070735048
CITY, STATE, ZIP CODE (18) New Brighton, MN 55112	PHONE NO. (19) 612-633-1523
DATE RECEIVED (20) / /	The wastes described above were received by me for shipment to the named Hazardous Waste Facility.
AUTHORIZED SIGNATURE (21) x [signature]	TITLE (22) Driver

SHIPMENT INTERLINED (23)	MPCA REGISTRATION NO.	MPCA REGISTRATION NO.
	EPA I.D.	EPA I.D.
DATE RECEIVED (24)	/ /	/ /
AUTHORIZED SIGNATURE (25)	x	x

HAZARDOUS WASTE FACILITY

FACILITY NAME (26) American Chemical Service, Inc.	STATE PERMIT/LICENSE NO. (27)
SITE ADDRESS (28) 420 So. Colfax Ave.	EPA I.D. IND 016360265
CITY, STATE, ZIP CODE (29) Griffith, Indiana 56319	PHONE NO. (30) 219-924-4370
DATE RECEIVED (31) 2/15/84	The wastes described above have been received for processing as per current and valid state permit and/or other applicable laws and ordinances. (31a) ☐ For exceptions see attachment.*
AUTHORIZED SIGNATURE (32) x [signature]	TITLE (33) SUP
DATE WASTE DISPOSED (34) / /	I certify that the above named wastes have been processed and/or disposed.
AUTHORIZED SIGNATURE (35) x	TITLE (36)

(37) MAIL TO: HAZARDOUS WASTE, MIS
322 WASHINGTON AVE. S.
HOPKINS, MN 55343

In case of a spill in Minnesota, immediately call the MPCA 24-hour emergency number, (612) 296-7373, and the National Response Center, (800) 424-8802

1. White—Hazardous Waste Facility Mail to Generator
2. Yellow—Generator (Shipper) Mail to (37)
3. Pink—Hazardous Waste Facility Mail to (37)
4. Orange—Hazardous Waste Facility Mail to Generator
5. Gold—Hazardous Waste Facility Retain
6. Blue—Transporter (Carrier) Retain
7. Green—Generator (Shipper) Retain

PQ-00280-02
HC 5406 (4-80)

To 204 RT-50 GRM 2.14.84

006597

See reverse side for instructions
Please TYPE or PRINT clearly using a ball point pen — PRESS HARD

State of Minnesota
HAZARDOUS WASTE SHIPPING PAPER

(1) SHIPMENT NO. 1 9 8 4 - 2

006548

GENERATOR (SHIPPER)

GENERATOR—SHIPPER NAME	SITE I.D. NO.
(2) HORUM CHEMICAL COMPANY	(3) 1230017
PICKUP ADDRESS	EPA I.D.
(4) 2130 Kasota Avenue	MND 006213664
CITY, STATE, ZIP CODE	PHONE NO.
(5) St. Paul, MN 55108	(6) 612-645-9224
BUSINESS ADDRESS	
(7) Same	

(8) No.	QUANTITY SHIPPED	HAZ. MAT.	KIND OF UNIT — PROPER DOT SHIPPING NAME	DOT HAZ. CLASS	SHIPPING WEIGHT
1	5795 Gals	X	Bulk - Waste Flammable Liquid, N.O.S. UN 1993	Flammable Liquid	42300#
2					
3					
4					
5					

(9) Does Generator Plan authorize commingling? ☐ YES ☐ NO
(If "YES", attach sheet listing other generators and quantities of waste.)

(10) No.	WASTE CODE	MPCA HAZARDOUS PROPERTY	APPROXIMATE PRODUCTION DATES From	To
1	D001	Flammable Liquid		
2		Mixture of alcohol,		
3		naphtha, ketones		
4				
5				

(11) SPECIAL INSTRUCTIONS
For incineration
W.T. #19018

(30) ☐ SPECIAL EMERGENCY PROCEDURE ATTACHED

SHIPPER'S CERTIFICATION: This is to certify that the above named materials are properly classified, described, packaged, marked and labelled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and EPA.

The wastes described above were consigned to the Carrier named. The Hazardous Waste Facility can and will accept this shipment of hazardous waste, and has a valid permit to do so. I certify that the foregoing is true and correct to the best of my knowledge.

DATE SHIPPED (12)	AUTHORIZED SIGNATURE (13)	TITLE
4/16/84	X	

TRANSPORTER (CARRIER)

TRANSPORTER NAME	MPCA REGISTRATION NO.
(15) Delaria Transport Inc.	(16)
BUSINESS ADDRESS	EPA I.D.
(17) 327 - 8th Avenue N.W.	MND 070735043
CITY, STATE, ZIP CODE	PHONE NO.
(18) New Brighton, MN 55112	(19) 612-633-1523

DATE RECEIVED (20) 4/16/84 — The wastes described above were received by me for shipment to the named Hazardous Waste Facility.

AUTHORIZED SIGNATURE (21) X — TITLE (22)

SHIPMENT INTERLINED (23)	MPCA REGISTRATION NO.	MPCA REGISTRATION NO.
	EPA I.D.	EPA I.D.
DATE RECEIVED (24)	/ /	/ /
AUTHORIZED SIGNATURE (25)	X	

HAZARDOUS WASTE FACILITY

FACILITY NAME	STATE PERMIT/LICENSE NO.
(26) American Chemical Service Inc.	(27)
SITE ADDRESS	EPA I.D.
(28) 420 So. Colfax Avenue	IND 016360265
CITY, STATE, ZIP CODE	PHONE NO.
(29) Griffith, IN 56319	(30) 219-924-4370

DATE RECEIVED (31) 4/17/84 — The wastes described above have been received for processing as per current and valid state permit and/or other applicable laws and ordinances. ☐ For exceptions see attachment.

AUTHORIZED SIGNATURE (32) X — TITLE (33)

DATE WASTE DISPOSED (34) / / — I certify that the above named wastes have been processed and/or disposed.

AUTHORIZED SIGNATURE (35) X — TITLE (36)

(37) MAIL TO: HAZARDOUS WASTE, MIS
322 WASHINGTON AVE. S.
HOPKINS, MN 55343

In case of a spill in Minnesota, immediately call the MPCA 24-hour emergency number, (612) 296-7373, and the National Response Center, (800) 424-8802

1. White—Hazardous Waste Facility Mail to Generator
2. Yellow—Generator (Shipper) Mail to (37)
3. Pink—Hazardous Waste Facility Mail to (37)
4. Orange—Hazardous Waste Facility Mail to Generator
5. Gold—Hazardous Waste Facility Retain
6. Blue—Transporter (Carrier) Retain
7. Green—Generator (Shipper) Retain

PQ-00280-02
HC 5408 (4-80)

See reverse side for instructions
Please TYPE or PRINT clearly using a ball point pen — PRESS HARD

State of Minnesota
HAZARDOUS WASTE SHIPPING PAPER

(1) SHIPMENT NO. 1984-3

GENERATOR SHIPPER

GENERATOR—SHIPPER NAME (2) Worum Chemical Company	SITE I.D. NO. (3) 1230017
PICKUP ADDRESS (4) 2130 Kasota Avenue	EPA I.D. MND 006213664
CITY, STATE, ZIP CODE (5) St. Paul, MN 55108	PHONE NO. (6) 612-645-9224
BUSINESS ADDRESS (7) Same	

(8) No.	QUANTITY SHIPPED	HAZ. MAT.	KIND OF UNIT—PROPER DOT SHIPPING NAME	DOT HAZ. CLASS	SHIPPING WEIGHT
1	26X55	X	Drums Waste Flammable Liquid N.O.S. UN 1993	Flammable Liquid	11,172
2					
3					
4					
5					

(9) Does Generator Plan authorize commingling? ☐ YES ☐ NO
(If "YES", attach sheet listing other generators and quantities of waste.)

(10) No.	WASTE CODE	MPCA HAZARDOUS PROPERTY	APPROXIMATE PRODUCTION DATES From	To
1	D001	Flammable Liquid		
2				
3				
4				
5				

(11) SPECIAL INSTRUCTIONS
For incineration
Electro Painters — 4
Marwin Paints — 17
Merillat Ind. — 3
PDI Inc. — 2

26 dms =
1430

☐ SPECIAL EMERGENCY PROCEDURE ATTACHED

SHIPPER'S CERTIFICATION: This is to certify that the above named materials are properly classified, described, packaged, marked and labelled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and EPA.

The wastes described above were consigned to the Carrier named. The Hazardous Waste Facility can and will accept this shipment of hazardous waste, and has a valid permit to do so. I certify that the foregoing is true and correct to the best of my knowledge.

DATE (12) SHIPPED	AUTHORIZED SIGNATURE (13)	TITLE (14)
5/24/84	[signature]	

TRANSPORTER (CARRIER)

TRANSPORTER NAME (15) Delaria Transport Inc.	MPCA REGISTRATION NO (16)
BUSINESS ADDRESS (17) 327 - 8th Avenue N.W.	EPA I.D. MND 070735048
CITY, STATE, ZIP CODE (18) New Brighton, MN 55112	PHONE NO. (19) 612-633-1523
DATE RECEIVED (20) 5/24/84	The wastes described above were received by me for shipment to the named Hazardous Waste Facility.
AUTHORIZED SIGNATURE (21) x [signature]	TITLE (22) Driver

SHIPMENT INTERLINED (23)	MPCA REGISTRATION NO.	MPCA REGISTRATION NO.
	EPA I.D.	EPA I.D.
DATE RECEIVED (24)	/ /	/ /
AUTHORIZED SIGNATURE (25)	x	x

HAZARDOUS WASTE FACILITY

FACILITY NAME (26) American Chemical Service Inc.	STATE PERMIT/LICENSE NO (27)
SITE ADDRESS (28) 420 So. Colfax Avenue	EPA I.D. IND 016360265
CITY, STATE, ZIP CODE (29) Griffith, IN 56319	PHONE NO. (30) 219-924-4370
DATE RECEIVED (31) / /	The wastes described above have been received for processing as per current and valid state permit and/or other applicable laws and ordinances. (31a) ☐ For exceptions see attachment.
AUTHORIZED SIGNATURE (32) x [signature] 5 84	TITLE (33)
DATE WASTE DISPOSED (34) / /	I certify that the above named wastes have been processed and/or disposed.
AUTHORIZED SIGNATURE (35) x	TITLE (36)

(37) MAIL TO: HAZARDOUS WASTE, MIS
322 WASHINGTON AVE. S.
HOPKINS, MN 55343

In case of a spill in Minnesota, immediately call the MPCA 24-hour emergency number, (612) 296-7373, and the National Response Center, (800) 424-8802

1. White—Hazardous Waste Facility Mail to Generator
2. Yellow—Generator (Shipper) Mail to (37)
3. Pink—Hazardous Waste Facility Mail to (37)
4. Orange—Hazardous Waste Facility Mail to Generator
5. Gold—Hazardous Waste Facility Retain
8. Blue—Transporter (Carrier) Retain
7. Green—Generator (Shipper) Retain

PQ-00280-02
HC 5406 (4-

204K T-50

006599

See reverse for instructions
Please PRINT clear, use ball point pen — PRESS

State of Minnesota
HAZARDOUS WASTE SHIPPING PAPER

(1) SHIPMENT NO. 1 9 8 4 - 4

GENERATOR (SHIPPER)

GENERATOR—SHIPPER NAME (2) Worum Chemical Company	SITE I.D. NO. (3) 1230017
PICKUP ADDRESS (4) 2130 Kasota Avenue	EPA I.D. MND 006213664
CITY, STATE, ZIP CODE (5) St. Paul, MN 55108	PHONE NO. (6) 612-645-9224
BUSINESS ADDRESS (7)	

(8) No.	QUANTITY SHIPPED	HAZ. MAT.	KIND OF UNIT—PROPER DOT SHIPPING NAME	DOT HAZ. CLASS	SHIPPING WEIGHT
1	4910	X	Bulk - Waste Flammable	Flammable	35840 d
2	Gallons		Liquid, N.O.S. UN 1993	Liquid	
3					
4					
5					

(9) Does Generator Plan authorize commingling? ☐ YES ☐ NO
(If "YES", attach sheet listing other generators and quantities of waste.)

(10) No.	WASTE CODE	MPCA HAZARDOUS PROPERTY	APPROXIMATE PRODUCTION DATES From	To
1	D 0 0 1	Flammable Liquid		
2		mixture of alcohol,		
3		naphtha, ketones		
4				
5				

(11) SPECIAL INSTRUCTIONS
For incineration
W.T. #79413

☐ SPECIAL EMERGENCY PROCEDURE ATTACHED

SHIPPER'S CERTIFICATION: This is to certify that the above named materials are properly classified, described, packaged, marked and labelled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and EPA.

The wastes described above were consigned to the Carrier named. The Hazardous Waste Facility can and will accept this shipment of hazardous waste, and has a valid permit to do so. I certify that the foregoing is true and correct to the best of my knowledge.

DATE (12) SHIPPED	AUTHORIZED SIGNATURE (13)	TITLE (14)
6/14/84	X	

TRANSPORTER (CARRIER)

TRANSPORTER NAME (15) Delaria Transport, Inc.	MPCA REGISTRATION NO. (16)
BUSINESS ADDRESS (17) 327 - 8th Avenue N.W.	EPA I.D. MND 070735048
CITY, STATE, ZIP CODE (18) New Brighton, MN 55112	PHONE NO. (19) 612-633-1523
DATE RECEIVED (20) 6/14/84	The wastes described above were received by me for shipment to the named Hazardous Waste Facility.
AUTHORIZED SIGNATURE (21) x John Bradley	TITLE (22) Driver

SHIPMENT INTERLINED (23)	MPCA REGISTRATION NO.	MPCA REGISTRATION NO.
	EPA I.D.	EPA I.D.
DATE RECEIVED (24)	/ /	/ /
AUTHORIZED SIGNATURE (25)	x	x

HAZARDOUS WASTE FACILITY

FACILITY NAME (26) American Chemical Service Inc.	STATE PERMIT/LICENSE NO. (27)
SITE ADDRESS (28) 420 So. Colfax Avenue	EPA I.D. IND 016360265
CITY, STATE, ZIP CODE (29) Griffith, IN 56319	PHONE NO. (30) 219-924-4370
DATE RECEIVED (31) / /	The wastes described above have been received for processing as per current and valid state permit and/or other applicable laws and ordinances. (31a) ☐ For exceptions see attachment.
AUTHORIZED SIGNATURE (32) x	TITLE (33)
DATE WASTE DISPOSED (34) 6/15/84	I certify that the above named wastes have been processed and/or disposed.
AUTHORIZED SIGNATURE (35) x [signature]	TITLE (36) Unloader

(37) MAIL TO: HAZARDOUS WASTE, MIS
322 WASHINGTON AVE. S.
HOPKINS, MN 55343

In case of a spill in Minnesota, immediately call the MPCA 24-hour emergency number, (612) 296-7373, and the National Response Center, (800) 424-8802

1. White—Hazardous Waste Facility Mail to Generator
2. Yellow—Generator (Shipper) Mail to (37)
3. Pink—Hazardous Waste Facility Mail to (37)
4. Orange—Hazardous Waste Facility Mail to Generator
5. Gold—Hazardous Waste Facility Retain
6. Blue—Transporter (Carrier) Retain
7. Green—Generator (Shipper) Retain

205 - 206 R

006600

See reverse side for instructions
Please TYPE or PRINT clearly using a ball point pen — PRESS HARD

State of Minnesota
HAZARDOUS WASTE SHIPPING PAPER

(1) SHIPMENT NO. 1 9 8 4 5

GENERATOR (SHIPPER)

GENERATOR—SHIPPER NAME (2) Worum Chemical Company	SITE I.D. NO. (3) 1230017
PICKUP ADDRESS (4) 2130 Kasota Avenue	EPA I.D. MND 006213664
CITY, STATE, ZIP CODE (5) St. Paul, MN 55108	PHONE NO. (6) 612-645-9224
BUSINESS ADDRESS (7)	

(8) No.	QUANTITY SHIPPED	HAZ. MAT.	KIND OF UNIT—PROPER DOT SHIPPING NAME	DOT HAZ. CLASS	SHIPPING WEIGHT
1	61X55	X	Drums - Waste Flammable	Flammable	33,850
2			Liquid, N.O.S. UN 1993	Liquid	
3					
4					
5					

(9) Does Generator Plan authorize commingling? ☐ YES ☐ NO
(If "YES", attach sheet listing other generators and quantities of waste.)

(10) No.	WASTE CODE	MPCA HAZARDOUS PROPERTY
1	D 0 0 1	Flammable Liquid
2		
3		
4		
5		

61 dms =
3355

(11) SPECIAL INSTRUCTIONS

For incineration —
Meyers Printing - 7 — 204 R T-50
Universal Coating - 14 — 204 R T-50
American Can - 21 — 206 R T-50
Marwin Paints - 19 — 204 R T-50

☐ SPECIAL EMERGENCY PROCEDURE ATTACHED

SHIPPER'S CERTIFICATION: This is to certify that the above named materials are properly classified, described, packaged, marked and labelled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and EPA.

The wastes described above were consigned to the Carrier named. The Hazardous Waste Facility can and will accept this shipment of hazardous waste, and has a valid permit to do so. I certify that the foregoing is true and correct to the best of my knowledge.

DATE (12) SHIPPED	AUTHORIZED SIGNATURE (13) x	TITLE (14)
8/1/84	[signature]	

TRANSPORTER (CARRIER)

TRANSPORTER NAME (15) Delaria Transport, Inc.	MPCA REGISTRATION NO. (16)
BUSINESS ADDRESS (17) 327 - 8th Avenue N.W.	EPA I.D. MND 070735048
CITY, STATE, ZIP CODE (18) New Brighton, MN 55112	PHONE NO. (19) 612-633-1523
DATE RECEIVED (20) 8/1/84	The wastes described above were received by me for shipment to the named Hazardous Waste Facility.
AUTHORIZED SIGNATURE (21) x [signature]	TITLE (22)

SHIPMENT INTERLINED (23)	MPCA REGISTRATION NO.	MPCA REGISTRATION NO.
	EPA I.D.	EPA I.D.
DATE RECEIVED (24)	/ /	/ /
AUTHORIZED SIGNATURE (25)	x	x

HAZARDOUS WASTE FACILITY

FACILITY NAME (26) American Chemical Service, Inc.	STATE PERMIT/LICENSE NO. (27)
SITE ADDRESS (28) 520 So. Colfax Avenue	EPA I.D. IND 016360265
CITY, STATE, ZIP CODE (29) Griffith, IN 56319	PHONE NO. (30) 219-924-4370
DATE RECEIVED (31) 9/1/84	The wastes described above have been received for processing as per current and valid state permit and/or other applicable laws and ordinances. (31a) ☐ For exceptions see attachment.
AUTHORIZED SIGNATURE (32) x [signature]	TITLE (33) Sup
DATE WASTE DISPOSED (34) / /	I certify that the above named wastes have been processed and/or disposed.
AUTHORIZED SIGNATURE (35) x	TITLE (36)

(37) MAIL TO: HAZARDOUS WASTE, MIS
322 WASHINGTON AVE. S.
HOPKINS, MN 55343

In case of a spill in Minnesota, immediately call the MPCA 24-hour emergency number, (612) 296-7373, and the National Response Center, (800) 424-8802

1. White—Hazardous Waste Facility Mail to Generator
2. Yellow—Generator (Shipper) Mail to (37)
3. Pink—Hazardous Waste Facility Mail to (37)
4. Orange—Hazardous Waste Facility Mail to Generator
5. Gold—Hazardous Waste Facility Retain
6. Blue—Transporter (Carrier) Retain
7. Green—Generator (Shipper) Retain

PQ-00280-02
HC 5406 (4-80)

006601

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MND006213664	Manifest Document No. 19846	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.

GENERATOR

3. Generator's Name and Mailing Address
Worum Chemical Company
2130 Kasota Avenue
St. Paul, MN 55108

4. Generator's Phone (612) 645-9224

A. State Manifest Document Number

B. State Generator's ID 1230017

5. Transporter 1 Company Name: Delaria Transport, Inc.
6. US EPA ID Number: MND070703504 8
C. State Transporter's ID
D. Transporter's Phone 612-633-1523

7. Transporter 2 Company Name
8. US EPA ID Number
E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Service, Inc.
420 So. Colfax Ave.
Griffith, IN 56319
10. US EPA ID Number: IND016360265
G. State Facility's ID
H. Facility's Phone 219-924-4370

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	Waste Flammable Liquid, N.O.S. - Flammable Liquid UN 1993 (contains alcohol, ketones, naphtha)	X	1	TT	5858 42760	G P	D001
b.							
c.							
d.							

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
For Incineration
W.T. #29814

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.

Printed/Typed Name	Signature	Date (Month Day Year)
John Pallansch		11 01 84

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name	Signature	Date (Month Day Year)
		11 2 84

T/S/D/F COPY
206K T-52

066062

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.
MND006213664	19847		

GENERATOR

3. Generator's Name and Mailing Address: Worum Chemical Company, 2130 Kasota Avenue, St. Paul, MN 55108

4. Generator's Phone: (612) 645-9224

A. State Manifest Document Number:

B. State Generator's ID: 1230017

5. Transporter 1 Company Name: Delaria Transport, Inc.

6. US EPA ID Number: MND070735048

C. State Transporter's ID:

D. Transporter's Phone: 612-633-1523

7. Transporter 2 Company Name:

8. US EPA ID Number:

E. State Transporter's ID:

F. Transporter's Phone:

9. Designated Facility Name and Site Address: American Chemical Service, Inc., 420 So. Colfax Avenue, Griffith, IN 56319

10. US EPA ID Number: INDO16360265

G. State Facility's ID:

H. Facility's Phone: 219-924-4370

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	Waste Flammable Liquid, N.O.S. - Flammable Liquid - UN 1993 (contains alcohol, ketones, naphtha)	X	1	TT	3984	G	D001
b.							
c.							
d.							

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

For Incineration
W.T. #30811

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.

Printed/Typed Name	Signature	Date (Month Day Year)
John Pallansch		12 26 84

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)
[illegible]	[illegible]	

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name	Signature	Date (Month Day Year)
EDUNFEE	[illegible]	12 26 84

T/S/D/F COPY

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.
MND006213664	19-851		

GENERATOR

3. Generator's Name and Mailing Address: Norum Chemical Company, 2130 Kasota Avenue, St. Paul, MN 55108

4. Generator's Phone (612) 645-9224

A. State Manifest Document Number:

B. State Generator's ID:

5. Transporter 1 Company Name: Delaria Transport, Inc.

6. US EPA ID Number: MND079735048

C. State Transporter's ID:

D. Transporter's Phone:

7. Transporter 2 Company Name:

8. US EPA ID Number:

E. State Transporter's ID:

F. Transporter's Phone: 612-633-1523

9. Designated Facility Name and Site Address: American Chemical Service, Inc., 420 So. Colfax Avenue, Griffith, IN 56319

10. US EPA ID Number: INDO16360265

G. State Facility's ID:

H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Val	I. Waste No.
a. Waste Flammable Liquid, N.O.S. - Flammable Liquid UN 1993 (contains toluene, xylene, ketones & alcohol)	X	18	DM	0997	P	D001
b.						
c.						
d.						

18 dms = 990 gal

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Irathane Systems, Manifest Document No. 00023

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.

Printed/Typed Name	Signature	Date (Month / Day / Year)

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month / Day / Year)

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month / Day / Year)

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name	Signature	Date (Month / Day / Year)

T/S/D/F COPY 204TC F-

MINNESOTA POLLUTION CONTROL AGENCY
DIVISION OF SOLID AND HAZARDOUS WASTE
1935 WEST COUNTY ROAD B-2
ROSEVILLE, MN 55113-2785
ATTN: HWIMS

For MPCA use only

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) Instructions on back of form.

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MND006213664 — Manifest Document No. 19852
2. Page 1 of 1
Information in shaded area not required by Federal law. Minnesota rules require items H. and I.

3. Generator's Name and Mailing Address
Worum Chemical Co.
2130 Energy Park Drive
St. Paul, MN 55108

A. State Manifest Document Number MN 0017556
B. State Generator's ID

4. Generator's Phone (612) 645-9224

5. Transporter 1 Company Name: DeLaria Transport Enc.
6. US EPA ID Number: MND070735048
C. State Transporter's ID
D. Transporter's Phone (612) 633-1523

7. Transporter 2 Company Name
8. US EPA ID Number
E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Service, Inc.
420 So. Colfax Ave.
Griffith, IN 46319
10. U.S EPA ID Number: IND016360265
G. State Facility's ID
H. Facility's Phone (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. Waste - flammable liquid, N.O.S. flammable liquid - UN 1993 - contains alcohol, ketones, naphtha	X	1	T T	4704 24340	G P	D001
b.						
c.						
d.						

4704 gal

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
For Incineration W.T. # 30178

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, and Minnesota rules.

Printed/Typed Name	Signature	Date (Month Day Year)
John Pallansch		4 16 85

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)
Bernard E Grandy	Bernard E Grandy	4 16 85

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name	Signature	Date (Month Day Year)
EDUNFEE		4 17 85

In case of spill or emergency, immediately call the Minnesota Pollution Control Agency at 612/296-7373; the Minnesota Division of Emergency Services at 612/778-0800; the National Response Center at 800/424-8802. Outside Minnesota, call the National Response Center and appropriate state agency.

GENERATOR
TRANSPORTER
FACILITY

Minnesota Form PQ-00371-01(10 84)

COPY 4: TSDF RETAIN

210 R T-50 Lv. cl 9500 BTU

009173

Division of Land Pollution Control - Manifest
Indiana State Board of Health
P.O. Box 7035
Indianapolis, IN 46207-7035

DO NOT WRITE IN THIS SPACE

Please print or type. (Form designed for use on elite (12-pitch) typewriter) Form Approved OMB No. 2000 0404 Expires 7 31 86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: MND006213664 — Manifest Document No.: 19871

2. Page 1 of 1

Information in the shaded areas is not required by Federal law

3. Generator's Name: Worum Chemical Company, 2130 Energy Park Drive, St. Paul, MN 55108

A. State Manifest Document Number: IN 059651

4. Generator's Phone: (612) 645-9224

B. State Generator's ID:

5. Transporter 1 Company Name: De Laria Transport, Inc.

6. US EPA ID Number: MND070735048

C. State Transporter's ID:

D. Transporter's Phone: (612) 633-1523

7. Transporter 2 Company Name:

8. US EPA ID Number:

E. State Transporter's ID:

F. Transporter's Phone:

9. Designated Facility Name and Site Address: American Chemical Service, Inc., 420 So. Colfax Ave., Griffith, IN 46319

10. US EPA ID Number: IND016360265

G. State Facility's ID:

H. Facility's Phone: (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a. Waste flammable liquid, N.O.S. flammable liquid UN 1993	1	TT	3700	G	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: Contains alcohol, ketone, naphtha and chlorinated solvents

K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information: Incineration

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

Printed/Typed Name: John Pallansch — Signature: [signature] — Month 01 Day 20 Year 87

17. Transporter 1 Acknowledgement of Receipt of Materials — Date

Printed/Typed Name: Bernard E Grandy — Signature: Bernard E Grandy — Month 1 Day 1 Year 87

18. Transporter 2 Acknowledgement of Receipt of Materials — Date

Printed/Typed Name: — Signature: — Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.

Printed/Typed Name: FDUNFEE — Signature: [signature] — Month 01 Day 20 Year 87

GENERATOR / TRANSPORTER / FACILITY

IN 059651

EPA Form 8700-22A (Rev. 11-85) UHWM 2/LP2

T.S.D. DETACH AND RETAIN THIS COPY

210 K T50 B

012204

Division of Land Pollution Control - Manifest
Indiana State Board of Health
P.O. Box 7035
Indianapolis, IN 46207-7035

DO NOT WRITE IN THIS SPACE

Please print or type. (Form designed for use on elite (12-pitch) typewriter) Form Approved OMB No. 200

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. / Manifest Document No.: MND006213664 1987 2
2. Page 1 of: 1
Information is not required

3. Generator's Name: Vorum Chemical Company
2130 Energy Park Drive
St. Paul, MN 55108

A. State Manifest Document Number: IN 059652

4. Generator's Phone: (612) 645-9224

B. State Generator's ID:

5. Transporter 1 Company Name: De Laria Transport, Inc.
6. US EPA ID Number: MND077075048
C. State Transporter's ID:
D. Transporter's Phone:

7. Transporter 2 Company Name:
8. US EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address: American Chemical Service, Inc.
420 So. Colfax Ave.
Griffith, IN 46319
10. US EPA ID Number: IND016360265
G. State Facility's ID:
H. Facility's Phone: (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a. Waste flammable liquid, N.O.S. Flammable Liquid UN 1993	1	T	33180 4424	P G	D001
b. 4424 gal.					
c.					
d.					

J. Additional: Contains alcohol, ketone, naphtha, and chlorinated solvents.

K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information: Incineration

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

GENERATOR

Printed/Typed Name	Signature	Month	Day	Year
John Pallansch		05	12	87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date: Month	Day	Year
		05	13	87

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date: Month	Day	Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name	Signature	Month	Day	Year
F DUNFEE	F Dunfee	05	14	87

IN 059652

EPA Form 8700-22A (Rev. 11-85) UHWM 2/LP2

210E TSD GMU T.S.D.

DETACH AND RETAIN THIS COPY

012205

012206

Division of Land Pollution Control - Manifest
Indiana State Board of Health
P.O. Box 7035
Indianapolis, IN 46207-7035

DO NOT WRITE IN THIS SPACE

Please print or type. (Form designed for use on elite (12-pitch) typewriter) Form Approved OMB No. 2000 0404 Expires 7 31 86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: MND006213664 — Manifest Document No.: 19873
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law

3. Generator's Name: Worum Chemical Company, 2130 Energy Park Drive, St. Paul, MN 55108
4. Generator's Phone (612) 645-9224
A. State Manifest Document Number: IN 059653
B. State Generator's ID:

5. Transporter 1 Company Name: De Laria Transport
6. US EPA ID Number: MND070735048
C. State Transporter's ID:
D. Transporter's Phone: (612) 633-1523

7. Transporter 2 Company Name:
8. US EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address: American Chemical Services, Inc., 420 So. Colfax Ave., Griffith, IN 46319
10. US EPA ID Number: IND016360265
G. State Facility's ID:
H. Facility's Phone: (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. Waste flammable liquid, N.O.S. (D001) Flammable Liquid UN 1993	1	T T	31360 / 4180	P G	D001
b.					
c.					
d.					

4180 gal

J. Additional Descrip[illegible]: Contr[illegible] [illegible] Nat[illegible] [illegible] W.T.[illegible] 19833

K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information: Additional generator's certification attached.

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

Printed/Typed Name: John Pallansen — Signature: [signature] — Month 08 Day 10 Year 87

17. Transporter 1 Acknowledgement of Receipt of Materials — Date
Printed/Typed Name: [illegible] — Signature: [signature] — Month 08 Day 10 Year 87

18. Transporter 2 Acknowledgement of Receipt of Materials — Date
Printed/Typed Name: — Signature: — Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: F. DUNFEE — Signature: [signature] — Month 8 Day 11 Year 87

IN 059653

EPA Form 8700-22A (Rev. 11-85) UHWM 2/LP2

T.S.D. DETACH AND RETAIN THIS COPY 212R T50-B

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MND006213664 | Manifest Document No. 19874 | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Worum Chemical Company
2130 Energy Park Drive
St. Paul, MN 55108

A. State Manifest Document Number INA 0189121

4. Generator's Phone (612) 645-9224

B. State Generator's ID

5. Transporter 1 Company Name: De Laris Transport | 6. Use EPA ID Number: MND070735048

C. State Transporter's ID

D. Transporter's Phone (612) 633-1523

7. Transporter 2 Company Name | 8. Use EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Services, Inc.
420 So. Colfax Ave.
Griffith, IN 46319

10. Use EPA ID Number: IND016360265

G. State Facility's ID

H. Facility's Phone (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	Unit Wt/Vol.	Waste No.
Waste flammable liquid, N.O.S. (D001) Flammable Liquid UN 1993	01	TT	3579	G	

3579 gal.

J. Additional Description
Contains: alcohols, ketones, esters, naphthas, chlorinated solvents for incineration W.T.# 2496

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name	Signature	Month	Day	Year
[illegible]	[signature]	11	03	87

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
[illegible]	[signature]	11	03	87

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.

Printed/Typed Name	Signature	Month	Day	Year
FDUNFEE	FDunfee	11	04	87

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0189121

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

202TKT50M

012207

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: MND006213664 | Manifest Document No.: 19881 | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address: Wopum Chemical Company, 2130 Energy Park Drive, St. Paul, MN 55108

A. State Manifest Document Number: INA 0189122

4. Generator's Phone (612) 645-9224

B. State Generator's ID

5. Transporter 1 Company Name: Delaria Transport

6. Use EPA ID Number: MND070735048

C. State Transporter's ID

D. Transporter's Phone: (612) 633-1523

7. Transporter 2 Company Name

8. Use EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address: American Chemical Services, Inc., 420 So. Colfax Ave., Griffith, IN 46319

10. Use EPA ID Number: IND016360265

G. State Facility's ID

H. Facility's Phone: (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. Waste flammable liquid, N.O.S. (D001) Flammable Liquid UN 1993	01	TT	26,660 3581	P G	D001
b.					
c.					
d.					

3581 gal.

J. Additional Descriptions for Materials Listed Above: Contains: alcohols, ketones, esters, naphthas, chlorinated solvents for incineration W.T. # 20378

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Tom Pallanza | Signature | Month | Date Day | Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Month | Date Day | Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Month | Date Day | Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.

Printed/Typed Name: FDUNFEE | Signature: F Dunfee | Month Day Year: 020378

GENERATOR / TRANSPORTER / FACILITY

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0189122

EPA Form 8700-22 (Rev. 9-86) Previous editions are obsolete. State Form 11865

DISTRIBUTION: PAGE 1 (white) TSD MAIL TO GENERATOR; PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE; PAGE 3 (light green) TSD MAIL TO TSD STATE; PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM; PAGE 5 (light blue) TSD COPY; PAGE 6 (canary) GENERATOR COPY; PAGE 7 (white) TRANSPORTER 1 COPY; PAGE 8 (white) TRANSPORTER 2 COPY

2000-212RTSO
1500 210RTSO

015034

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. M N D 0 0 6 2 1 3 6 6 4 | Manifest Document No. 1 9 8 8 2 | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Worum Chemical Company
2130 Energy Park Drive
St. Paul, MN 55108

A. State Manifest Document Number: INA 0189123

4. Generator's Phone (612) 645-9224

B. State Generator's ID

5. Transporter 1 Company Name: Delaria Transport | 6. Use EPA ID Number: M N D 0 7 0 7 3 5 0 4 8 | C. State Transporter's ID | D. Transporter's Phone: (612) 633-1523

7. Transporter 2 Company Name | 8. Use EPA ID Number | E. State Transporter's ID | F. Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Services, Inc.
420 So. Colfax Ave.
Griffith, IN 46319

10. Use EPA ID Number: I N D 0 1 6 3 6 0 2 6 5 | G. State Facility's ID | H. Facility's Phone: (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. Waste flammable liquid, N.O.S. (H001) Flammable Liquid UN 1993	01	T	2480	P	D001
b. 3397 gal					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
Contains: alcohols, ketones, esters, naphthas, chlorinated solvents for incineration W.I. #20390

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name	Signature	Month	Day	Year
		04	27	88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.

Printed/Typed Name	Signature	Month	Day	Year
		04	27	88

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0189123

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

015035

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I N D 0 0 6 7 1 3 6 4 1 | Manifest Document No. 9 8 8 3 | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Worum Chemical Company
2130 Energy Park Drive
St. Paul, MN 55108

A. State Manifest Document Number INA 0189124

B. State Generator's ID

4. Generator's Phone (612) 645-9224

5. Transporter 1 Company Name Delaria Transport | 6. Use EPA ID Number I N D 0 7 0 7 3 5 0 4 8 | C. State Transporter's ID | D. Transporter's Phone (612) 633-1523

7. Transporter 2 Company Name | 8. Use EPA ID Number | E. State Transporter's ID | F. Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Services, Inc.
420 So. Colfax Ave.
Griffith, IN 46319

10. Use EPA ID Number I N D 0 1 6 3 6 0 2 6 5 | G. State Facility's ID | H. Facility's Phone (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. Waste flammable liquid, N.O.S. (D001) Flammable Liquid UN 1993	01	T	3540	P G	D002
b. 3545 gal					
c.					
d.					

J. Additional Descriptive Information
Contains: alcohols, ketones, esters, naphthas, chlorinated solvents for incineration N.T.I. 2189

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name | Signature | Month | Day | Year

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month | Day | Year

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month | Day | Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name | Signature | Month | Day | Year

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0189124

EPA Form 8700-22 (Rev. 9-86) Previous editions are obsolete.
State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

015036

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: MND006213664
Manifest Document No.: 19884
2. Page 1 of 1
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Worum Chemical Company
2130 Energy Park Drive
St. Paul, MN 55108

A. State Manifest Document Number: INA 0189126
B. State Generator's ID:
C. State Transporter's ID:
D. Transporter's Phone: (612) 633-1523
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID:
H. Facility's Phone: (219) 924-4370

4. Generator's Phone (612) 645-9224
5. Transporter 1 Company Name: Delaris Transport
6. Use EPA ID Number: MND070735048
7. Transporter 2 Company Name:
8. Use EPA ID Number:
9. Designated Facility Name and Site Address
American Chemical Services, Inc.
420 So. Colfax Ave.
Griffith, IN 46319
10. Use EPA ID Number: IND016360265

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. Waste flammable liquid, N.O.S. (D001) Flammable Liquid UN 1993	01	TT	29800 3973	P G	F002
b.					
c.					
d.					

3973 gal

J. Additional Descriptions for Materials Listed Above
Contains: alcohols, ketones, esters, naphthas, chlorinated solvents for incineration W.T. # 01481

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: John Pallansch
Signature: [signature]
Month: 10 Day: 14 Year: 88

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: [illegible]
Signature: [signature]
Month: [illegible] Day: [illegible] Year: [illegible]

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Month: Day: Year:

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: FDUNFEE
Signature: FDunfee
Month: 10 Day: 25 Year: 88

GENERATOR / TRANSPORTER / FACILITY

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0189126

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

210TC TSD 10/25

015037

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. IN D 0 0 6 2 1 3 6 6 4 | Manifest Document No. 1 9 8 9 4 | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Worum Chemical Company
2130 Energy Park Drive
St. Paul, MN 55108

A. State Manifest Document Number: INA 0189127

4. Generator's Phone (612) 645-9224

B. State Generator's ID

5. Transporter 1 Company Name: Delaria Transport | 6. Use EPA ID Number: M N D 0 7 0 7 3 5 0 8 | C. State Transporter's ID

D. Transporter's Phone (612) 633-1523

7. Transporter 2 Company Name | 8. Use EPA ID Number | E. State Transporter's ID | F. Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Services, Inc.
420 So. Colfax Ave.
Griffith, IN 46319

10. Use EPA ID Number: I N D 0 1 6 3 6 0 2 6 5 | G. State Facility's ID | H. Facility's Phone (219) 924-6370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. Waste flammable liquid, N.O.S. (D001) Flammable Liquid UN 1993	01	T	24300 3240	P G	F002
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
Contains: alcohols, ketones, esters, naphthas, chlorinated solvents for incineration W.I. 22662

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable International and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR

Printed/Typed Name | Signature | Date Month 01 Day 20 Year 89

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: John Pallansch | Signature | Date Month 01 Day 23 Year 89

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Date Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: FDUNFEE | Signature | Date Month 01 Day 23 Year 89

In case of a spill call Indiana Office of Environmental Response at 317-3-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0189127

EPA Form 8700-22 (Rev. 9-86) Previous editions are obsolete. State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

0016496

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MND006213664 | Manifest Document No. 19892 | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Worum Chemical Company
2130 Energy Park Drive
St. Paul, MN 55108

4. Generator's Phone (612) 645-9224

A. State Manifest Document Number: INA 0335078
B. State Generator's ID:

5. Transporter 1 Company Name: Delaria Transport
6. Use EPA ID Number: MND070703504
C. State Transporter's ID:
D. Transporter's Phone: (612) 633-1523

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Services, Inc.
420 So. Colfax Ave.
Griffith, IN 46319

10. Use EPA ID Number: IND016360265
G. State Facility's ID:
H. Facility's Phone: (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. Waste flammable liquid, N.O.S. (D001) Flammable Liquid UN 1993	01	TT	3.5.A.X	P G	F002
b. 3568 gal.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: Contains: alcohols, ketones, esters, naphthas, chlorinated solvents for incineration W.T. #33513

K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name	Signature	Month	Day	Year
John Pallansch		04	17	89

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
John Borck	John Borck 4-17-89			

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

19. Discrepancy Indication Space

Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name	Signature	Month	Day	Year
Whitaker Allen	Whitaker Allen	4	20	89

9-22
ns are obsolete.
65 (R/4-88)

2117T50 4/20

COPY 5. TSD COPY

In case of a spill the Indiana Office of Environmental Hea... at 317/24... National Respon... Center at 800/424-8802 or 202/426-26...

INA0335078

0016499

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: M N D 0 0 6 2 1 3 6 6 4 | Manifest Document No.: 1 9 8 9 3 | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Worum Chemical Company
2130 Energy Park Drive
St. Paul, MN 55108

4. Generator's Phone (612) 645-9224

A. State Manifest Document Number: INA 0335077
B. State Generator's ID:

5. Transporter 1 Company Name: Delaria Transport
6. Use EPA ID Number: M N D 0 7 0 7 3 5 0 4 8
C. State Transporter's ID:
D. Transporter's Phone: (612) 633-1523

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Services, Inc.
420 So. Colfax Ave.
Griffith, IN 46319
10. Use EPA ID Number: I N D 0 1 6 3 6 0 2 6 5
G. State Facility's ID:
H. Facility's Phone: (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. Waste Flammable Liquid, N.O.S. (D001) Flammable Liquid UN 1993	0 0 1	T T	2 1 0 0 0 5 5 2 3	P G	F002
b. 3323 gal.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
Contains: alcohols, ketones, esters, naphthas, chlorinated solvents for incineration W.T.

K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information
C 1 - 1687 GAL
C 3 - 1634 GAL

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR

Printed/Typed Name: John Pallansch
Signature:
Date: Month 0 7 Day 1 7 Year 8 9

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Gordon Fralick
Signature:
Date: Month 0 7 Day 1 7 Year 8 9

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Date: Month . Day . Year .

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: DUNFEE
Signature:
Date: Month 0 7 Day 1 9 Year 8 9

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

7127 TSD 7/19

COPY 5. TSD COPY

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0335077

0016497

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91.

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: M.N.D.0.0.6.2.1.3.6.6.4 — Manifest Document No.: 1.9.8.9.4

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address:
Worum Chemical Company
2130 Energy Park Drive
St. Paul, MN 55108

4. Generator's Phone (612) 645-9224

A. State Manifest Document Number: INA 0356082

B. State Generator's ID:

5. Transporter 1 Company Name: Delaria Transport

6. Use EPA ID Number: MND070735048

C. State Transporter's ID:

D. Transporter's Phone: (612)633-1523

7. Transporter 2 Company Name:

8. Use EPA ID Number:

E. State Transporter's ID:

F. Transporter's Phone:

9. Designated Facility Name and Site Address:
American Chemical Services, Inc.
420 So. Colfax Ave.
Griffith, IN 46319

10. Use EPA ID Number: IND016360265

G. State Facility's ID:

H. Facility's Phone: (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. Waste flammable liquid, N.O.S. (D001) Flammable Liquid UN 1993	0.0.1	T.T	23700 3297	P G	F002
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above:
Contains: alcohols, ketones, esters, naphthas, chlorinated solvents for incineration W.T. #23486

K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information:

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: John Pallansch — Signature: [signature] — Date: Month 10 Day 17 Year 89

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Steve Burke — Signature: Steve Burke — Date: Month 10 Day 17 Year 89

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: — Signature: — Date: Month Day Year

19. Discrepancy Indication Space:

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.
Printed/Typed Name: F. DUNFEE — Signature: F Dunfee — Date: Month 10 Day 18 Year 89

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA0356082

obsolete.
98)

212RT50 10/13

5. TSD COPY

0016498

STATE OF MICHIGAN

WASTE DISPOSAL MANIFEST

[X] Act 64 Waste (HAZARDOUS) [ ] Act 136 Waste [ ] Other MI 0132232

002517

IDENTIFICATION

Generator's Name	Primary Transporter's Name	Treatment, Storage or Disposal Facility
Wyckoff Chemical Company	Mr. Frank, Inc.	American Chemical Service, Inc.
Site Address: 1421 Kalamazoo Street, South Haven, MI 49090	Transporters Address: 201 W. 155th Street, South Holland, IL 60473	Facility Address: 420 S. Colfax, Griffith, XX IN 46319
Phone Number: (616) 637-8474	Phone Number: (312) 596-3377	Phone Number: (219) 924-4370
Generator's Site EPA I.D. Number: MID080361454	Transporter's EPA I.D. Number: ILD069506160	Facility Site EPA I.D. Number: IND016360265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES — WASTE INFORMATION

LOT NO.	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name).	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container No.	Container Type	Form Solid	Form Liquid	Form Gas	Form Sludge	Total Weight or Volume	Units	Hazardous or Liquid Waste Number
1.	WASTE FLAMMABLE LIQUID N.O.S.	Flammable Liquid	UN1993	1	X 1	CT XXX		1			5500	gal.	D001
2.													
3.													
4.													
5.													
6.													

COMMENTS

Include Safety precautions and special handling instructions.

Contain Material

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or 1969 PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature: ① Patricia Brucki — Date Shipped MO. DAY YEAR: 12 12 83

TRANSPORTER COMPLETES

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No. No. 1: 0079021

Subsequent Transporter Vehicle I.D. No's:

Transporter Signature: ② Ron Bridgewater — Date(s) Received: 12 12 83

Subsequent transporter(s) signature(s): ③

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF COMPLETES

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature: ④ [signature] — Facility Site EPA I.D. Number: IND016360265

[X] Accepted [ ] Rejected — Date Received: 12 12 83

Describe any significant discrepancies between manifest and shipment.

Was a Surcharge Assessed? [ ] Yes [ ] No

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 800—292-4706 OR OUT-OF-STATE AT 517—373-7660 AND THE NATIONAL RESPONSE CENTER AT 800—424-8802 24 HOURS PER DAY.

TSDF COPY

To 210 KT-50 GRM 12.12.83

DNR
MICHIGAN DEPARTMENT OF NATURAL RESOURCES

DO NOT WRITE IN THIS SPACE
ATT. ☐ DIS. ☐ REJ. ☐

Required under authority of Act 64, P.A. 1979, as amended and Act 136, P.A. 1969.

Failure to file is punishable under section 299.548 MCL or Section 10 of Act 136, P.A. 1969.

Please print or type.

Form Approved OMB No 2000-0404 Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: M I D 0 8 0 3 6 1 4 5 4
Manifest Document No.:
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Wyckoff Chemical Company Inc.
1421 Kalamazoo Street
South Haven, MI 49090

4. Generator's Phone (616-) 637-8474

A. State Manifest Document Number: MI 0665475
B. State Generator's ID: MID080361454

5. Transporter 1 Company Name: MR. Frank, Inc.
6. US EPA ID Number: I L D 0 6 9 5 0 6 1 6 0
C. State Transporter's ID: 0079
D. Transporter's Phone: 312-596-3377

7. Transporter 2 Company Name:
8. US EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Service Inc.
420 S. Colfax Avenue, P.O. Box 190
Griffith, IN 46319

10. US EPA ID Number: I N D 0 1 6 3 6 0 2 6 5
G. State Facility's ID: IND016360265
H. Facility's Phone: (219) 924-4370

11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER).	HM		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.	N/H
a.		~~Waste #2001~~ FLAMMABLE LIQUID						
	X	WASTE FLAMMABLE LIQUID n.o.s. UN1993	0 0 1	TT 2	0 5 0 0 0	G	D 0 0 1	H
b.								
c.								
d.								

J. Additional Descriptions for Materials Listed Above
P.O. #38703

K. Handling Codes for Wastes Listed Above
~~[illegible]~~ S
a/ s/
b/ /
c/ /
d/ /

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage or disposal currently available to me which minimizes the present and future threat to human health and the environment.

Printed/Typed Name: Patricia Brucki, Traffic Mgr.
Signature: Patricia Brucki
Date: Month Day Year: 1 1 1 5 8 5

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Moe Woenhoff
Signature: Moe Woenhoff
Date: Month Day Year: 1 1 1 5 8 5

18. Transporter 2 Acknowledgement or Receipt of Materials
Printed/Typed Name:
Signature:
Date: Month Day Year:

19. Discrepancy Indication Space
11.20 am

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: FDUNFEE
Signature: F Dunfee
Date: Month Day Year: 1 1 1 5 8 5

GENERATOR
TRANSPORTER
FACILITY

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOURS PER DAY.

EPA Form 8700-22 (Rev. 4-85)

PR 5110
Rev. 4/85

TSDF COPY 210 KT-50

009171

DNR

MICHIGAN DEPARTMENT OF NATURAL RESOURCES

DO NOT WRITE IN THIS SPACE
ATT. ☐ DIS. ☐ REJ. ☐

Required under authority of Act 64, P.A. 1979, as amended and Act 136, P.A. 1969.

Failure to file is punishable under section 299.548 MCL or Section 10 of Act 136, P.A. 1969

Please print or type

Form Approved OMB No 2000-0404 Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MID 080 361 454 — Manifest Document No.

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law

3. Generator's Name and Mailing Address
Wyckoff Chemical Company, Inc.
1421 Kalamazoo Street
South Haven, MI 49090

4. Generator's Phone ( ) (616) 637-8474

A. State Manifest Document Number: MI 0672849

B. State Generator's ID: MID080361454

5. Transporter 1 Company Name: Mr. Frank, Inc.

6. US EPA ID Number: ILD 069 506 160

C. State Transporter's ID: 0079

D. Transporter's Phone: (312)596-3377

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Service Inc.
420 S. Colfax Avenue, P.O. Box 190
Griffith, IN 46319

10. US EPA ID Number: IND 016 360 265

G. State Facility's ID: IND016360265

H. Facility's Phone: (219) 924-4370

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER). HM		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.	N/H
GENERATOR a.	X	FLAMMABLE LIQUID WASTE FLAMMABLE LIQUID n.o.s. UN1993	001	TT	05500	G	D001	H
b.								
c.								
d.								

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above: a/ S / b/ / c/ / d/ /

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage or disposal currently available to me which minimizes the present and future threat to human health and the environment.

Printed/Typed Name: Patricia Brucki, Traffic Mgr. — Signature: Patricia Brucki — Date: Month 11 Day 27 Year 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: RON BRIDGEWATER — Signature: Ron Bridgewater — Date: Month 11 Day 27 Year 85

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name — Signature — Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: FDUNFEE — Signature: T Dunfee — Date: Month 11 Day 27 Year 85

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM. IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOURS PER DAY.

EPA Form 8700-22 (Rev. 4-85)

TSDF COPY

212 KT-50

PR 5110 Rev. 4/85

009172

Division of Land Pollution Control - Manifest
Indiana State Board of Health
P.O. Box 7035
Indianapolis, IN 46207-7035
Please print or type. (Form designed for use on elite (12-pitch) typewriter)

DO NOT WRITE IN THIS SPACE

Form Approved OMB No. 2000 0404 Expires 7 31 86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. / Manifest Document No.: MID080361454 8702 5
2. Page 1 of: 1
Information in the shaded areas is not required by Federal law

3. Generator's Name
Wyckoff Chemical Co.
1421 Kalamazoo Street South Haven, MI 49090

4. Generator's Phone ( ): 616 637-8874

A. State Manifest Document Number: IN 100570

B. State Generator's ID: MID080361454 0279

5. Transporter 1 Company Name: Mr. Frank Inc.
6. US EPA ID Number: I L D 0 6 9 5 0 6 1 6 0
C. State Transporter's ID: ILD069506160
D. Transporter's Phone: 800-642-2203

7. Transporter 2 Company Name
8. US EPA ID Number
E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Service, Inc.
420 S. Colfx Avenue
Griffith IN 46319
10. US EPA ID Number: I N D 0 1 6 3 6 0 2 6 5
G. State Facility's ID: IND016360265
H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. Waste Flammable Liquid N.O.S. Flammable Liquid UN1993	001	T	5500	G	F003 F005 D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the presently and future threat to human health and the environment.

GENERATOR

Printed/Typed Name: Mark Wallace | Signature | Month Day Year

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: GARY DUNN | Signature | Date: Month 01 Day 1 Year 87

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: F DUNFEE | Signature | Month Day Year: 01/16/87

IN 100570

EPA Form 8700-22A (Rev. 11-85) UHWM 2/LP2

T.S.D. DETACH AND RETAIN THIS COPY

1000 21 TKTSOM
4500 21 TKTSOM

012197

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: IND060361454
Manifest Document No.: 870311
2. Page 1 of
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Wyckoff Chemical Co., Inc.
1421 Kalamazoo St. South Haven, MI 49090
4. Generator's Phone (616) 637-8474

A. State Manifest Document Number: INA 0136309
B. State Generator's ID: IND060361454
C. State Transporter's ID: 8079
D. Transporter's Phone: 800-642-2203
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID: IND016360265
H. Facility's Phone: 219-9244370

5. Transporter 1 Company Name: Mr. Frank, Inc.
6. Use EPA ID Number: ILD069506160
7. Transporter 2 Company Name:
8. Use EPA ID Number:
9. Designated Facility Name and Site Address
American Chemical Service, Inc.
420 S. Colfax Avenue
Griffith, IN 46319
10. Use EPA ID Number: IND016360265

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	Waste No.
a. WASTE FLAMMABLE LIQUID N.O.S. FLAMMABLE LIQUID UN1993	001	TT	05500	G	[illegible]
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
IPR Stream code 03559
WYCKOFF PURCHASE ORDER #041266

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: MARK WALLACE
Signature: [signature]
Month 09 Day 24 Year 87

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JACK McCLEVERTY
Signature: [signature]
Month 09 Day 24 Year 87

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: F DUNFEE
Signature: [signature]
Month 09 Day 24 Year 87

GENERATOR / TRANSPORTER / FACILITY

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0136309

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

210 FKT 50 M

012200

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: MID080361454 — Manifest Document No.: 87035
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address:
Wyckoff Chemical Co.
1421 Kalamazoo Street
South Haven, MI 49090

4. Generator's Phone: 616-637-8474

A. State Manifest Document Number: INA 0136311
B. State Generator's ID: MID080361454
C. State Transporter's ID: 0079
D. Transporter's Phone: 800-642-2203
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID: IND016360265
H. Facility's Phone: 219-924-4370

5. Transporter 1 Company Name: Mr. Frank, Inc.
6. Use EPA ID Number: ILD069506160
7. Transporter 2 Company Name:
8. Use EPA ID Number:
9. Designated Facility Name and Site Address:
American Chemical Service, Inc.
420 S. Colfax Avenue
Griffith, IN 46319
10. Use EPA ID Number: IND016360265

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	15. Waste No.
a. WASTE FLAMMABLE LIQUID N.O.S. Flammable Liquid UN1993	001	TT	5000	G	[illegible]
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: P.O. 041366
K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Mark Wallace — Signature: M. Wallace — Month 0 Day 2 Year 7

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: GARY DRIEN — Signature: Gary Drien — Month 10 Day 26 Year 87

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: — Signature: — Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: F DUNFEE — Signature: F Dunfee — Month 10 Day 26 Year 87

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0136311

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

211 RT 60 10/26 M

012201

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: MID080361454
Manifest Document No.: 87038
2. Page 1 of 1
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
WYCKOFF CHEMICAL CO. INC.
1421 Kalamazoo Street
South Haven, MI 49090
4. Generator's Phone (616) 637-8474

A. State Manifest Document Number: INA 0136312
B. State Generator's ID: MID080361454

5. Transporter 1 Company Name: Mr. Frank, Inc.
6. Use EPA ID Number: ILD069506160
C. State Transporter: 6079
D. Transporter's Phone: 800-642-7203

7. Transporter 2 Company Name
8. Use EPA ID Number
E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Service, Inc.
420 S. Colfax Avenue
Griffith, IN 46319
10. Use EPA ID Number: IND016360265
G. State Facility's ID: [illegible]
H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	Waste No.
a. WASTE FLAMMABLE LIQUID N.O.S. FLAMMABLE LIQUID UN1993	001	TT	05000	G	[illegible]
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
P.O. #041339

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: MARK WALLACE
Signature: Mark Wallace
Date: Month 10 Day 30 Year 87

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Dwayne Shaw
Signature: Dwayne Shaw
Date: Month 10 Day 30 Year 87

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

19. Discrepancy Indication Space
Wrong State Facility ID# MW

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: FDWNFEE
Signature: FDWNFEE
Date: Month 10 Day 30 Year 87

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0136312

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

202TK T50M

012202

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. IND080361454 | Manifest Document No. 87045 | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Rykoff Chemical Co. Inc.
1421 KALAMAZOO St
South Haven, MI 49090

A. State Manifest Document Number: INA 0136314

B. State Generator's ID: MID080361454

4. Generator's Phone (616) 637-8474

5. Transporter 1 Company Name: Mr. Frank, Inc.

6. US EPA ID Number: ILD095063102

C. State Transporter's ID: 0079

D. Transporter's Phone: 800-642-2203

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Amcon Chemical Service, Inc.
420 S. Colfax Avenue
Griffith, IN 46319

10. US EPA ID Number: INDO16360265

G. State Facility's ID: 9180890002

H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt./Vol.	Waste No.
a. WASTE FLAMMABLE LIQUID-N.O.S. FLAMMABLE LIQUID UN1993		DM	005	G	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
P.O. #041477

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR — Printed/Typed Name: MARK WALLACE | Signature | Date: Month 11 Day 23 Year 87

TRANSPORTER — 17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: John Van Wynen | Signature | Date: Month 11 Day 23 Year 87

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Date: Month . Day . Year .

FACILITY — 19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: P DUFFEE | Signature: P Duffee | Date: Month 11 Day 23 Year 87

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0136314

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

21 OUTTSDM

012203

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: MID080361454 — Manifest Document No.: 8006
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
WYCKOFF CHEMICAL CO., INC.
1421 Kalamazoo Street
South Haven, MI 49090

4. Generator's Phone (616) 637-8474

A. State Manifest Document Number: INA 0136318
B. State Generator's ID: MID080361454

5. Transporter 1 Company Name: Mr. Frank, Inc.
6. Use EPA ID Number: ILD069506160
C. State Transporter's ID: 0079
D. Transporter's Phone: 800-642-2203

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Service, Inc.
420 S. Colfax Avenue
Griffith, IN 46319

10. Use EPA ID Number: IND016360265
G. State Facility's ID: IND016360265
H. Facility's Phone: 219 924 4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE FLAMMABLE LIQUID N.O.S. FLAMMABLE LIQUID UN1993	001	TT	05500	G	F003 F005 D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: Wyckoff Purchase Order #041736

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Mark Wallace — Signature: [signature] — Month / Day / Year

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: GARY DERESS — Signature: [signature] — Month 01 Day 28 Year 88

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: — Signature: — Month / Day / Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: F DUNFEE — Signature: [signature] — Month 01 Day 28 Year 88

GENERATOR / TRANSPORTER / FACILITY

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0136318

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

211 TK TSD N

015018

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.
I I D 0 8 0 3 6 1 4 5 4	8 8 0 1 4		

GENERATOR

3. Generator's Name and Mailing Address
WYCKOFF CHEMICAL COMPANY, INC.
1421 Kalamazoo Street
South Haven, MI 49090

4. Generator's Phone (616) 637-8474

A. State Manifest Document Number: INA 0136319

B. State Generator's ID:

5. Transporter 1 Company Name: Mr. Frank, Inc.

6. Use EPA ID Number: I L D 0 6 9 5 0 6 1 6 0

C. State Transporter's ID: 0079

D. Transporter's Phone: 800-642-2203

7. Transporter 2 Company Name:

8. Use EPA ID Number:

E. State Transporter's ID:

F. Transporter's Phone:

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE, INC.
420 S. Colfax Avenue
Griffith, IN 46319

10. Use EPA ID Number: I N D 0 1 6 3 6 0 2 6 5

G. State Facility's ID: IND016360265

H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	L Waste No.
a. WASTE FLAMMABLE LIQUID N.O.S. FLAMMABLE LIQUID UN1993	001	DT	00110	G	F003 F005 D001 D002
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name	Signature	Date Month	Day	Year
MARK WALLACE		0 3	0 1	8 8

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.

Printed/Typed Name	Signature	Date Month	Day	Year
F-DUNFEE		0 3	0 1	8 8

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

WHITE TSD

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0136319

0136319

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE *(Form designed for use on elite (12-pitch) typewriter.)* *Form Approved. OMB No. 2050-0039. Expires 9-30-88*

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I D 0 8 0 3 6 1 4 5 4 8 | Manifest Document No. 8 015 | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
WYCKOFF CHEMICAL COMPANY, INC.
1421 Kalamazoo St.
South Haven, MI 49090
4. Generator's Phone ( ) (616) 637-8474

A. State Manifest Document Number: INA 0136320
B. State Generator's ID:

5. Transporter 1 Company Name: Mr. Frank, Inc.
6. Use EPA ID Number: I D 0 6 9 5 0 6 1 5 6 0
C. State Transporter's ID: 0079
D. Transporter's Phone: 800-642-2203

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Service, Inc.
420 S. Colfax Avenue
Griffith, IN 46319
10. Use EPA ID Number: I N D 0 1 6 3 6 0 2 6 5
G. State Facility's ID: IND016360265
H. Facility's Phone: (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE FLAMMABLE LIQUID N.O.S. FLAMMABLE LIQUID UN1993	001	TP	05500	G	D001 F003 F005
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR — Printed/Typed Name: MARK WALLACE — Signature — Date: Month 03 Day 21 Year 88

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials — Printed/Typed Name — Signature — Date: Month 03 Day 21 Year 88
18. Transporter 2 Acknowledgement of Receipt of Materials — Printed/Typed Name — Signature — Date: Month . Day . Year .

FACILITY
19. Discrepancy Indication Space
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19. — Printed/Typed Name: T DUNFEE — Signature — Date: Month 03 Day 24 Year 88

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0136320

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

2 TO TSD

015020

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. M I D 0 8 0 3 6 1 4 5 4 | Manifest Document No. 8 8 0 2 3 | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
WICKOFF CHEMICAL CO., INC.
1421 Kalamazoo St.
SOUTH HAVEN, MI 49090

4. Generator's Phone (616) 637-8474

A. State Manifest Document Number: INA 0224062

B. State Generator's ID: M I D 0 8 0 3 6 1 4 5 4

5. Transporter 1 Company Name: Mr. Frank, Inc. | 6. Use EPA ID Number: I L D 0 6 9 5 0 6 1 6 0

C. State Transporter's ID: 0 0 7 9

D. Transporter's Phone: 800-642-2203

7. Transporter 2 Company Name | 8. Use EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE, INC.
420 S. Colfax AVenue
Griffith, IN 46319

10. Use EPA ID Number: I N D 0 1 6 3 6 0 2 6 5

G. State Facility's ID: I N D 0 1 6 3 6 0 2 6 5

H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE FLAMMABLE LIQUID NOS FLAMMABLE LIQUID UN1993	0 0 1	T T	0 5 3 0 0	G	F005 F003 D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR

Printed/Typed Name: MARK WALLACE | Signature | Date: Month Day Year

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JACK McCLEVERTY | Signature | Date: Month 0 3 Day 3 1 Year 8 8

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: F DUNFEE | Signature: F Dunfee | Date: Month 0 3 Day 3 1 Year 8 8

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0224062

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

25K T63 3/31/88

015021

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: M·I·D·0·8·0·3·6·1·4·5·4
Manifest Document No.: 8·8·0·2·7
2. Page 1 of 1
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Wyckoff Chemical Company, Inc.
1421 Kalamazoo Street
South Haven, MI 49090

4. Generator's Phone (616) 637-8474

A. State Manifest Document Number: INA 0224063
B. State Generator's ID:

5. Transporter 1 Company Name: Mr. Frank, Inc.
6. Use EPA ID Number: I·L·D·0·6·9·5·0·6·1·6·0
C. State Transporter's ID: 0079
D. Transporter's Phone: 800-642-2203

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Service, Inc.
420 S. Colfax Avenue
Griffith, IN 40319

10. Use EPA ID Number: I·N·D·0·1·6·3·6·0·2·6·5
G. State Facility's ID: IND016360265
H. Facility's Phone: (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	L Waste No.
a. Waste Flammable Liquid N.O.S. Flammable Liquid UN 1993	001	T.T	0.5000	G	F003 F005 ~~D002~~ D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
P.O. No. 042148

K. Handling Codes for Wastes Listed Above
G = Gallons

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Mark Wallace
Signature:
Date: Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JACK McCLEVERTY
Signature:
Date: Month 04 Day 28 Year 88

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Date: Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: GR MURPHY
Signature:
Date: Month 04 Day 28 Year 88

GENERATOR

TRANSPORTER

FACILITY

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0224063

/00-22 (Rev. 9-86)
itions are obsolete.
11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

210 K TSD 4/28/88

015022

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: M·I·D·0·8·0·3·6·1·4·5·4
Manifest Document No.: 8·8·0·2·8
2. Page 1 of 1
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Wyckoff Chemical Co., Inc.
1421 Kalamazoo Street
South Haven, MI 49090
4. Generator's Phone (616) 637-8474

A. State Manifest Document Number: INA 0224064
B. State Generator's ID:

5. Transporter 1 Company Name: Mr. Frank, Inc.
6. Use EPA ID Number: I·L·D·0·6·9·5·0·6·1·6·0
C. State Transporter's ID: 0079
D. Transporter's Phone: 800-642-2203

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Service, Inc.
420 S. Colfax Avenue
Griffith, IN 46319
10. Use EPA ID Number: I·N·D·0·1·6·3·6·0·2·6·5
G. State Facility's ID: IND016360265
H. Facility's Phone: (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. Waste Flammable Liquid N.O.S. Flammable Liquid UN1993	001	T.T	05500	G	F003 F005 D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: Wyckoff P.O. 042176
K. Handling Codes for Wastes Listed Above: G = Gallons

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Mark Wallace
Signature:
Month / Date Day / Year

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: John Van Vlymen
Signature: John Van Vlymen
Month / Date Day / Year: 05 10 88

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Month / Date Day / Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: F DUNFEE
Signature: F Dunfee
Month / Date Day / Year: 05 10 88

GENERATOR / TRANSPORTER / FACILITY

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0224064

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

212 TC TSD 5/11/88

015023

ANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
ICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: M.I.D.0.8.0.3.6.1.4.5.4
Manifest Document No.: 8.8.0.2.9
2. Page 1 of 1
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Wyckoff Chemical Company, Inc.
1421 Kalamazoo Street
South Haven, MI 49090

A. State Manifest Document Number: INA 0224065
B. State Generator's ID:

4. Generator's Phone (616) 637-8474

5. Transporter 1 Company Name: Mr. Frank, Inc.
6. Use EPA ID Number: I.L.D.0.6.9.5.0.6.1.6.0
C. State Transporter's ID: 0079
D. Transporter's Phone: 800-642-2203

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Service, Inc.
420 S. Colfax Avenue
Griffith, IN 46319
10. Use EPA ID Number: I.N.D.0.1.6.3.6.0.2.6.5
G. State Facility's ID: IND016360265
H. Facility's Phone: (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. Waste Flammable Liquid N.O.S. Flammable Liquid UN1993	001	T.T	05000	G	F 003 F 005 D 001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: Wyckoff P.O. 042176
K. Handling Codes for Wastes Listed Above: G = Gallons

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable International and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Mark Wallace
Signature: Mark Wallace
Date: Month 05 Day 13 Year 88

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: MICHAEL A. PFEIFER
Signature: Michael A. Pfeifer
Date: Month 05 Day 13 Year 88

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Date: Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: P DUNFEE
Signature: P Dunfee
Date: 05 13 88

GENERATOR / TRANSPORTER / FACILITY

Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

210 TCT 50 5/13/88

INA 0224065

015024

...response at 317/243-5155 (day), or 317/633-0144 (night) and the ...2 or 202/426-2675.

IND[illegible]ARTMENT OF ENVIRONMENTAL MANAGEMENT
OFI[illegible]OLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. M·I·D·0·8·0·3·6·1·4·5·4 | Manifest Document No. 8·8·0·3·8 | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Wyckoff Chemical Company, Inc.
1421 Kalamazoo Street
South Haven, MI 49090
4. Generator's Phone (616) 637-8474

A. State Manifest Document Number: INA 0224071
B. State Generator's ID:
C. State Transporter's ID: 0079
D. Transporter's Phone: 800-642-2203
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID: IND016360265
H. Facility's Phone: (219) 924-4370

5. Transporter 1 Company Name: Mr. Frank, Inc.
6. Use EPA ID Number: I·L·D·0·6·9·5·0·6·1·6·0
7. Transporter 2 Company Name:
8. Use EPA ID Number:
9. Designated Facility Name and Site Address
American Chemical Service, Inc.
420 S. Colfax Avenue
Griffith, IN 40319
10. Use EPA ID Number: I·N·D·0·1·6·3·6·0·2·6·5

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. Waste Flammable Liquid N.O.S. Flammable Liquid UN 1993	001	T	05300	G	F003 F005 D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: P.O. #042395
K. Handling Codes for Wastes Listed Above: G = Gallons

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR
Printed/Typed Name: Mark Wallace | Signature: Mark Wallace | Date: Month 06 Day 23 Year 88

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: CARL E. MILBURN | Signature: Carl E. McBurn | Date: Month 06 Day 23 Year 88
18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: | Signature: | Date: Month . Day . Year .

FACILITY
19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: T DUNFEE | Signature: T Dunfee | Date: Month 06 Day 27 Year 88

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0224071

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

2 11 TKTSD 6/22 M

015025

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: I·N·D·0·8·0·3·6·1·4·5·4 | Manifest Document No.: 8·8·0·3·9 | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Wyckoff Chemical Company, Inc.
1421 Kalamazoo STreet
South Haven, MI 49090
4. Generator's Phone (616) 637-8474

A. State Manifest Document Number: INA 0224072
B. State Generator's ID: xxxxx
C. State Transporter's ID: 0079
D. Transporter's Phone: 800-642-2203
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID: INDO16360265
H. Facility's Phone: (219) 924-4370

5. Transporter 1 Company Name: Mr. FRank, Inc.
6. Use EPA ID Number: I·L·D·0·6·9·5·0·6·1·6·0
7. Transporter 2 Company Name:
8. Use EPA ID Number:
9. Designated Facility Name and Site Address
American Chemical Service, Inc.
420 S. Colfax Avenue
Griffith, IN 40319
10. Use EPA ID Number: I·N·D·0·1·6·3·6·0·2·6·5

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. Waste Flammable Liquid N.O.S. Flammable Liquid UN 1993	001	TT	05300	G	D003 D005 D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
P.O. No. 042395

K. Handling Codes for Wastes Listed Above
G=Gallons

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR — Printed/Typed Name: Mark Wallace | Signature | Date Month Day Year

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JOE WEBER | Signature | Date Month Day Year: 06 27 88
18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Date Month Day Year

FACILITY
19. Discrepancy Indication Space
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: EDUNFEE | Signature | Month Day Year: 06 28 88

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0224072

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

015026

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: M.I.D.0.8.0.3.6.1.4.5.4
Manifest Document No.: 8.8.0.4.8
2. Page 1 of 1
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Wyckoff Chemical Company, Inc.
1421 Kalamazoo Street
South Haven, MI 49090

4. Generator's Phone (616) 637-8474

A. State Manifest Document Number: INA 0224074
B. State Generator's ID:
C. State Transporter's ID: 0079
D. Transporter's Phone: 800-426-7549
E. State Transporter's ID:
F. Transporter's Phone:

5. Transporter 1 Company Name: Mr. Frank, Inc.
6. Use EPA ID Number: I.L.D.0.6.9.5.0.6.1.6.0

7. Transporter 2 Company Name:
8. Use EPA ID Number:

9. Designated Facility Name and Site Address
American Chemical Service, Inc.
420 S. Colfax Avenue
Griffith, IN 40319

10. Use EPA ID Number: I.N.D.0.1.6.3.6.0.2.6.5

G. State Facility's ID: IND016360265
H. Facility's Phone: (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. Waste Flammable Liquid N.O.S. Flammable Liquid UN 1993		T.T	5500	G	F003 F005 D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: P.O. No. 042600

K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Mark Wallace
Signature: Mark Wallace
Date: Month 08 Day 11 Year 88

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Pete CRISHN
Signature: Peter Crisan
Date: Month 08 Day 11 Year 88

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Date: Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: FDUNFEE
Signature: FDunfee
Date: Month 08 Day 11 Year 88

GENERATOR / TRANSPORTER / FACILITY

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0224074

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

211RT50 8/11M

015027

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: M.I.D.0.8.0.3.6.1.4.5.4
Manifest Document No.: 8.8.0.5.2
2. Page 1 of 1
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Wyckoff Chemical Company, Inc.
1421 Kalamazoo Street
South Haven, MI 49090
4. Generator's Phone (616) 637-8474

A. State Manifest Document Number: INA 0224075
B. State Generator's ID:

5. Transporter 1 Company Name: Mr. Frank, Inc.
6. Use EPA ID Number: I.L.D.0.6.9.5.0.6.1.6.0
C. State Transporter's ID: 0079
D. Transporter's Phone: 800-426-7549

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Service, Inc.
420 S. Colfax Avenue
Griffith, IN 40319
10. Use EPA ID Number: I.N.D.0.1.6.3.6.0.2.6.5
G. State Facility's ID: IND016360265
H. Facility's Phone: (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. Waste Flammable Liquid N.O.S. Flammable Liquid UN 1993		T.T		G	F003 F005 D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: P.O. #042627
K. Handling Codes for Wastes Listed Above: G = Gallons

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable International and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Mark Wallace
Signature:
Date: Month 08 Day 18 Year 88

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JeFF Brown
Signature: [signature]
Date: Month 08 Day 18 Year 88

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Date: Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: FDUNFEE
Signature: [signature]
Date: Month 08 Day 18 Year 88

GENERATOR / TRANSPORTER / FACILITY

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0224075

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

015028

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: I·N·D·0·8·0·3·6·1·4·5·4 | Manifest Document No.: 8·8·0·5·1 | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Wyckoff Chemical Company, Inc.
1421 Kalamazoo Street
South Haven, MI 49090

4. Generator's Phone (616) 637-8474

A. State Manifest Document Number: INA 0224076

B. State Generator's ID:

5. Transporter 1 Company Name: Mr. Frank, Inc.

6. Use EPA ID Number: I·L·D·0·6·9·5·0·6·1·6·0

C. State Transporter's ID: 0079

D. Transporter's Phone: 800-426-7549

7. Transporter 2 Company Name:

8. Use EPA ID Number:

E. State Transporter's ID:

F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Service, Inc.
420 S. Colfax Avenue
Griffith, IN 40319

10. Use EPA ID Number: I·N·D·0·1·6·3·6·0·2·6·5

G. State Facility's ID: INDO16360265

H. Facility's Phone: (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. Waste Flammable Liquid N.O.S. Flammable Liquid UN 1993	001	TT	05500	G	D003 D005 D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
P.O. #042627

K. Handling Codes for Wastes Listed Above
G = Gallons

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR — Printed/Typed Name: Mark Wallace — Signature: — Date: Month 08 Day 25 Year 88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Randy Karlovsky — Signature: Randy Karlovsky — Date: Month 08 Day 25 Year 88

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: — Signature: — Date: Month . Day . Year .

FACILITY

19. Discrepancy Indication Space
4000-120RCT63 8/25
1500-210RTSD 8/25

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: T-DUNFEE — Signature: T-Dunfee — Date: 082588

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0224076

015029

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. M·I·D·0·8·0·3·6·1·4·5·4 | Manifest Document No. 8 8 0 5 7 | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Wyckoff Chemical Company, Inc.
1421 Kalamazoo Street
South Haven, MI 49090
4. Generator's Phone (616) 637-8474

A. State Manifest Document Number: INA 0224067
B. State Generator's ID:
C. State Transporter's ID: 0079
D. Transporter's Phone: 800-426-7549
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID: INDO16360265
H. Facility's Phone: 219-924-4370

5. Transporter 1 Company Name: Mr. Frank, Inc.
6. Use EPA ID Number: I·L·D·0·6·9·5·0·6·1·6·0·0
7. Transporter 2 Company Name:
8. Use EPA ID Number:
9. Designated Facility Name and Site Address: American Chemical Service, Inc.
420 S. Colfax Avenue
Griffith, IN 40319
10. Use EPA ID Number: I·N·D·0·1·6·3·6·0·2·6·5

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. Waste Flammable Liquid N.O.S. Flammable Liquid UN 1993	001	TT	05400	G	D001 F003 F005
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: P.O. #042752
K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR — Printed/Typed Name: Mark Wallace | Signature | Date Month 09 Day 13 Year 88

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials — Printed/Typed Name: [illegible] | Signature | Date Month 09 Day 13 Year 88
18. Transporter 2 Acknowledgement of Receipt of Materials — Printed/Typed Name | Signature | Date Month Day Year

FACILITY
19. Discrepancy Indication Space
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. — Printed/Typed Name: FDUNFEE | Signature | Date Month 09 Day 13 Year 88

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0224067

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

202TCT50 9/13

015030

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: M.I.D.0.8.0.3.6.1.4.5.4 | Manifest Document No.: 8.8.0.80 | 2. Page 1 of 1 | Information in the shaded areas not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Wyckoff Chemical Company, Inc.
1421 Kalamazoo Street
South Haven, MI 49090
4. Generator's Phone (616) 637-8474

A. State Manifest Document Number: INA 0302826
B. State Generator's ID:

5. Transporter 1 Company Name: Mr. Frank, Inc.
6. Use EPA ID Number: I.L.D.0.6.9.5.0.6.1.6.0
C. State Transporter's ID: 0079
D. Transporter's Phone: 800-426-7549

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Service, Inc.
420 S. Colfax Avenue
Griffith, IN 40319
10. Use EPA ID Number: I.N.D.0.1.6.3.6.0.2.6.5
G. State Facility's ID: IND016360265
H. Facility's Phone: (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No
a. Waste Flammable Liquid N.O.S. Flammable Liquid UN 1993	001	TT	05500	G	F003 F005 D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: P.O. 043091
K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR
Printed/Typed Name: Mark Wallace | Signature | Date: Month / Day / Year

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JACK McCLEVERTY | Signature | Date: Month 1 1 Day 15 Year 88
18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Date: Month / Day / Year

FACILITY
19. Discrepancy Indication Space
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 19
Printed/Typed Name: FD UNFEE | Signature | Date: Month 1 Day 15 Year 88

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY

11 SPC T63 11/15

015031

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: M.I.D.0.8.0.3.6.1.4.5.4 | Manifest Document No.: 8.8.0.8.2
2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Wyckoff Chemical Company, Inc.
1421 Kalamazoo Street
South Haven, MI 49090
4. Generator's Phone ( )

A. State Manifest Document Number: INA 0302827
B. State Generator's ID:

5. Transporter 1 Company Name: Mr. Frank, Inc.
6. Use EPA ID Number: I L D 0 6 9 5 0 6 1 6 0
C. State Transporter's ID: 0079
D. Transporter's Phone: 800-426-7549

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Service, Inc.
420 S. Colfax Avenue
Griffith, IN 40319
10. Use EPA ID Number: I N D 0 1 6 3 6 0 2 6 5
G. State Facility's ID: IND016360265
H. Facility's Phone: (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. Waste Flammable Liquid N.O.S. Flammable Liquid UN 1993	001	T	04200	G	F003 F005 D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
P.O. 043091

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR
Printed/Typed Name: Mark Wallace
Signature: Mark Wallace
Date: Month 11 Day 15 Year 88

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Robert PERKINS
Signature: Robert Perkins
Date: Month 11 Day 18 Year 88

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Date: Month Day Year

FACILITY
19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19
Printed/Typed Name: FDUNFEE
Signature: FDunfee
Date: Month 11 Day 18 Year 88

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0302827

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

210CT50 11/18

COPY 5. TSD COPY

015032

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.
M.I.D.0.8.0.3.6.1.4.5.4	8-8-0-8-0		

3. Generator's Name and Mailing Address
Wyckoff Chemical Company, Inc.
1421 Kalamazoo Street
South Haven, MI 49090
4. Generator's Phone ( )

A. State Manifest Document Number: INA 0302828
B. State Generator's ID:

5. Transporter 1 Company Name: Mr. Frank, Inc.
6. Use EPA ID Number: I.L.D.0.6.9.5.0.6.1.6.0
C. State Transporter's ID: 0079
D. Transporter's Phone: 800-426-7549

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Service, Inc.
420 S. Colfax Avenue
Griffith, In 40319
10. Use EPA ID Number: I.N.D.0.1.6.3.6.0.2.6.5
G. State Facility's ID: INDO16360265
H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. Waste Flammable Liquid NOS Flammable Liquid UN 1993		T.T	5.300	G	F003 F005 D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
P.O. 043227

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR

Printed/Typed Name	Signature	Date Month	Day	Year
Mark Wallace	Mark Wallace (DS)	12	14	88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year
JOAQUIN GARCIA		12	14	88

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year

FACILITY

19. Discrepancy Indication Space
3000-210TCTSD 12/16
3301-211RTSD 12/16

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name	Signature	Date Month	Day	Year
PDUNFEE	PDunfee	12	16	88

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA0302828

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY

015033

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded not required by Federal items D, F, H and I are req State law.
M.I.D.0.8.0.3.6.1.4.5.4	8.9.0.0.8		

3. Generator's Name and Mailing Address
Wyckoff Chemical Company, Inc.
1491 Kalamazoo Street
South Haven, MI 49090
4. Generator's Phone (616) 637-8474

A. State Manifest Document Number: INA 0302830
B. State Generator's ID:

5. Transporter 1 Company Name: Mr. Frank, Inc.
6. Use EPA ID Number: I.L.D.0.6.9.5.0.6.1.6.0
C. State Transporter's ID: 0079
D. Transporter's Phone: 800-426-75

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Service, Inc.
420 S. Colfax Avenue
Griffith, IN 40319
10. Use EPA ID Number: I.N.D.0.1.6.3.6.0.2.6.5
G. State Facility's ID: IND016360265
H. Facility's Phone: (219)924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste
a. Waste Flammable Liquid N.O.S. Flammable Liquid UN 1993	001	T.T	05400	G	F003 F005 D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
P.O. No. 043492

K. Handling Codes for Wastes Listed Above
G = Gallons

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available t which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR

Printed/Typed Name	Signature	Date Month	Day
Mark Wallace	Mark Wallace	01	20

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day
CARL E. MILBURN	Carl E. McBurn	01	20

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name	Signature	Date Month
P DUNFEE	P Dunfee	01 20 89

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY

0016492

...ONMENTAL MANAGEMENT
...ARDOUS WASTE MANAGEMENT

...207-7035

...NT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-

...I HAZARDOUS ...STE MANIFEST

1. Generator's US EPA ID No.: M.I.D.0.8.0.3.6.1.4.5.4 | Manifest Document No.: 8.9.0.0.9 | 2. Page 1 of 1

Information in the shaded are not required by Federal law items D, F, H and I are require State law.

3. Generator's Name and Mailing Address
...yckoff Chemical Company, Inc.
1421 Kalamazoo Street
South Haven, MI 49090

A. State Manifest Document Number: INA 0302831

B. State Generator's ID:

4. Generator's Phone ( )

5. Transporter 1 Company Name: Mr. Frank, INC.

6. Use EPA ID Number: I L D 0 6 9 5 0 6 1 6 0

C. State Transporter's ID: 0079

D. Transporter's Phone: 800-426-7569

7. Transporter 2 Company Name:

8. Use EPA ID Number:

E. State Transporter's ID:

F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Service, Inc.
420 S. Colfax AVenue
Griffith, IN 40319

10. Use EPA ID Number: I.N.D.0.1.6.3.6.0.2.6.5

G. State Facility's ID: IND016360265

H. Facility's Phone: (219)924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. Waste Flammable Liquid N.O.S. Flammable Liquid UN 1993	001	T.T	01500	G	F003 F005 D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: P.O. No. 043492

K. Handling Codes for Wastes Listed Above: G = Gallons

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I ha determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to r which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good fa effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Mark Wallace | Signature: Mark Wallace | Date: Month 01 Day 26 Year 8...

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Robert PERKINS | Signature: Robert Perkins | Date: Month 01 Day 26 Year 89

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: | Signature: | Date: Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19
Printed/Typed Name: FDUNFEE | Signature: FDunfee | Date: Month 01 Day 26 Year 8...

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

2 11 TSD 1/2 GM

COPY 5. TSD COPY

0016494

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: M I D 0 8 0 3 6 1 4 5 4
Manifest Document No.: 8 9 0 1 9
2. Page 1 of 1
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Wyckoff Chemical Company, Inc.
1421 Kalamazoo Street
South Haven, MI 49090
4. Generator's Phone (616) 637-8474

A. State Manifest Document Number: INA 0302832
B. State Generator's ID:

5. Transporter 1 Company Name: Mr. Frank, Inc.
6. Use EPA ID Number: I L D 0 6 9 5 0 6 1 6 0
C. State Transporter's ID: 0079
D. Transporter's Phone: 800-426-7549

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Service, Inc.
420 S. Colfax AVenue
Griffith, IN 40319
10. Use EPA ID Number: I N D 0 1 6 3 6 0 2 6 5
G. State Facility's ID: IND016360265
H. Facility's Phone: (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WasteFlammable Liquid N.O.S. Flammable Liquid UN1993	001	TT	05400	G	F003 F005 D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
P.O. 043715
Flammable Liquid ~~XXXXX~~ UN1993

K. Handling Codes for Wastes Listed Above
G = 1

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Mark Wallace
Signature: [signature]
Date: Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JOSEPH L. KODINGA
Signature: Joseph L Kodinga
Date: Month Day Year: 022289

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Date: Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted from 19.
Printed/Typed Name: FDUNFEE
Signature: [signature]
Date: Month Day Year: 022289

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA0302832

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

21 TRTSD 2/22

COPY 5. TSD COPY

0016495

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. M.I.D.0.8.0.3.6.1.4.5.4 | Manifest Document No. 8.9.0.2.5
2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Wyckoff Chemical Company, Inc.
1451 Kalamazoo Street
South Haven, MI 49090
4. Generator's Phone (616) 637-8474

A. State Manifest Document Number: INA 0302834
B. State Generator's ID:

5. Transporter 1 Company Name: Mr. Frank, Inc.
6. Use EPA ID Number: I.L.D.0.6.9.5.0.6.1.6.0
C. State Transporter's ID: 0079
D. Transporter's Phone: 800-426-7549

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Service, Inc.
420 S. Colfax Avenue
Griffith, IN 40319
10. Use EPA ID Number: I.N.D.0.1.6.3.6.0.2.6.5
G. State Facility's ID: IND016360265
H. Facility's Phone: (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. Waste Flammable Liquid N.O.S. Flammable Liquid UN1993	001	T	00330	G	F003 F005 D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
P.O. 043809
Flammable Liquid UN1993

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR

Printed/Typed Name: Mark Wallace
Signature:
Date: Month 9 Day 4 Year 91

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: GARY DERESS
Signature:
Date: Month 9 Day 5 Year 91

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Date: Month . Day . Year .

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: F DUNFEE
Signature:
Date: Month 9 Day 30 Year 91

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA0302834

0016488

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE *(Form designed for use on elite (12-pitch) typewriter.)* *Form Approved. OMB No. 2050-0039. Expires 9-30-91*

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.
M.I.D.0.8.0.3.6.1.4.5.4	8.9.0.2.9		

GENERATOR

3. Generator's Name and Mailing Address
Wyckoff Chemical Company, Inc.
1421 Kalamazoo Street
South Haven, MI 49090
4. Generator's Phone (616) 637-8474

A. State Manifest Document Number: INA 0302835
B. State Generator's ID:

5. Transporter 1 Company Name: Mr. Frank Inc.
6. Use EPA ID Number: I.L.D.0.6.9.5.0.6.1.6.0
C. State Transporter's ID: 0079
D. Transporter's Phone: 800-426-7549

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Service, Inc.
420 S. Colfax AVenue
Griffith, IN 40319
10. Use EPA ID Number: I.N.D.0.1.6.3.6.0.2.6.5
G. State Facility's ID: IND016360265
H. Facility's Phone: (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. Waste Flammable Liquid N.O.S. Flammable Liquid UN 1993		T.T	05.0.0.0	G	F003 F005 D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: P.O. 043871
K. Handling Codes for Wastes Listed Above: G = Gallons

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name	Signature	Date (Month Day Year)
Mark Wallace	Mark Wallace	03 23 89

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)
Walter C. Klauba	Walter C. Klauba	03 23 89

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name	Signature	Date (Month Day Year)
FDUNFEE	FDunfee	03 23 89

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0302835

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

2 11 TSD 3/23

COPY 5. TSD COPY

0016489

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: M.I.D.0.8.0.3.6.1.4.5.4
Manifest Document No.: 8.9.0.3.2
2. Page 1 of 1
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Wyckoff Chemical Company, Inc.
1421 Kalamazoo Street
South Haven, MI 49090
4. Generator's Phone (616) 637-8474

A. State Manifest Document Number: INA 0302839
B. State Generator's ID:

5. Transporter 1 Company Name: Mr. Frank, Inc.
6. Use EPA ID Number: I L D 0 6 9 5 0 6 1 6 0
C. State Transporter's ID: 0079
D. Transporter's Phone: 800-426-7549

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Service, Inc.
420 S. Colfax Avenue
Griffith, IN 40319
10. Use EPA ID Number: I N D 0 1 6 3 6 0 2 6 5
G. State Facility's ID: IND016360265
H. Facility's Phone: (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. Waste Flammable Liquid N.O.S. Flammable Liquid UN 1993	001	T.T	05500	G	F003 F005 D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
P.O. 043950

K. Handling Codes for Wastes Listed Above
G = Gallons

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR — Printed/Typed Name: Mark Wallace — Signature: Mark Wallace — Date: Month 04 Day 07 Year 89

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: KON BRIDGEWATER — Signature: Kon Bridgewater — Date: Month 04 Day 07 Year 89
18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: — Signature: — Date: Month . Day . Year .

FACILITY
19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: WHITAKER ALLEN — Signature: Allen Whitaker — Month 04 Day 07 Year 89

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA0302839

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

12TCT634/9

COPY 5. TSD COPY

0016191

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: M.I.D.0.8.0.3.6.1.4.5.4
Manifest Document No.: 8.9.0.3.5
2. Page 1 of 1
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Wyckoff Chemical Company, Inc.
1421 Kalamazoo Street
South Haven, MI 49090

4. Generator's Phone (616) 637-8474

A. State Manifest Document Number: INA 0302840
B. State Generator's ID:

5. Transporter 1 Company Name: Mr. Frank, Inc.
6. Use EPA ID Number: I.L.D.0.6.9.5.0.6.1.6.0
C. State Transporter's ID: 0079
D. Transporter's Phone: 800-426-7549

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Service, Inc.
420 S. Colfax Avenue
Griffith, IN 40319

10. Use EPA ID Number: I.N.D.0.1.6.3.6.0.2.6.5
G. State Facility's ID: IND016360265
H. Facility's Phone: (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. Waste Flammable Liquid N.O.S. Flammable Liquid UN 1993	001	TT	05500	G	F003 F005 D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: P.O. No. 044016

K. Handling Codes for Wastes Listed Above: G = Gallons

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Mark Wallace
Signature: Mark Wallace
Date: Month 04 Day 20 Year 89

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: RON BRIDGEWATER
Signature: Ron Bridgewater
Date: Month 04 Day 20 Year 89

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Date: Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19
Printed/Typed Name: WHITAKER A
Signature: Allen Whitaker
Date: Month 4 Day 20 Year 89

GENERATOR / TRANSPORTER / FACILITY

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA0302840

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY

212 KT 50 4/20

0016486

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: M.I.D.0.8.0.3.6.1.4.5.4
Manifest Document No.: 8.9.0.4.6
2. Page 1 of 1
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Wyckoff Chemical Company, Inc.
1421 Kalamazoo Street
South Haven, MI 49090
4. Generator's Phone (616) 637-8474

A. State Manifest Document Number: INA 0302842
B. State Generator's ID:

5. Transporter 1 Company Name: Mr. Frank, Inc.
6. Use EPA ID Number: I.L.D.0.6.9.5.0.6.1.6.0
C. State Transporter's ID: 0079
D. Transporter's Phone: 800-426-7549

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Service, Inc.
420 S. Colfax Avenue
Griffith, IN 40319
10. Use EPA ID Number: I.N.D.0.1.6.3.6.0.2.6.5
G. State Facility's ID: INDO16360265
H. Facility's Phone: (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. Waste Flammable Liquid N.O.S. Flammable Liquid UN 1993	001	T	0.5000	G	F003 F005 D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: P.O. 044272
K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR — Printed/Typed Name: Mark Wallace — Signature: [signature] — Date: Month 06 Day 05 Year 89

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials — Printed/Typed Name: Ronald W. Prosser — Signature: [signature] — Date: Month 06 Day 05 Year 89
18. Transporter 2 Acknowledgement of Receipt of Materials — Printed/Typed Name: — Signature: — Date: Month . Day . Year .

FACILITY
19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: FDUNFEE — Signature: FDunfee — Date: Month 06 Day 05 Year 89

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

124TCT62 6/5

COPY 5. TSD COPY

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA0302842

0016487

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: M.I.D.0.8.0.3.6.1.4.5.4 — Manifest Document No.: 8.9.0.5.5
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address:
Wyckoff Chemical Company, Inc.
1421 Kalamazoo Street
South Haven, MI 49090

4. Generator's Phone (616) 637-8474

A. State Manifest Document Number: INA 0302843
B. State Generator's ID:

5. Transporter 1 Company Name: Mr. Frank, Inc.
6. Use EPA ID Number: I.L.D.9.8.4.7.7.5.0.4.9 PC
C. State Transporter's ID: 0079
D. Transporter's Phone: 800-426-7549

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address:
American Chemical Service, Inc.
420 S. Colfax Avenue
Griffith, IN 40319

10. Use EPA ID Number: I.N.D.0.1.6.3.6.0.2.6.5
G. State Facility's ID: IND016360265
H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. Waste Flammable Liquid N.O.S. Flammable Liquid UN 1993	001	TT	05200	G	F003 F005 D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: P.O. No. 044405
K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information:

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Mark Wallace — Signature: Mark Wallace — Date: Month / Day / Year

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Peter CRISAN — Signature: Peter Crisan — Date: Month 07 Day 10 Year 89

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: — Signature: — Date: Month / Day / Year

19. Discrepancy Indication Space:

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19
Printed/Typed Name: FDUNFEE — Signature: F Dunfee — Date: Month / Day / Year 07 10 89

GENERATOR — TRANSPORTER — FACILITY

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA0302843

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

7.10 VC TSD 7/10

COPY 5. TSD COPY

0016484

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE *(Form designed for use on elite (12-pitch) typewriter.)* *Form Approved. OMB No. 2050-0039. Expires 9-30-91*

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: M.I.D.0.8.0.3.6.1.4.5.4
Manifest Document No.: 8.9.0.[illegible] 64
2. Page 1 of 1
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
WYCKOFF CHEMICAL COMPANY, INC.
1421 Kalamazoo Street
South Haven, MI 49090
4. Generator's Phone (616) 637-8474

A. State Manifest Document Number: INA 0302844
B. State Generator's ID:

5. Transporter 1 Company Name: Mr. Frank, Inc.
6. Use EPA ID Number: I L D 9 8 4 7 7 5 0 4 9
C. State Transporter's ID: 0079
D. Transporter's Phone: 800-426-7549

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE, INC.
420 S. Colfax Avenue
Griffith, IN 40319
10. Use EPA ID Number: I N D 0 1 6 3 6 0 2 6 5
G. State Facility's ID: IND016360265
H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE FLAMMABLE LIQUID N.O.S. FLAMMABLE LIQUID UN 1993	001	TT	0530.0	G	F003 F005 D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: PO#044571
K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information:

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable International and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Mark Wallace
Signature: Mark Wallace (P)
Date: Month 08 Day 22 Year 89

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: CARL E PROSSER
Signature: Carl E Prosser
Date: Month 08 Day 22 Year 89

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Date: Month Day Year

19. Discrepancy Indication Space:

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: EDONFEE
Signature: [illegible]
Date: Month Day Year

GENERATOR / TRANSPORTER / FACILITY

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA0302844

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY

0016485

ANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
ICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: M.I.D.0.8.0.3.6.1.4.5.4
Manifest Document No.: 8.9.0.7.7
2. Page 1 of 1
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
WYCKOFF CHEMICAL COMPANY, INC.
1421 Kalamazoo St
So. Haven, MI 49090
4. Generator's Phone ( ) (616) 637-8474

A. State Manifest Document Number: INA 0302845
B. State Generator's ID:

5. Transporter 1 Company Name: Mr. Frank, Inc.
6. Use EPA ID Number: I L D 9 8 4 7 7 5 0 4 9
C. State Transporter's ID: 0079
D. Transporter's Phone: 800-426-7549

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Service, Inc.
420 S. Colfax Avenue
Griffith, IN 40319
10. Use EPA ID Number: I N D 0 1 6 3 6 0 2 6 5
G. State Facility's ID: IND016360265
H. Facility's Phone: (219) 924-4370

11. US DDT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE FLAMMABLE LIQUID NOS FLAMMABLE LIQUID UN 1993	001	TT	05400	G	F003 F005 D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: PO #044671
K. Handling Codes for Wastes Listed Above: G=Gallons

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Mark Wallace
Signature: Mark Wallace
Date: Month 09 Day 18 Year 89

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: CARL T JUNGER
Signature: Carl T. Junger
Date: Month 09 Day 18 Year 89

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Date: Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: F DUNFEE
Signature: F Dunfee
Month 09 Day 18 Year 89

GENERATOR / TRANSPORTER / FACILITY

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA0302845

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY

124TCT63 9/18/89

0016481

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: M I D 0 8 0 3 6 1 4 5 4
Manifest Document No.: 8 9 0 8 0
2. Page 1 of 1
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
WYCKOFF CHEMICAL COMPANY, INC.
1421 Kalamazoo St
South Haven, MI 49090
4. Generator's Phone ( ) (616) 637-8474

A. State Manifest Document Number: INA 0302846
B. State Generator's ID:

5. Transporter 1 Company Name: Mr. Frank, Inc.
6. Use EPA ID Number: I L D 9 8 4 7 7 5 0 4 9
C. State Transporter's ID: 0079
D. Transporter's Phone: 800-426-7549

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE, INC.
420 S. Colfax Avenue
Griffith, IN 40319
10. Use EPA ID Number: I N D 0 1 6 3 6 0 2 6 5
G. State Facility's ID: IND016360265
H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE FLAMMABLE LIQUID NOS FLAMMABLE LIQUID UN 1993	001	TT	05300	G	F003 F005 D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: PO#044693
K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR

Printed/Typed Name: Mark Wallace
Signature:
Date: Month Day Year

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: GARY DERESS
Signature:
Date: Month 09 Day 25 Year 89

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: FDUNFEE
Signature:
Date: Month 09 Day 25 Year 89

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY

212 TC TSD 9/25

0016482

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA0302846

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: I N I D 0 8 0 3 6 1 4 5 4
Manifest Document No.: 8 9 0 8 4
2. Page 1 of 1
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Wyckoff Chemical Company, Inc.
1421 Kalamazoo St
South Haven, MI 49090
4. Generator's Phone (616) 637-8474

A. State Manifest Document Number: INA 0302848
B. State Generator's ID:

5. Transporter 1 Company Name: Mr. Frank, Inc.
6. Use EPA ID Number: I L D 9 8 4 7 7 5 0 4 9
C. State Transporter's ID: 0079
D. Transporter's Phone: 800-426-7549

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE, INC.
420 S. Colfax Avenue
Griffith, IN 40319
10. Use EPA ID Number: I. N. D. 0. 1. 6. 3. 6. 0. 2. 6. 5
G. State Facility's ID: IND016360265
H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE FLAMMABLE LIQUID NOS FLAMMABLE LIQUID UN 1993	001	TT	05400	G	F003 D005 D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
[redacted]
PO#44762

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR
Printed/Typed Name: Mark Wallace
Signature: Mark Wallace ITS
Date: Month 10 Day 6 Year 89

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JOSEPH L. KOOINGA
Signature: Joseph L Kooinga
Date: Month 10 Day 06 Year 89
18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Date: Month . Day . Year .

FACILITY
19. Discrepancy Indication Space
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: FDUNFEE
Signature: FDunfee
Date: Month 10 Day 06 Year 89

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0302848

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY

11SCT63 10/6

0016483

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-3

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: M.I.D.9.8.0.3.6.1.4.5.4
Manifest Document No.: 8.9.7.8.7
2. Page 1 of 1
Information in the shaded area: not required by Federal law, items D, F, H and I are required State law.

3. Generator's Name and Mailing Address
Wyckoff Chemical Company, Inc.
1421 Kalamazoo Street
South Haven, MI 49090
4. Generator's Phone (616) 637-8474

A. State Manifest Document Number: INA 0302849
B. State Generator's ID:

5. Transporter 1 Company Name: Mr. Frank, Inc.
6. Use EPA ID Number: I.L.D.9.8.4.7.7.5.0.4.9
C. State Transporter's ID: 0079
D. Transporter's Phone: 800-426-7549

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Service, Inc.
420 S. Colfax Avenue
Griffith, IN 40319
10. Use EPA ID Number: I.N.D.0.1.6.3.6.0.2.6.5
G. State Facility's ID: IND016360265
H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. Waste Flammable Liquid N.O.S. Flammable Liquid UN 1993	001	T-T	05300 05300	G	F003 F005 D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: P.O. 044857
K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information:

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I hav determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to m which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good fai effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Mark Wallace
Signature: Mark Wallace
Date: Month 10 Day 30 Yea 89

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Robert Perkins
Signature: Robert Perkins
Date: Month 10 Day 30 Yea 89

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Date: Month Day Yea

19. Discrepancy Indication Space:

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as not Item 19.
Printed/Typed Name: FDUNFEE
Signature: FDunfee
Month Day Year 10 30 89

GENERATOR / TRANSPORTER / FACILITY

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY

122RT63 10/30

0016478

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.
M.I.D.0.8.0.3.6.1.4.5.4	89089		

3. Generator's Name and Mailing Address
Wyckoff Chemical Company, Inc.
1421 Kalamazoo Street
South Haven, MI 49090
4. Generator's Phone (616) 637-8474

A. State Manifest Document Number: INA 0302850
B. State Generator's ID:

5. Transporter 1 Company Name: Mr. Frank, Inc.
6. Use EPA ID Number: I L D 9 8 4 7 7 5 0 4 9
C. State Transporter's ID: EXEMPT 0079
D. Transporter's Phone: 800-426-7549

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Service, Inc.
420 S. Colfax Avenue
Griffith, IN 40319
10. Use EPA ID Number: I.N.D.0.1.6.3.6.0.2.6.5
G. State Facility's ID: IND016360265
H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. Waste Flammable Liquid N.O.S. Flammable Liquid UN 1993	001	T T	053.00	G	F003 F005 D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
P.O. #044923

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR
Printed/Typed Name: Mark Wallace, Plant Manager
Signature: Mark Wallace
Date: Month 11 Day 14 Year 89

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: PETER CRISAN
Signature: Peter Crisan
Date: Month 11 Day 14 Year 89

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Date: Month . Day . Year .

FACILITY
19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: EDUNFEE
Signature: Edunfee
Date: Month 11 Day 14 Year 89

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

4000-117 TCT 63 1/14

COPY 5. TSD COPY 1300-206 TCT 50 1/14

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA0302850

0016479

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. M I D 0 8 0 3 6 1 4 5 4 | Manifest Document No. 8 9 0 9 0 | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
WICKOFF CHEMICAL COMPANY, INC.
1421 Kalamazoo St
South Haven, MI 49090

4. Generator's Phone (616) 637-8474

A. State Manifest Document Number: INA 0391583
B. State Generator's ID:

5. Transporter 1 Company Name: Mr. Frank, Inc.
6. Use EPA ID Number: I L D 9 8 4 7 7 5 0 4 9
C. State Transporter's ID: 0079
D. Transporter's Phone: 800-426-7549

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Service, Inc.
420 S. Colfax Avenue
Griffith, IN 40319

10. Use EPA ID Number: I N D 0 1 6 3 6 0 2 6 5
G. State Facility's ID: IND016360265
H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE FLAMMABLE LIQUID NOS FLAMMABLE LIQUID UN 1993	0 0 1	TT	0 5 2 0 0	G	F003 F005 D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: PO#044976
K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR — Printed/Typed Name: Mark Wallace | Signature | Date: Month 11 Day 3 Year 89

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: CARL T JUNGER | Signature | Date: Month 11 Day 3 Year 89

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: | Signature | Date: Month . Day . Year .

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: F DUNFEE | Signature | Date: Month 11 Day 30 Year 89

211 RCT 50 11/30

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675...

INA 0391583

0016480

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

7

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: MID080361454 — Manifest Document No.: 89094

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
WYCKOFF CHEMICAL COMPANY, INC.
1421 Kalamazoo Street
South Haven, MI 49090

4. Generator's Phone (616) 637-8474

A. State Manifest Document Number: INA 0391584

B. State Generator's ID:

5. Transporter 1 Company Name: Mr. Frank, Inc.

6. Use EPA ID Number: ILD984775049

C. State Transporter's ID: 0079

D. Transporter's Phone: 800-426-7549

7. Transporter 2 Company Name:

8. Use EPA ID Number:

E. State Transporter's ID:

F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Service, Inc.
420 S. Colfax Avenue
Griffith, IN 40319

10. Use EPA ID Number: IND016360265

G. State Facility's ID: IND016360265

H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE FLAMMABLE LIQUID NOS FLAMMABLE LIQUID UN 1993	001	TT	05400	G	F003 F005 ~~D001~~
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: PO#045047

K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information:

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Mark Wallace — Signature: Mark Wallace — Date: Month 12 Day 07 Year 89

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JOSEPH L. KOOINGA — Signature: Joseph L. Kooinga — Date: Month 12 Day 07 Year 89

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: — Signature: — Date: Month Day Year

19. Discrepancy Indication Space:

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: F DUNFEE — Signature: F Dunfee — Date: Month 12 Day 07 Year 89

GENERATOR / TRANSPORTER / FACILITY

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0391584

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY

4000-211 DCT SD
1400-210 DCT SD 12/7/89

0016477

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE *(Form designed for use on elite (12-pitch) typewriter.)* *Form Approved. OMB No. 2050-0039. Expires 9-30-91*

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: MID080361454 — Manifest Document No.: 90001
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
WYCKOFF CHEMICAL CO., INC.
1421 Kalamazoo Street
South Haven, MI 49090 (616) 637-8474

4. Generator's Phone

A. State Manifest Document Number: INA 0391585
B. State Generator's ID:

5. Transporter 1 Company Name: Mr. Frank, Inc.
6. Use EPA ID Number: ILD984775049
C. State Transporter's ID: 0079
D. Transporter's Phone: 800-426-7549

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Service, Inc.
420 S. Colfax Avenue
Griffith, IN 40319

10. Use EPA ID Number: IND016360265
G. State Facility's ID: IND016360265
H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE FLAMMABLE LIQUID NOS FLAMMABLE LIQUID UN 1993		TT	4	G	F003 F005 D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: PO#045137

K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Mark Wallace — Signature: Mark Wallace — Date: Month 01 Day 04 Year 90

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: E T Trevican — Signature: E J Trevican — Date: Month 01 Day 04 Year 90

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: — Signature: — Date: Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: F DUNFEE — Signature: F Dunfee — Date: Month 01 Day 04 Year 90

GENERATOR — TRANSPORTER — FACILITY

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0391585

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY

2 15 OCT 90 1/4/90

0018107

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE *(Form designed for use on elite (12-pitch) typewriter.)* *Form Approved. OMB No. 2050-0039. Expires 9-30-91*

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: M·I·D·0·8·0·3·6·1·4·5·4
Manifest Document No.: 9·0·0·0·9
2. Page 1 of 1
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
WYCKOFF CHEMICAL COMPANY, INC.
1421 Kalamazoo Street
South Haven, MI 49090

4. Generator's Phone (616) 637-8474

A. State Manifest Document Number: INA 0391586
B. State Generator's ID:

5. Transporter 1 Company Name: Mr. Frank, Inc.
6. Use EPA ID Number: I L D 9 8 4 7 7 5 0 4 9
C. State Transporter's ID: 0079
D. Transporter's Phone: 800-426-7549

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Service, Inc.
420 S. Colfax Avenue
Griffith, IN 40319

10. Use EPA ID Number: I N D 0 1 6 3 6 0 2 6 5
G. State Facility's ID: IND016360268
H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE FLAMMABLE LIQUID NOS FLAMMABLE LIQUID UN 1993		TT		G	F003 F005 D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: PO#045273

K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information:

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Mark Wallace
Signature: Mark Wallace TS
Date: Month 01 Day 30 Year 90

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: E J TREVISAN
Signature: [signature]
Date: Month 01 Day 30 Year 90

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Date: Month Day Year

19. Discrepancy Indication Space:

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: FDUNFEE
Signature: [signature]
Date: Month 01 Day 30 Year 90

GENERATOR

TRANSPORTER

FACILITY

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0391586

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

205 TCTSD 1/30

COPY 5. TSD COPY

0018108

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE *(Form designed for use on elite (12-pitch) typewriter.)* *Form Approved. OMB No. 2050-0039. Expires 9-30-91*

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: M·I·D·0·8·0·3·6·1·4·5·4
Manifest Document No.: 9·0·0·1·4
2. Page 1 of 1
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
WYCKOFF CHEMICAL COMPANY, INC.
1421 Kalamazoo Street
South Haven, MI 49090
4. Generator's Phone ( ) (616) 637-8474

A. State Manifest Document Number: INA 0391587
B. State Generator's ID:

5. Transporter 1 Company Name: Mr. Frank, Inc.
6. Use EPA ID Number: I·L·D·9·8·4·7·7·5·0·4·9
C. State Transporter's ID: 0079
D. Transporter's Phone: 800-426-7549

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE, INC.
420 S. Colfax Avenue
Griffith, IN 40319
10. Use EPA ID Number: IND016360265
G. State Facility's ID: IND016360265
H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE FLAMMABLE LIQUID NOS FLAMMABLE LIQUID UN 1993	001	TT	05200	G	F003 F005 D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: PO 45311
K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information:

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Mark Wallace
Signature: Mark Wallace TS
Date: Month 02 Day 08 Year 90

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: CARL T JUNGER
Signature: Carl T. Junger
Date: Month 02 Day 08 Year 90

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Date: Month Day Year

19. Discrepancy Indication Space:

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19
Printed/Typed Name: F DUNFEE
Signature: F Dunfee
Date: Month 02 Day 08 Year 90

GENERATOR / TRANSPORTER / FACILITY

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0391587

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY

212 TSD 2/8/90

0018109

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE *(Form designed for use on elite (12-pitch) typewriter.)* *Form Approved. OMB No. 2050-0039. Expires 9-30-91*

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: MID080361454 — Manifest Document No.: 90015
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
WYCKOFF CHEMICAL COMPANY, INC.
1421 Kalamazoo St
South Haven, MI 49090

4. Generator's Phone (616) 637-8474

A. State Manifest Document Number: INA 0391588
B. State Generator's ID:

5. Transporter 1 Company Name: Mr. Frank, Inc.
6. Use EPA IO Number: ILD984775049
C. State Transporter's ID: 0079
D. Transporter's Phone: 800-426-7549

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Service, Inc.
420 S. Colfax Avenue
Griffith, IN 40319

10. Use EPA ID Number: IND016360265
G. State Facility's ID: IND016360265
H. Facility's Phone: 219-924-4370

11. US DOT Description *(Including Proper Shipping Name, Hazard Class, and ID Number)*	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE FLAMMABLE LIQUID NOS FLAMMABLE LIQUID UN 1993		TT		G	F003 F005 D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: PO#045350

K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information:

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Mark Wallace — Signature: Mark Wallace TS — Date: Month 02 Day 13 Year 90

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: E J TREVISAN — Signature: E J Trevisan — Date: Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: — Signature: — Date: Month Day Year

19. Discrepancy Indication Space:

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: FDUNFEE — Signature: FDunfee — Date: Month 02 Day 13 Year 90

GENERATOR — TRANSPORTER — FACILITY

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0391588

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

2 12 RTSO 2/13

COPY 5. TSD COPY

0018110

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE *(Form designed for use on elite (12-pitch) typewriter.)* *Form Approved. OMB No. 2050-0039. Expires 9-30-91*

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: M-I-D-0-8-0-3-6-1-4-5-4
Manifest Document No.: 9-0-0-2-1
2. Page 1 of 1
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
WYCKOFF CHEMICAL COMPANY, INC.
1421 Kalamazoo Street
South Haven, MI 49090
4. Generator's Phone ( ) (616) 637-8474

A. State Manifest Document Number: INA 0391590
B. State Generator's ID:

5. Transporter 1 Company Name: Mr. Frank, Inc.
6. Use EPA ID Number: I-L-D-9-8-4-7-7-5-0-4-9
C. State Transporter's ID: 0079
D. Transporter's Phone: 800-426-7549

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE, INC.
420 S Colfax Avenue
Griffith, IN 40319
10. Use EPA ID Number: I-N-D-0-1-6-3-6-0-2-6-5
G. State Facility's ID: IND016360265
H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE FLAMMABLE LIQUID NOS FLAMMABLE LIQUID UN 1993		TT	5300	G	F003 F005 D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: PO # 045452
K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information:

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: MARK WALLACE
Signature: Mark Wallace
Date: Month 03 Day 06 Year 90

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: [illegible]
Signature: [illegible]
Date: Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Date: Month Day Year

19. Discrepancy Indication Space:

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted item 19.
Printed/Typed Name: FDUNFEE
Signature: FDunfee
Date: Month 03 Day 06 Year 90

GENERATOR / TRANSPORTER / FACILITY

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0391590

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

202 [illegible] 2/6

COPY 5. TSD COPY

0018111

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: M I D 0 8 0 3 6 1 4 5 4
Manifest Document No.: 9 0 0 1 1 8
2. Page 1 of 1
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
WYCKOFF CHEMICAL CO, INC.
1421 Kalamazoo Street
South Haven, MI 49090
4. Generator's Phone ( ) (616) 637-8474

A. State Manifest Document Number: INA 0391589
B. State Generator's ID:

5. Transporter 1 Company Name: Mr. Frank, Inc.
6. Use EPA ID Number: I L D 9 8 4 7 7 5 0 4 9
C. State Transporter's ID: 0879
D. Transporter's Phone: 800-426-7549

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Service, Inc.
420 S. Colfax Avenue
Griffith, IN 40319
10. Use EPA ID Number: I N D 0 1 6 3 6 0 2 6 5
G. State Facility's ID: IND016360265
H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE FLAMMABLE LIQUID NOS FLAMMABLE LIQUID UN 1993	001	T T	0530.0	G	F003 F005 D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: PO# 045417
K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR — Printed/Typed Name: MARK WALLACE — Signature: Mark Wallace TS — Date: Month 02 Day 27 Year 90

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials — Printed/Typed Name: Bonnie D Spoon — Signature: [signature] — Date: Month 02 Day 27 Year 90
18. Transporter 2 Acknowledgement of Receipt of Materials — Printed/Typed Name: — Signature: — Date: Month Day Year

FACILITY
19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. — Printed/Typed Name: F DUNFEE — Signature: F Dunfee — Month 02 Day 27 Year 90

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0391589

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY

21 DTCTSD 2K7

0018112

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: I.N.D.0.9.0.3.6.1.4.5.4 | Manifest Document No.: 9.0.0.2.8 | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
WYCKOFF CHEMICAL CO., INC.
1421 Kalamazoo St
South Haven, MI 49090
4. Generator's Phone ( ) (616) 637-8474

A. State Manifest Document Number: INA 0391591
B. State Generator's ID:

5. Transporter 1 Company Name: Mr. Frank, Inc.
6. Use EPA ID Number: I.L.D.9.8.4.7.7.5.0.4.9
C. State Transporter's ID: 0079
D. Transporter's Phone: 800-426-7549

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE, INC.
420 S. Colfax Avenue
Griffith, IN 40319
10. Use EPA ID Number: I.N.D.0.1.6.3.6.0.2.6.5
G. State Facility's ID: IND016360265
H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE FLAMMABLE LIQUID NOS FLAMMABLE LIQUID UN 1993		TT		G	F003 F005 D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR — Printed/Typed Name: Mark Wallace | Signature | Date Month Day Year

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials — Printed/Typed Name | Signature | Date Month Day Year
18. Transporter 2 Acknowledgement of Receipt of Materials — Printed/Typed Name | Signature | Date Month Day Year

FACILITY
19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in 19
Printed/Typed Name: FDUNFEE | Signature | Date Month Day Year: 032790

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0391591

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY

0018113

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: M I. D. 0. 8. 0. 3. 6. 1. 4. 5. 4 | Manifest Document No.: 9 0 0 3 1 | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
WYCKOFF CHEMICAL COMPANY, INC.
1421 Kalamazoo Street
South Haven, MI 49090
4. Generator's Phone ( ) (616) 637-8474

A. State Manifest Document Number: INA 0391592
B. State Generator's ID:

5. Transporter 1 Company Name: Mr. Frank, Inc.
6. Use EPA ID Number: I.L.D.9.8.4.7.7.5.0.4.9
C. State Transporter's ID: 0079
D. Transporter's Phone: 800-426-7549

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE, INC.
420 S. Colfax Avenue
Griffith, IN 40319
10. Use EPA ID Number: I N D 0 1 6 3 6 0 2 6 5
G. State Facility's ID: IND016360265
H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE FLAMMABLE LIQUID NOS FLAMMABLE LIQUID UN 1993	001	TT	5500	G	P003 P005 D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: PO#045640
K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR — Printed/Typed Name: Mark Wallace | Signature: Mark Wallace | Date: Month 04 Day 12 Year 90

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials — Printed/Typed Name: [illegible] | Signature: [signature] | Date: Month Day Year
18. Transporter 2 Acknowledgement of Receipt of Materials — Printed/Typed Name: | Signature: | Date: Month Day Year

FACILITY
19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in 19.
Printed/Typed Name: FDUNFEE | Signature: FDunfee | Date: Month 04 Day 12 Year 90

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

202T750 4/12

COPY 5. TSD COPY

0018114

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0391592

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE *(Form designed for use on elite (12-pitch) typewriter.)* *Form Approved. OMB No 2050-0039. Expires 9-30-91*

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: M.I.D.0.8.0.3.6.1.4.5.4
Manifest Document No.: 90036
2. Page 1 of 1
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
WYCKOFF CHEMICAL COMPANY, INC.
1421 Kalamazoo Street, South Haven, MI 49090
4. Generator's Phone (616) 637-8474

A. State Manifest Document Number: INA 0391593
B. State Generator's ID:

5. Transporter 1 Company Name: MR. FRANK, INC.
6. Use EPA ID Number: ILD984775049
C. State Transporter's ID: 0079
D. Transporter's Phone: 800-426-7549

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE, INC.
420 S. Colfax Avenue
Griffith, IN 40319
10. Use EPA ID Number: IND016360265
G. State Facility's ID: IND016360265
H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE FLAMMABLE LIQUID NOS FLAMMABLE LIQUID UN 1993 (Butyl Alcohol, Methanol, Toluene)	001 ~~XXX~~	TT	0.5 2 0.0	G	F003 F005 D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
PO #045710

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: MARK WALLACE
Signature: Mark Wallace
Date: Month 04 Day 26 Year 90

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Larry Erickson
Signature: Larry Erickson
Date: Month 04 Day 26 Year 90

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Date: Month Day Year

19. Discrepancy Indication Space
205 TCT 50 4/26

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: FDUNFEE
Signature: F Dunfee
Month 04 Day 26 Year 90

GENERATOR / TRANSPORTER / FACILITY

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0391593

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY

0018115

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039 Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.
M I D 0 8 0 3 6 1 4 5 4	9 0 0 3 9		

GENERATOR

3. Generator's Name and Mailing Address
WYCKOFF CHEMICAL COMPANY, INC.
1421 Kalamazoo Street
South Haven, MI 49090
4. Generator's Phone ( ) (616) 637-8474

A. State Manifest Document Number: INA 0391594
B. State Generator's ID:

5. Transporter 1 Company Name: Mr. Frank, Inc.
6. Use EPA ID Number: I L D 9 8 4 7 7 5 0 4 9
C. State Transporter's ID: 0079
D. Transporter's Phone: 800-426-7549

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Service, Inc.
420 S. Colfax Avenue
Griffith, IN 40319
10. Use EPA ID Number: I N D 0 1 6 3 6 0 2 6 5
G. State Facility's ID: IND016360265
H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE FLAMMABLE LIQUID NOS (TOLUENE, XYLENE, ETHANOL, METHANOL) FLAMMABLE LIQUID UN 1993	001	TT	005350	G	F003 F005 F001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: PO #045818

K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information:

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name	Signature	Date Month	Day	Year
MARK WALLACE		05	09	90

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year
CARL E PROSSER		05	09	90

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year

FACILITY

19. Discrepancy Indication Space:

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name	Signature	Date Month	Day	Year
FDUNFEE	FDunfee	05	09	90

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0391594

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY

202550

0018116

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: MID080361454 | Manifest Document No.: 90039 | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
WYCKOFF CHEMICAL COMPANY, INC.
1421 Kalamazoo Street
South Haven, MI 49090 (616) 637-8474

A. State Manifest Document Number: INA 0391597
B. State Generator's ID:
C. State Transporter's ID: 0079
D. Transporter's Phone: 800-426-7549

4. Generator's Phone:
5. Transporter 1 Company Name: Mr. Frank, Inc.
6. Use EPA ID Number: [redacted]
7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Service, Inc.
420 S. Colfax Ave.
Griffith, IN 40319
10. Use EPA ID Number: IND011536026 5
G. State Facility's ID: IND016360265
H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE FLAMMABLE LIQUID NOS (TOLUENE, XYLENE, ETHANOL, METHANOL) FLAMMABLE LIQUID UN 1993	001	TT	054	006	F003 F005 F001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: PO #045865
K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR — Printed/Typed Name: Mark Wallace | Signature: Mark Wallace TS | Date: Month 05 Day 18 Year 90

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials — Printed/Typed Name: JOSEPH L. KOOINGA | Signature: Joseph L Kooinga | Date: Month 05 Day 18 Year 90
18. Transporter 2 Acknowledgement of Receipt of Materials — Printed/Typed Name: | Signature: | Date: Month Day Year

FACILITY
19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19 — Printed/Typed Name: [illegible] | Signature: [illegible] | Date: Month 05 Day 18 Year 90

EPA Form 8700-22 [illegible]
Previous editions are obsolete.
State Form 11865 (R/4-88)

2125CT505/18

COPY 5. TSD COPY

0018117

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0391597

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE *(Form designed for use on elite (12-pitch) typewriter.)* *Form Approved. DMB No. 2050-0039 Expires 9-30-91*

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: M I D 0 8 0 3 6 1 4 5 4
Manifest Document No.: 9 0 0 4 7
2. Page 1 of 1
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
WYCKOFF CHEMICAL COMPANY, INC.
1421 Kalamazoo Street
South Haven, MI 49090 (616) 637-8474
4. Generator's Phone ( )

A. State Manifest Document Number: INA 0391595
B. State Generator's ID:

5. Transporter 1 Company Name: Mr. Frank, Inc.
6. Use EPA ID Number: I L 0 9 8 4 7 7 5 0 4 9
C. State Transporter's ID: 0079
D. Transporter's Phone: 800-426-7549

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Service, Inc.
420 S. Colfax Avenue
Griffith, IN 40319
10. Use EPA ID Number: I N D 0 1 6 3 6 0 2 6 5
G. State Facility's ID: IND016360265
H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE FLAMMABLE LIQUID NOS (TOLUENE, XYLENE, ETHANOL, METHANOL) FLAMMABLE LIQUID UN 1993	0 0 1	T T	0 5 4 0 0	G	F003 F005 F001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
PO #046058

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Mark Wallace
Signature: [signature]
Date: Month 0 6 Day 2 2 Year 9 0

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: CARL E. MILBURN
Signature: [signature]
Date: Month 0 6 Day 2 2 Year 9 0

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Date: Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: F DUNFEE
Signature: F Dunfee
Date: Month 0 6 Day 2 2 Year 9 0

GENERATOR / TRANSPORTER / FACILITY

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0391595

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

212 TC TSD 6/22/90

COPY 5. TSD COPY

0018118

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. M I D 0 8 0 3 6 1 4 5 4 | Manifest Document No. 9 0 0 0 6 | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
WYCKOFF CHEMICAL COMPANY, INC.
1421 Kalamazoo Street
South Haven, MI 49090 (616) 637-8474
4. Generator's Phone ( )

A. State Manifest Document Number: INA 0431588
B. State Generator's ID:

5. Transporter 1 Company Name: Mr. Frankm, INC.
6. Use EPA ID Number: I L D 9 8 4 7 7 5 0 4 9
C. State Transporter's ID: 0079
D. Transporter's Phone: 800-426-7549

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE, INC.
420 S. Colfax Avenue
Griffith, IN 40319
10. Use EPA ID Number: I N D 0 1 6 3 6 0 2 6 5
G. State Facility's ID: IND016360265
H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE FLAMMABLE LIQUID NOS FLAMMABLE LIQUID UN 1993 (TOLUENE, ETHYLENE, ACETONE)	001	TT	05400	G	F003 F005 D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR — Printed/Typed Name: Mark Wallace | Signature: Mark Wallace / LS | Date: Month 0 9 Day 0 4 Year 9 0

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: CARL T JUNGER | Signature: Carl T Junger | Date: Month 0 9 Day 0 4 Year 9 0
18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: | Signature: | Date: Month Day Year

FACILITY
19. Discrepancy Indication Space
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: FDUNFEE | Signature: F Dunfee | Date: Month 0 9 Day 0 4 Year 9 0

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-89)

COPY 5. TSD COPY

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0431588

0018119

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: M I D 0 8 0 3 6 1 4 5 4 | Manifest Document No.: 9 0 0 5 7
2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
WYCKOFF CHEMICAL COMPANY, INC.
1421 Kalamazoo Street
South Haven, MI 49090
4. Generator's Phone ( ) (616) 637-8474

A. State Manifest Document Number: INA 0431587
B. State Generator's ID:

5. Transporter 1 Company Name: Mr. Frank, Inc.
6. Use EPA ID Number: I L D 9 8 4 7 7 5 0 4 9
C. State Transporter's ID: 0079
D. Transporter's Phone: 800-426-7549

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE, INC.
420 S. Colfax Avenue
Griffith, IN 40319
10. Use EPA ID Number: IND016360265
G. State Facility's ID: IND016360265
H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I Waste No
a. WASTE FLAMMABLE LIQUID NOS FLAMMABLE LIQUID UN 1993 (METHANOL BUTYL ALCOHOL)	001	TT	0.5280	G	F003 F005 D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: PO #046288
K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR — Printed/Typed Name: Mark Wallace | Signature: Mark Wallace | Date: Month 08 Day 17 Year 90

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials — Printed/Typed Name: Peter CRISAN | Signature: Peter Crisan | Date: Month 08 Day 17 Year 90
18. Transporter 2 Acknowledgement of Receipt of Materials — Printed/Typed Name: | Signature: | Date: Month . Day . Year .

FACILITY
19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: F DUNFEE | Signature: F Dunfee | Date: Month 08 Day 14 Year 90

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-89)

COPY 5. TSD COPY

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0431587

0018120

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: MID080361454 — Manifest Document No.: 90055
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address:
WICKOFF CHEMICAL COMPANY, INC.
1421 Kalamazoo Street
South Haven, MI 49090 (616) 637-8474

4. Generator's Phone ( )

A. State Manifest Document Number: INA 0431586
B. State Generator's ID:

5. Transporter 1 Company Name: Mr. Frank, Inc.
6. Use EPA ID Number: ILD984775049
C. State Transporter's ID: 00 7 9
D. Transporter's Phone: 800-426-7549

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address:
AMERICAN CHEMICAL SERVICES, INC.
420 S. Colfax Avenue
Griffith, IN 40319
10. Use EPA ID Number: IND016360265
G. State Facility's ID: IND016360265
H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE FLAMMABLE LIQUID NOS FLAMMABLE LIQUID UN 1993 (Xylene, Toluene, IPA)	6.61	TT	0541.5	G	F003 F005 D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above:
K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information:

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: MARK WALLACE — Signature: Mark Wallace / KS — Date: Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Walter C. Klaubo — Signature: Walter C. Klaubo — Date: Month Day Year: 08 03 90

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: — Signature: — Date: Month Day Year

19. Discrepancy Indication Space:

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 1
Printed/Typed Name: FDUNFEE — Signature: FDunfee — Date: 08 03 90

GENERATOR / TRANSPORTER / FACILITY

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0431586

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-89)

COPY 5. TSD COPY

0018121

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.
M I D 0 8 0 3 6 1 4 5 4	0 0 5 2		

3. Generator's Name and Mailing Address
WICKOFF CHEMICAL COMPANY, INC.
1421 Kalamazoo Street
South Haven, MI 49090
4. Generator's Phone ( ) (616) 637-8474

A. State Manifest Document Number: INA 0431585
B. State Generator's ID:

5. Transporter 1 Company Name: Mr. Frank, Inc.
6. Use EPA ID Number: I.L.D.9.8.4.7.7.5.0.4.9
C. State Transporter's ID: 0079
D. Transporter's Phone: 800-426-7549

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICES INC.
420 S. Colfax Avenue
Griffith, IN 40319
10. Use EPA ID Number: I N D 0 1 6 3 6 0 2 6 5
G. State Facility's ID: IND016360265
H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE FLAMMABLE LIQUID NOS FLAMMABLE LIQUID UN 1993 (Xylene, Toluene, IPA)		TT		G	F003 F005 D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: PO #046118
K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR
Printed/Typed Name: Mark Wallace
Signature: Mark Wallace
Date: Month 07 Day 05 Year 90

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: E J Thomas
Signature:
Date: Month Day Year
18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Date: Month Day Year

FACILITY
19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19
Printed/Typed Name: F DUNFEE
Signature: F Dunfee
Date: Month 07 Day 05 Year 90

EJECTED 7/5

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-89)

COPY 5. TSD COPY

0018122

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0431585

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE *(Form designed for use on elite (12-pitch) typewriter.)* *Form Approved. OMB No. 2050-0039. Expires 9-30-91*

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.
M I D 0 8 0 3 6 1 4 5 4	9 0 0 3 1		

GENERATOR

3. Generator's Name and Mailing Address
WYCKOFF CHEMICAL COMPANY INC.
1421 Kalamazoo Street
South Haven, MI 49090

4. Generator's Phone (616) 637-8474

A. State Manifest Document Number: INA 0391596

B. State Generator's ID: XXXXXX

5. Transporter 1 Company Name: Mr. Frank, Inc.

6. Use EPA ID Number: I L D 9 8 4 7 7 5 0 4 9

C. State Transporter's ID: 0079

D. Transporter's Phone: 800-426-7549

7. Transporter 2 Company Name

8. Use EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE INC.
420 S. Colfax Avenue
Griffith, IN 40319

10. Use EPA ID Number: I N D 0 1 6 3 6 0 2 6 5

G. State Facility's ID: IND016360265

H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE FLAMMABLE LIQUID NOS Flammable Liquid UN 1993	0 0 1	TT	0513.6	G	F003 F005 D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
PO 046083

K. Handling Codes for Wastes Listed Above
G = gallons

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name	Signature	Date Month	Day	Year
Mark Wallace	Mark Wallace	06	29	90

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year
PETER C. RADEN	Peter C. Raden	06	29	90

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name	Signature	Date Month	Day	Year
P DUNTEE	P Duntee	06	29	90

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0391596

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY 312F50 6/29

0018123