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

US EPA RECORDS CENTER REGION 5
460608

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.

3. Generator's Name and Mailing Address
Ventline Div. , Philips Ind., Inc.
P. O. Box 629
902 S. Division St.
Bristol, IN 46507

A. State Manifest Document Number: INA 0176018

4. Generator's Phone (AC 219, 848-4491)

5. Transporter 1 Company Name: Mr. Frank, Inc. | US EPA ID Number: I N D 0 6 9 5 0 6 1 6 0

B. State Generator's ID

C. State Transporter's ID

D. Transporter's Phone (312) 596-3377

6. 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 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 | 001 | 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.

GENERATOR

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| Jerry Sousley | Jerry Sousley | | | |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| Dave Vass | Dave Vass | 09 | 22 | 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 | Harold F Schmidt | 09 | 23 | 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 0176018

EPA Form 8700-22 (Rev. 9-86) Previous editions are obsolete.
State Form 11865 4-123R-T-63 9/24/87 N

DISTRIBUTION:
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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. |
|---|---|---|---|
| IND 001757723 | 00004 | 8 | |

3. Generator's Name and Mailing Address: PHILIPS IND. INC., VERITON DIV. P.O. BOX 629, 702 S. DIVISION, BRISTOL, IN

A. State Manifest Document Number: INA 0176022

4. Generator's Phone (219) 745-4991

B. State Generator's ID:

5. Transporter 1 Company Name: MR. FRANK, INC.

6. US EPA ID Number: IND 006950360

C. State Transporter's ID: 0019

D. Transporter's Phone: 312-660-0700

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 S. COLFAX AVE., GRIFFITH, IN 46319

10. US EPA ID Number: IND 016360265

G. State Facility's ID: 018 0002

H. Facility's Phone: 219-932-4478

| 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. WASTE PAINT RELATED MATERIAL, FLAMABLE LIQUID, NA 1263 | 002 | DM | 00550 | G | D001 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above: PLACED 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.

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| Printed/Typed Name | Signature | Date Month | Day | Year |
|---|---|---|---|---|
| JERRY SOUSLEY | | | | |

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 0176022

EPA Form 8700-22 (Rev. 9-85) Previous editions are obsolete.
State Form 11865

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INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
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P.O. Box 7035
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# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: IN D 0 01 7 57 7 2 3 0
Manifest Document No.: 0 00 0 8
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
Philips Industries, Ventline Div.
P. O. Box 629, 802 S. Division St.
Bristol, IN 46507
4. Generator's Phone (219) 848-4491

A. State Manifest Document Number: INA 0176021
B. State Generator's ID
C. State Transporter's ID: 0079
D. Transporter's Phone: 312-720-0100
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID: 918039 0002
H. Facility's Phone: 219-924-4370

5. Transporter 1 Company Name: Mr. Frank, Inc.
6. Use EPA ID Number: IL 0069506160
7. Transporter 2 Company Name
8. Use EPA ID Number: ~~IL D 0 6 9 5 06160~~

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 3 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. | Waste No. |
|---|---|---|---|---|---|
| a. Waste paint related material flammable liquid, NA 1263 | 0 0 2 | DM | 00 110 | 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: Gerry Sousley
Signature:
Date: Month 08 Day 15 Year 88

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Dave Voss
Signature: Dave Voss
Date: Month 08 Day 15 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: Alvin Whitaker
Signature: Alvin Whitaker
Month 8 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 0176021

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

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# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. IND001757723 | Manifest Document No. 00007

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
Philips Industries, Ventline Division
P. Bo Box 629, 902 S. Division
Bristol, IN 45607
(219) 293-0077

4. Generator's Phone

A. State Manifest Document Number: INA 0176020

B. State Generator's ID

5. Transporter 1 Company Name: Mr. Frank, Inc.

6. Use EPA ID Number: ILD069506160

C. State Transporter's ID: 0079

D. Transporter's Phone: (312) 596-3377

7. Transporter 2 Company Name

8. Use EPA ID Number: IND018560

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: IND016360265

G. State Facility's ID: 9180890001

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 Flammable Liquid, NA 1263 | 002 | DM | 00110 | 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: Jerry Sousley | Signature | Month | Day | Year

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JACK McCLEVERTY | Signature | Month 05 | Day 18 | 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: JAMES MURPHY | Signature | Month 05 | 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 0176020

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-126FCT63 5/20M
-204FT50 5/23M

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

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# UNIFORM HAZARDOUS WASTE MANIFEST

| | | | |
|---|---|---|---|
| 1. Generator's US EPA ID No. IN A 0 0 1 7 5 7 7 2 3 | Manifest Document No. 0 0 0 0 6 | 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. |

**GENERATOR**

3. Generator's Name and Mailing Address
Philips Ind., Ventline Division
P. O. Box 629
902 S. Division St.
Bristol, IN 46507

A. State Manifest Document Number: INA 0176019

4. Generator's Phone: AC219, 848-4491

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 2 1 6

C. State Transporter's ID: 0077

D. Transporter's Phone: (312) 586-3377

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 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) 924-5370

| 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, Flammable Liquid, NA 1263 | 0 3 | DM | 0 0 1 6 5 | 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

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| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| Jerry Sousley | | | | |

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| JACK McCLEVERTY | | 02 | 16 | 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 |
|---|---|---|---|---|
| HARROLD F. Schmidt | | 02 | 19 | 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 0176019

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PAGE 6 (canary) GENERATOR COPY
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PAGE 8 (white) TRANSPORTER 2 COPY

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
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P.O. Box 7035
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# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: IND001757723 — Manifest Document No.: 00001
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: Philips Ind, Ventrone Div. 902 So Division St, Bristol, IN 46507
4. Generator's Phone: 219 848-4491

A. State Manifest Document Number: INA 0315999
B. State Generator's ID:

5. Transporter 1 Company Name: MR Frank Inc
6. Use EPA ID Number: ILD069506160
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. Wolfax Ave Griffith, Ind
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 Paint Related Material Flammable Liquid, NA1263 | 001 | DM | 00055 | 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:

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Printed/Typed Name: [illegible] — Signature: [illegible] — Date: Month 05 Day 18 Year 89

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: John Van Vlymen — Signature: John Van Vlymen — Date: Month 05 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 Item 19.
Printed/Typed Name: Whitaker A — Signature: Al Whitaker — Date: Month 5 Day 19 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 0315999

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Previous editions are obsolete.
State Form 11865 (R/4-88)

123 TC T63 5/24

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0016860

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
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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·0·0·1·7·5·7·7·2·3
Manifest Document No.: 0·0·0·1·0
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
Philips Ind., Ventline Division
902 south Division st., P.O. Box 629
Bristol, IN 46507
4. Generator's Phone ( 219 ) 848-4491

A. State Manifest Document Number: INA 0363184
B. State Generator's ID:

5. Transporter 1 Company Name: Mr. Frank, Inc.
6. Use EPA ID Number: I.L.D. ~~0·0·9·5·0·6·1·6·0~~ 987715049
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 Service
420 South Colfax Ave.
Griffith, IN 46319
10. Use EPA ID Number: IN·D·0·1·6·3·6·0·2·6·5
G. State Facility's ID: 918089 0002
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 flamable liquids. NA 1263 | 0·0·5 | D·M | 2·7·5 | 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:

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Printed/Typed Name: Jerry Sousley
Signature: [signature]
Date: Month 9 Day 13 Year 87

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JACK McCLEVERTY
Signature: [signature]
Date: Month 09 Day 13 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: [illegible]
Signature: [signature]
Date: Month 9 Day 13 Year 87

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.

INA0363184

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

2 D-ITCT SD 9/20

COPY 5. TSD COPY

0016861

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 3 | 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·9·8·4·8·7·4·0·0·8 | 0·0·0·1·1 | | |

3. Generator's Name and Mailing Address
Philips Ind., Ventline Division
902 So. Division St, P. O. Box 629
Bristol, IN 46507
4. Generator's Phone ( 219 ) 848-4491

A. State Manifest Document Number: INA 0363185
B. State Generator's ID:

| 5. Transporter 1 Company Name | 6. Use EPA ID Number | C. State Transporter's ID: 0079 |
|---|---|---|
| Mr. Frank, Inc. | I·L·D·9·8·4·7·7·5·0·4·9 | 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 | 10. Use EPA ID Number | G. State Facility's ID |
|---|---|---|
| American Chemical Service<br>420 So. Colfax Ave.<br>Griffith, IN 46319 | I·N·D·0·1·6·3·6·0·2·6·5 | 9180890002<br>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<br>Flammable liquid<br>NA 1263 | 0.0.2 | D.M | 0.0.1.1.0 | G | F005 |
| b. (INTERNAL STAGE RETURN TO LINE) | | | | | |
| 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 |
|---|---|---|---|---|
| Jerry Sousley | | 07 | | |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date Month | Day | Year |
|---|---|---|---|---|
| CHARLT JUNKER | | 07 | 12 | 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 | Month | Day | Year |
|---|---|---|---|---|
| STEVE KUINICK | | 07 | 13 | 90 |

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.

INA0363185

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY

12 28763 7/17

0018307

PRINTED BY: HAZARDOUS MATERIALS PUBLISHING CO., KUTZTOWN, PA. 19530, 215–683-6721

| REPORT ANY UNRECOVERED DISCHARGE EQUAL TO OR IN EXCESS OF EACH HAZARDOUS WASTE ASSIGNED "RQ" VALUE TO NATIONAL RESPONSE CENTER 800–424-8802 | REPORTABLE QUANTITY VALUE 1 = 5000 LBS. 2 = 1000 LBS. 3 = 100 LBS. 4 = 10 LBS. 5 = 1 LB. | CHEM TREC = 800–424-9300; EPA HOTLINE = 800–424-9346; CDC POISON CENTER = 404–635-5313; DOT = 202–426-1830 | PLACARDS PROVIDED |
|---|---|---|---|

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 and Mailing Address: PHILIPS INDUSTRIES, 222 COLLINS, RD. ELKHART, IN. 46516

A. State Manifest Document Number

B. State Generator's ID

4. Generator's Phone (219) 295-1900

5. Transporter 1 Company Name: STRAND TRUCKING CO

6. US EPA ID Number: ILD000646810

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: 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. |
|---|---|---|---|---|---|
| GENERATOR a. FLAMMABLE LIQUID N.O.S IGNITABLE UN1993 | 33 | DM | | 1 | D001 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

1815

J. Additional Descriptions for Materials 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.

| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| Bill Spears | Bill Spears | |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| THOMAS P. STRAND | Thomas P. Strand | 7 24 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) |
|---|---|---|
| GR MURPHY | GR Murphy | 7 24 85 |

EPA Form 8700-22 (3-84)

#2 - TREATMENT, STORAGE, DISPOSAL FACILITY COPY 204RT-50

038146

# STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0394555

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 998415

PHILLIPS & MARTIN CO (Company Name) | 138 FACTORY RAOD (Address)

PHILLIPS & MARTIN CO. (City) | ADDISON, IL. (State) | 60101 (Zip)

Generator Number 0316000553

WASTE HAULER(S)

SAME (Hauler Name) | (Hauler Address) | S.W.H. Registration Number 0594001

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number 04155 0559

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERV (Facility Name) | PO BOX 190 (Address) | 918089021 (Site Number)

GRIFFITH (City) | IND (State) | 46319 (Zip) | FED. IND 01636025

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: | HAZARD CLASS: | WEIGHT FOR D.O.T. USE |
|---|---|---|
| 1x 55 | 03 | 450 LBS / TONS (circle one) |

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 1x 55

(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: 9/14/81 (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: 9/14/81

(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:

Bob Mauck (Authorized Signature) DATE: 09/14/81

COMMENTS OR SPECIAL INSTRUCTIONS: UNLOAD AT DOCK 9/14/81.
TO 112K T-63 9/15/81 JPM.

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

000683

**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. ILD041550559 — 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 PHILLIPS & MARTIN
226 E. LAKE ST
ADDISON, IL 60101

4. Generator's Phone ( 312 ) 834-9755

A. Illinois Manifest Document Number IL 1240996

B. Illinois Generator's ID 0311600053

5. Transporter 1 Company Name: PHILLIPS & MARTIN — 6. US EPA ID Number: ILD041550559

C. Illinois Tranporter's ID 0594

D. (312) 834-9755 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 AVE
GRIFFITH IN 46319 — 10. US EPA ID Number: ILD016360265

G. Illinois Facility's ID 9180890002

H. Facility's Phone 219 924 4370

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 | K. Waste No. |
|---|---|---|---|---|---|---|---|
| a. | X | FLAMMABLE LIQUID N.O.S. IGNITABLE UN-1993 | 1 | DM | 825 GAL | 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 governmental regulations, and Illinois regulations.

Printed/Typed Name: [illegible] — Signature: [signature] — Date: Month 4 Day 1 Year 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 — 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: ALVIN WHITAKER — Signature: [signature] — Date: Month 4 Day 7 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

204 E TSD

012021

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 4 1 5 5 0 5 | 5 [illegible] 9 | | |

3. Generator's Name and Mailing Address
PHILLIPS & MARTIN CO.
138 FACTORY ROAD
ADDISON, IL 60101 312-834-9755

A. State Manifest Document Number: INA 0247894
B. State Generator's ID: 0430055035
C. State Transporter's ID:
D. Transporter's Phone: 312-596-1377
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID:
H. Facility's Phone: 219-924-1378

5. Transporter 1 Company Name: MR. FRANK, INC.
6. US EPA ID Number: I L D 0 0 6 9 3 0 6 1 6 9
7. Transporter 2 Company Name:
8. US EPA ID Number:

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
420 COLFAX AVENUE
GRIFFITH, IN 46319
10. US EPA ID Number: I L 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. | Waste No. |
|---|---|---|---|---|---|
| a. WASTE FLAMMABLE LIQUID NOS UN 1993 | 1 | TT | 2500 | G | F003 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above
1 EQUALS 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 | Signature | Date Month | Day | Year |
|---|---|---|---|---|
| WILLIAM KULIKOWSKI | | 9 | 22 | 88 |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date Month | Day | Year |
|---|---|---|---|---|
| RANDY KARLOVSKY | | 09 | 22 | 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 | Month | Day | Year |
|---|---|---|---|---|
| F DUNFEE | F Dunfee | 09 | 22 | 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 0247894

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. ILD041550559 | 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
Phillips & Martin
138 Factory Road
Addison, IL 60101 (708) 834-9755

4. Generator's Phone ( )

A. State Manifest Document Number: INA 0379903
B. State Generator's ID: 0430055035

5. Transporter 1 Company Name: Phillips & Martin
6. Use EPA ID Number: ILD041550559
C. State Transporter's ID:
D. Transporter's Phone: 708-834-9755

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID: 0594
F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Service
420 Colfax Avenue
Griffith, Indiana 46319
10. Use EPA ID Number: ILD016360265
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. Flammable Liquid NOS UN 1993 | 003 | DM | 165 | 1 | D-001 |
| 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.

GENERATOR — Printed/Typed Name: William Kulikowski | Signature | Date: Month 1 Day 8 Year 90

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Warren Barbarek | Signature | Date: Month 1 Day 8 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 | Signature | Month Day Year

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 0379903

0018306

TO BE COMPLETED BY WASTE GENERATOR

# STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0199919

WASTE GENERATOR

Authorization Number

Phillips Mfg Co. (Company Name) — 7334 N. Clark (Address) — 05 28 0002 G (Generator Number)

Chicago (City) — Ill (State) — 60626 (Zip) — ILD 005474183

WASTE HAULER(S)

(1) American Chemical Service (Hauler Name) — 420 S. Colfax (Hauler Address) — S.W.H. Registration Number 91808902

(2) Griffith Ind 46319 (Hauler Name) — (Hauler Address) — S.W.H. Registration Number IND 0163602-65

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) — 420 S. Colfax (Address) — 91808902 (Site Number)

Griffith (City) — Ind. (State) — 46319 (Zip) — IND 0163602-65

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Perchlorethylene 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: | HAZARD CLASS: |
|---|---|
| 58 Drums ~~[illegible]~~ Trichlorethylene | U210 |
| 12 " 1-1-1 Trichlorothane | U210 |

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: 4-10-81 — Norman Goldberg (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 70 Drums (47–52) — 1 GALLONS (Circle One) 2 CU. YDS. 55 (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) _____ (Authorized Signature) — 3050 — DATE: 4/10/81

(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: 4/10/81

COMMENTS OR SPECIAL INSTRUCTIONS: Trailer spotted 4/10/81
Unloaded at dock 4/13/81 — Pumped 12 to #1 still 4/29/81 T-63 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

Pump 37 drums to #1 still 5/7/81 T-63 RVN 124B gm
~~[illegible]~~ TRI Pump 21 drs TRI to #3 still T-63 6/16/81 gm

000684

TO BE COMPLETED BY WASTE GENERATOR

**STATE OF ILLINOIS**
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0199921

WASTE GENERATOR

Authorization Number 0528002

Phillips MFG. Co. (Company Name) — 7334 N. Clark (Address)

0528002

Chgo (City) — IL (State) — 60625 (Zip)

ILD 005474143 G (Generator Number)

WASTE HAULER(S)

(1) American Chemical Svc. (Hauler Name) — 420 S. Colfax (Hauler Address) Griffith, Ind 46319 — S.W.H. Registration Number 91808902

IND 0163602-65

(2) Strand Trucking (Hauler Name) — Crestwood, IL (Hauler Address) — S.W.H. Registration Number 0024002

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Svc (Facility Name) — 420 S. Colfax (Address) — 91808902 (Site Number)

Griffith (City) — Ind (State) — 46319 (Zip) — IND 0163602-65

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: 54-Perchlorethylene
16-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: Drums

HAZARD CLASS. U210

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: 4-24-81 — Norman Goldberg (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 003850 (47–52) — 1 GALLONS 2 CU. YDS. (Circle One) 55 (53)

METHOD OF SHIPMENT (Circle One) 70 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) x William J. Sylvester (Authorized Signature) — DATE 04/24/81 (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 E. Burg (Authorized Signature) — DATE 4/24/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: Trailer spotted 4/24/81 - Pump 27 to #3 still per 5/10/81 T-63 gm
Pump 27 to #3 still per 5/19/81 T-63 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 (3 LEFT)

Pump 13 drs TRI to #3 still T-63 6/16/81
Pump 3 drs TRI to #3 still T-63 7/21/81

000685

**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

0462809

Authorization Number 0528002

PHILLIPS MFG CO. (Company Name) | 7334 N. CLARK (Address) | (312) 338-6200 (Phone Number) | ILD 005474143 (Generator Number)

CHGO. (City) | ILL. (State) | 60626 (Zip) | (EPA Number)

WASTE HAULER(S)

American Chemical (Hauler Name) | 420 S. COLFAX (Hauler Address) | S.W.H. Registration Number 91808902

GRIFFITH, IND. 46319 (Phone Number) | (312) 768-3400 | IND 0163602-65 (EPA Number)

STRAND TRK (Hauler Name) | CRESTWOOD ILL. (Hauler Address) | S.W.H. Registration Number 0024002

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical (Facility Name) | 420 S COLFAX (Address) | 91808902 (Site Number)

GRIFFITH (City) | IND (State) | 46319 (Zip) | (312) 768-3400 (Phone Number) | IND 0163602-65 (EPA Number)

(Alternate (Facility Name)) | (Address) | (Site Number)

(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

**TO BE COMPLETED BY WASTE GENERATOR**

WASTE NAME: 63 PERCHLORETHYLENE 9 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: DRUMS | HAZARD CLASS: 0210 | UN 1897 UN 1710 (UN or NA Number) | (EPA HW Number)

WEIGHT FOR D.O.T. USE 45000 LBS TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 72 DRUMS | GALLONS (Circle One) CU. YDS. 3889

METHOD OF SHIPMENT (Circle One) (DRUMS 72 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 Norman Goldberg (Authorized Signature) DATE: 7-16-81

**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) [signature] (Authorized Signature) DATE: 7/16/81

(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.

Michael E. Bwge (Authorized Signature) DATE: 7/16/81

COMMENTS OR SPECIAL INSTRUCTIONS: TRAILER SPOTTED 7/16/81 - 61 PER TO 1A 7/17/81 T-63 JM.
9 TRI TO #3 STILL 7/21/81 T-63 JM - 2 PER TO 120 E 8/20/81 T-63 JM.

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

000686

# STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0462950

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 0528002

PHILLIPS MFG Co (Company Name) | 7334 N. CLARK (Address) | 312-338-6200 (Phone Number) | I.D. 0054741143 (Generator Number)

CHICAGO (City) | ILL (State) | 60626 (Zip) | EPA Number

WASTE HAULER(S)

AMERICAN CHEMICAL (Hauler Name) | 420 S. COLFAX GRIFFITH IND (Hauler Address) | S.W.H. Registration Number 91808902

312-768-3400 (Phone Number) | IND 063602-65 (EPA Number)

STRAND TRUCKING (Hauler Name) | CRESTWOOD ILL (Hauler Address) | S.W.H. Registration Number 0024002

(Phone Number) | ILT000646810 (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 S. COLFAX (Address) | 91808902 (Site Number)

GRIFFITH (City) | IND (State) | 46319 (Zip) | 312-768-3400 (Phone Number) | IND 016360 2-65 (EPA Number)

(Alternate (Facility Name)) | (Address) | (Site Number)

(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: 36 PERCHLOROETHYLENE 32 TETRACHLOROETHYLENE | 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: DRUMS | HAZARD CLASS: UN10 | UN 1897 UN 1710 (UN or NA Number) | (EPA HW Number)

WEIGHT FOR D.O.T. USE: 45,000 (LBS / TONS (circle one)) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 68 DRUMS | 1 GALLONS (Circle One) 2 CU. YDS. 3500 (3740)

METHOD OF SHIPMENT (Circle One) (DRUMS 68 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/OR

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Norman Dalling (Authorized Signature) | DATE: 11-19-81

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) William J. Dykstra (Authorized Signature) | DATE: 8/19/81

(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.

Michael E. Bulger (Authorized Signature) | DATE: 11/19/81

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

Truck at dock 11/19/81 GRM
To 122R T-63 G12M 12/7/81

000687

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

0462897

Authorization Number ~~921892~~

PHILLIPS MFG. CO. (Company Name) | 7334 N. CLARK (Address) | (312) 338-6200 (Phone Number) | 0316 001005 (Generator Number)

CHICAGO (City) | ILL. (State) | 60626 (Zip) | ILD005474143 (EPA Number)

WASTE HAULER(S)

AMERICAN CHEMICAL SVC. (Hauler Name) | 420 S. COLFAX (Hauler Address) | S.W.H. Registration Number

GRIFFITH, IND (312) 768-3400 (Phone Number) | IND016360265 (EPA Number)

STRAND TRUCKING (Hauler Name) | 13642 KENTON (Hauler Address) | 312-385-8440 | S.W.H. Registration Number 0311004

(Phone Number) | ILT000646810 (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SVC. (Facility Name) | 420 S. COLFAX (Address) | 918 08902 (Site Number)

GRIFFITH (City) | IND. (State) | 46319 (Zip) | (312) 768-3400 (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: PERCHLOROETHYLENE | 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 PERCHLOROETHYLENE HAZARDOUS WASTE, LIQUID, NOS | HAZARD CLASS: ORME | NA9189 (UN or NA Number) | F001 (EPA HW Number)

WEIGHT FOR D.O.T. USE 36652 LBS TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 2695 GAL (1 GALLONS (Circle One) 2 CU. YDS.) 1

METHOD OF SHIPMENT (Circle One) (DRUMS 49 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 [signature] (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) [signature] (Authorized Signature) DATE 07/07/82

(2) (Authorized Signature) DATE 07/07/82

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 07/07/82

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

On dock 7/7/82 To IAR 7-63 7-26-82 [illegible]

003700

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

0462898

Authorization Number ~~921892~~

PHILIPS MFG CO (Company Name) | 7334 N. CLARK (Address) | (312) 338-6200 (Phone Number) | 0316001005 (Generator Number)

CHICAGO (City) | ILL (State) | 60626 (Zip) | ILD005474143 (EPA Number)

WASTE HAULER(S)

AMERICAN CHEMICAL (Hauler Name) | 420 S. COLFAX (Hauler Address) | S.W.H. Registration Number

GRIFFITH, IND. (312) 768-3400 (Phone Number) | IND016360265 (EPA Number)

STRAND TRUCKING (Hauler Name) | 13642 KENTON (Hauler Address) | 312-385-8440 | S.W.H. Registration Number 0311004

(Phone Number) | ILT000646810 (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SVC (Facility Name) | 420 S. COLFAX (Address) | 91808902 (Site Number)

GRIFFITH (City) | IND. (State) | 46319 (Zip) | (312) 768-3400 (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: TRICHLOROETHYLENE | 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 TRICHLOROETHYLENE (RQ 1000-454) | HAZARD CLASS: ORMA | UN1710 (UN or NA Number) | F001 (EPA HW Number)

WEIGHT FOR D.O.T. USE 8250 LBS TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 660 GAL | 1 GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) (DRUMS 12 Number) TANK TRUCK OPEN TRUCK OTHER (Specify) VAX

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: 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) [signature] (Authorized Signature) DATE 07/07/82

(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

(Authorized Signature) DATE 07/07/82

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

On dock 7.7.82 To IAKT-63
GPM 8.9.82

003701

0462899

**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 ~~921892~~

PHILLIPS MFG. CO. (Company Name) | 7334 N. CLARK (Address) | (312) 338-6200 (Phone Number) | 0316 001 0 05 (Generator Number)

CHICAGO (City) | ILL (State) | 60626 (Zip) | ILD005474143 (EPA Number)

WASTE HAULER(S)

AMERICAN CHEMICAL (Hauler Name) | 420 S. COLFAX (Hauler Address) | S.W.H. Registration Number

GRIFFITH, IND (312) 768-3400 (Phone Number) | IND016360265 (EPA Number)

STEAN & TRUCKING (Hauler Name) | 13642 TRENTON (Hauler Address) | 312-385-8440 | S.W.H. Registration Number 0311004

(Phone Number) | ILT000646810 (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SVC. (Facility Name) | 420 S. COLFAX (Address) | 918 089 02 (Site Number)

GRIFFITH (City) | IND (State) | 46319 (Zip) | (312) 768-3400 (Phone Number) | IND 0163 602 65 (EPA Number)

(Alternate (Facility Name)) | (Address) | (Site Number)

(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

**TO BE COMPLETED BY WASTE GENERATOR**

WASTE NAME: 1,1,1 TRICHLOROETHANE | 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 1,1,1 TRICHLOROETHANE | HAZARD CLASS: ORMA | UN 2831 (UN or NA Number) | F001 (EPA HW Number)

WEIGHT FOR D.O.T. USE 2951 LBS TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED 275 GAL. | 1 GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) (DRUMS 5 Number) TANK TRUCK OPEN TRUCK OTHER (Specify) LAN

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 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) [signature] (Authorized Signature) DATE: 07/07/82

(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:

(Authorized Signature) DATE 07/07/82

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**

On dock 7.7.82
To 122 TRT-63 GRM 7.8.82

003713

**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

0462802

Authorization Number

Phillips Mfg. Co. (Company Name) | 7334 N. Clark (Address) | (312) 338-6200 (Phone Number) | 0316001005 (Generator Number)

Chicago (City) | Ill. (State) | 60626 (Zip) | EPA Number

WASTE HAULER(S)

American Chemical (Hauler Name) | 420 S. Colfax (Hauler Address) | S.W.H. Registration Number

Griffith, Ind. 46319 | (312) 765-3400 (Phone Number) | IND 016360265 (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) | 420 S. Colfax (Address) | 91808902 (Site Number)

Griffith (City) | Ind. (State) | 46319 (Zip) | (312) 765-3400 (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: Perchlorethylene 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 Perchlorethylene Hazardous Waste Liquid Nos Orme

HAZARD CLASS: NA 9189 (UN or NA Number) | F001 (EPA HW Number)

WEIGHT FOR D.O.T. USE 30800 LBS TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED 2425 GAL | 1 GALLONS (Circle One) 2 CU. YDS

METHOD OF SHIPMENT (Circle One) (DRUMS ~~[illegible]~~ 45 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: 01/04/83

**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) Jim Sufjit (Authorized Signature) DATE: 1/4/83

(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:

Norman Goldberg (Authorized Signature) DATE 1/04/83

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 IAKT-63 GRM 1.27.83 On dock 1.4.83

005245

**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

0462925

Authorization Number

PHILLIPS MFG CO. (Company Name) | 7334 N. CLARK CHGO (Address) | (312) 338-6200 (Phone Number) | 0316001003 0316 01 01 Site # (Generator Number)

CHICAGO (City) | IL (State) | 60626 (Zip) | ILD005474143 (EPA Number)

WASTE HAULER(S)

AMERICAN CHOMICAL (Hauler Name) | 420 S. COLFAX (Hauler Address) | S.W.H. Registration Number

GRIFFITH, IND. 46319 | (312) 768-3400 (Phone Number) | IND016360265 (EPA Number)

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHOMICAL (Facility Name) | 420 S. COLFAX (Address) | 91808902 (Site Number)

GRIFFITH (City) | IND. (State) | 46319 (Zip) | (312) 768-3400 (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: 1,1,1 TRICHLOROETHANE 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 1,1,1 TRICHLOROETHANE | HAZARD CLASS: ORMA | UN 2831 (UN or NA Number) | F001 (EPA HW Number)

WEIGHT FOR D.O.T. USE 7200 LBS TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 660 GAL (1) GALLONS (Circle One) (2) CU. YDS 1

METHOD OF SHIPMENT (Circle One) (DRUMS 12 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 [signature] (Authorized Signature) DATE 07/4/83

**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: 1/4/83

(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:

[signature] (Authorized Signature) DATE 07/04/83

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 IART-63 GRW 1.10.83 On dock 1.4.83 005246

# STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0462942

**TO BE COMPLETED BY WASTE GENERATOR**

Authorization Number 0316 0101 [illegible]

Phillips Mfg Co. (Company Name) | 7354 N. Clark (Address) | (312) 338-6200 (Phone Number) | 0316 00100 5 (Generator Number)

Chicago (City) | Ill. (State) | 60626 (Zip) | ILD 00594 74 115 (EPA Number)

WASTE HAULER(S)

American Chemical (Hauler Name) | 420 S. Colfax (Hauler Address) | Griffith, Ind. 46319

(312) 768-3400 (Phone Number) | S.W.H. Registration Number | IND 016360265 (EPA Number)

(Hauler Name) | (Hauler Address) | (Phone Number) | S.W.H. Registration Number | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical (Facility Name) | 420 S. Colfax (Address) | 918 08 902 (Site Number)

Griffith (City) | Ind. (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: Trichloroethylene 4 | 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 Trichloroethylene (001000-454) | HAZARD CLASS: ORM-A | UN1710 (UN or NA Number) | F001 (EPA HW Number)

WEIGHT FOR D.O.T. USE: 8680 (LBS) TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 115 GAL | (1) GALLONS (Circle One) (2) CU. YDS. 1

METHOD OF SHIPMENT (Circle One) (DRUMS 13 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 [signature] (Authorized Signature) DATE: 01/4/83

**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: 1/5/83

(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.

[signature] (Authorized Signature) DATE: 01/04/83

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

On dock 1.4.83 To 118RT-636E4 2.8.83

005274

**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

0450385

Authorization Number 991563

PHOENIX CLOSURES, INC. (Company Name) | 2444 W. 16th ST (Address) | 312-226-1700 (Phone Number) | 0316000734 (Generator Number)

CHICAGO (City) | ILL. (State) | 60608 (Zip) | ILD000180543 (EPA Number)

WASTE HAULER(S)

LANDGREBE (Hauler Name) | 3009 SHIELDS (Hauler Address) | S.W.H. Registration Number

842 3121 (Phone Number) | IND009142824 (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 AVE. (Address) | 918 08902 (Site Number)

GRIFFITH (City) | IND. (State) | 46319 (Zip) | 219-924-4370 (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: WASTE 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: FLAMMABLE LIQUID HAZARD CLASS: F001 UN or NA Number D001 EPA HW Number

WEIGHT FOR D.O.T. USE 12,100 LBS/TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED 001340 1 GALLONS (Circle One) 2 CU. YDS. 1340

METHOD OF SHIPMENT (Circle One) (DRUMS 26 Number) TANK TRUCK OPEN TRUCK OTHER (Specify) CLOSED TRAILER

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 3-26-1981

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) Landgrebe / P.M. 3-26-81 (Authorized Signature) DATE / /

(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.

BOB Mauck (Authorized Signature) DATE 03/27/81

COMMENTS OR SPECIAL INSTRUCTIONS UNLOADED AT DOCK 3/27/81
14 DRUMS TO WEST ACTA 6/8/81 JAM T-50

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 12 TO 210 K T-50 GRM 7.13.82

000682

TO BE COMPLETED BY WASTE GENERATOR

# STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0016468 (1–7)

WASTE GENERATOR

Authorization Number 991563 (8–13)

PHOENIX CLOSURES, INC. (Company Name) 5444 W. 16TH ST. (Address)

CHICAGO (City) ILL. (State) 60608 (Zip)

03160007346 (14–24) Generator Number

WASTE HAULER(S)

(1) MR. FRANK, INC. (Hauler Name) 201 W. 155TH ST. (Hauler Address) SOUTH HOLLAND, IL. 60473

S.W.H. Registration Number 0079021 (25–31)
FED. I.D. - ILD 069506160

(2) _____ (Hauler Name) _____ (Hauler Address)

S.W.H. Registration Number _____ (32–38)

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERV (Facility Name) 420 S. COLFAX AVE. (Address)

GRIFFITH (City) IND. (State) 46319 (Zip)

91808902 (39–46) Site Number
IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE 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: FLAMABLE LIQUID

HAZARD CLASS: TWO 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: MAR. 9, 1981 905 T. L. Munson (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 003000 (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 H Buell (Authorized Signature) DATE: 03/09/81 (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.

BOB MAUCK (Authorized Signature) DATE: 03 09 81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO WEST SCOTT R T-50 3/9/81 Jim Murphy

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

000680

TO BE COMPLETED BY WASTE GENERATOR

# STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0016469

Authorization Number 991563

PHOENIX CLOSURES, INC. (Company Name) 2444 W. 16th ST. (Address)
CHICAGO (City) ILL. (State) 60608 (Zip)

0316000734 (Generator Number)

WASTE HAULER(S)

(1) MR. FRANK, INC (Hauler Name) 201 W. 155TH ST. (Hauler Address) SOUTH HOLLAND, IL. 60473
S.W.H. Registration Number 0079005 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 AVE. (Address)
GRIFFITH (City) IND (State) 46319 (Zip)
91808902 (Site Number) IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINT F005 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: FLAMABLE LIQUID
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: MAR 23, 1981 T. J. Munson (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 002000 (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) Tom Berry (Authorized Signature) DATE: 3/23/81

(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: 3/23/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO WEST ACIT T-50 3/23/81 Jim Murphy

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

000681

PRINTED BY: HAZARDOUS MATERIALS PUBLISHING CO., KUTZTOWN, PA. 19530, 215-683-6721

| REPORT ANY UNRECOVERED DISCHARGE EQUAL TO OR IN EXCESS OF EACH HAZARDOUS WASTE ASSIGNED "RQ" VALUE TO NATIONAL RESPONSE CENTER 800-424-8802 | REPORTABLE QUANTITY VALUE 1 = 5000 LBS. 2 = 1000 LBS. 3 = 100 LBS. 4 = 10 LBS. 5 = 1 LB. | CHEM TREC = 800-424-9300; EPA HOTLINE = 800-424-9346; CDC POISON CENTER = 404-635-5313; DOT = 202-426-1830 | PLACARDS PROVIDED |
|---|---|---|---|

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 and Mailing Address
PK ENGINEERING & MFG CO.
235 LINDBERG ST
GRIFFITH IND. 46319

4. Generator's Phone (219) 924-6990

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: LANDGREBE MOTOR TRANSIT | 6. US EPA ID Number: IND009842824

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 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. | 12. Containers Type | 13. Total Quantity | 14. Unit Wt/Vol | I. Waste No. |
|---|---|---|---|---|---|
| a. FLAMMABLE LIQUID N.O.S. FLAMMABLE 1993 | 006 | DM | 00330 | 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 governmental regulations.

| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| LEONARD E. PUCHALSKI | Leonard E. Puchalski | 10 22 85 |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| Landgrebe - Ron Egli | Ron Egli - Landgrebe | 10 22 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) |
|---|---|---|
| STEVE KULAVICK | Steve Kulavick | 10 22 85 |

EPA Form 8700-22 (3-84)

#2 - TREATMENT, STORAGE, DISPOSAL FACILITY COPY

204 K T-50

038037

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 GENERATOR
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
PK ENGINEERING & MANUFACTURING CO., INC.
P.O. Box 717
Griffith, IN 46319
4. Generator's Phone 219 924-6990

A. State Manifest Document Number: INA 0117612
B. State Generator's ID:
C. State Transporter's ID:
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: 219 924-6990

5. Transporter 1 Company Name: Landgrebe Motor Transit
6. Use EPA ID Number: IND009842824
7. Transporter 2 Company Name:
8. Use EPA ID Number:
9. Designated Facility Name and Site Address
American Chemical Service
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. | I. Waste No. |
|---|---|---|---|---|---|
| a. Flammable Liquid N.O.S. Ignitable (Waste Material) UN1993 | 004 | dm | 00180 | 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.

Printed/Typed Name: Leonard E. Puchalski
Signature: [signature]
Date: Month 11 Day 16 Year 87

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: [illegible]
Signature:
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: HARROLD F [illegible]
Signature: [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 0117612

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865 4-204R T-50 11/24/87

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

012742

PRINTED BY: HAZARDOUS MATERIALS PUBLISHING CO., KUTZTOWN, PA. 19530, 215-683-6721

| REPORT ANY UNRECOVERED DISCHARGE EQUAL TO OR IN EXCESS OF EACH HAZARDOUS WASTE ASSIGNED "RQ" VALUE TO NATIONAL RESPONSE CENTER 800-424-8802 | REPORTABLE QUANTITY VALUE 1 = 5000 LBS. 2 = 1000 LBS. 3 = 100 LBS. 4 = 10 LBS. 5 = 1 LB. | CHEM TREC = 800-424-9300 EPA HOTLINE = 800-424-9346 CDC POISON CENTER = 404-635-5313 DOT = 202-426-1830 | PLACARDS PROVIDED |
|---|---|---|---|

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

3. Generator's Name and Mailing Address
PK ENGINEERING & MANUFACTURING CO., INC.
P.O. Box 717
Griffith, Indiana 46319

4. Generator's Phone: 219-924-6990

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

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. State Transporter's ID
D. Transporter's Phone: 462-4181

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
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-[redacted]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. Flammable Liquid N.O.S. Ignitable UN1993 (WASTE MATERIAL) | 005 | DM | 00243 | 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 governmental regulations.

Printed/Typed Name: LEONARD E. PUCHALSKI
Signature: [signature]
Date: Month 04 Day 28 Year 87

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

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 4 Day 28 Year 87

GENERATOR / TRANSPORTER / FACILITY

EPA Form 8700-22 (3-84)

#2 - TREATMENT, STORAGE, DISPOSAL FACILITY COPY

MRK 5-125F TO3 B

012741

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 7 8 9 0 0 9 3 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
PK Engineering & Manufacturing Co., Inc.
P.O. Box 717
Griffith, Indiana 46319
4. Generator's Phone: 219-924-6990

A. State Manifest Document Number: INA 0194696
B. State Generator's ID:
C. State Transporter's ID:
D. Transporter's Phone: 462-4181
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID: 8700-22AL
H. Facility's Phone: 219-924-4370

5. Transporter 1 Company Name: Ledgrobe Motor Transit
6. US EPA ID Number: I N D 0 0 9 8 4 2 8 2 4
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, Indiana 46319
10. US 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. | Waste No. |
|---|---|---|---|---|---|
| a. Flammable Liquid N.O.S. Ignitable UN1993 (Waste Material) | 003 | DM | 00130 | 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: Leonard E. Puchalski
Signature:
Date: Month 05 Day 29 Year 88

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: ALVIN WHITTAKER
Signature:
Date: Month 06 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 0194696

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865
3-126 RT 6 3 6/30

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

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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. ILD043357334 | Manifest Document No. 0001 | 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
Plaspros, Inc.
455 Borden St., Woodstock, IL 60098

4. Generator's Phone ( 815 ) 338-2420

A. State Manifest Document Number: INA 0114787
B. State Generator's ID: 1110955011

5. Transporter 1 Company Name: Mr. Frank Inc.
6. Use EPA ID Number: ILD069506160
C. State Transporter's ID: 0079
D. Transporter's Phone: (511) 576-3377

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 Ave.
Griffith, IN
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. Wast XXX Flammable Liquid, N.O.S. UN 1993 | 009 | DM | 00495 | 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: RUSSELL P. BLAZER | Signature: [signature] | Date Month 03 Day 8 Year 87

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Dave Voss | Signature: [signature] | Date Month 05 Day 28 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: HARROLD F Schmidt | Signature: [signature] | Date Month 05 Day 29 Year 86

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 0114787

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

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9-123R T63B

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ILLINOIS ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0610
LPC 62 8/81

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 9 8 0 9 9 4 5 8 6 — Manifest Document No. 0 0 0 1 — 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
PLASTIC DECORATORS, INC.
1330 Holmes Rd. Elgin, Il. 60120

4. Generator's Phone ( 312 ) 697-1330

A. Illinois Manifest Document Number IL 1259683

B. Illinois Generator's ID 0 3 1 3 0 6 5 0 0 6

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 1 8 7 5

D. (312) 842-3121 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, IND 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 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 | L Waste No. |
|---|---|---|---|---|---|---|---|
| a. | WASTE METHAL ETHAL KEYTONE SOLUTION FLAMABLE LIQUID UN 1993 | X | 4 | DRM | 220 GAL | 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
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: RAYMOND A DEMATTEO II — Signature: Raymond A DeMatteo II — Date: Month 2 Day 26 Year 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: F. Schlunt — Signature: F Schlunt — Date: Month 2 Day 26 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: R Rushick — Signature: R Rushick — Date: Month 2 Day 27 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

204 K T-50 ✓

038145

**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 (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 9 8 0 9 9 4 5 8 6 | Manifest Document No. 0 0 0 3

2. Page 1 of — 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
PLASTIC DECORATORS INC.
1330 HOLMES RD ELGIN, IL 60120

4. Generator's Phone ( 312 ) 697-1330

A. Illinois Manifest Document Number IL 1259685

B. Illinois Generator's ID 0 3 1 3 0 6 5 0 0 6

5. Transporter 1 Company Name: LANDGREBB MOTOR TRANSIT — 6. US EPA ID Number: I N D 0 0 9 8 4 2 8 2 4

C. Illinois Tranporter's ID 1 8 7 5

D. (312) 842-3121 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 IND. 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 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 METHAL ETHAL KETONE SOLUTION FLAMMABLE LIQUID, UN1993 | | 5 | DRM | 27.5 GAL | 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
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: RAYMOND A DEMATTEO II — Signature: Ray DeMatteo — Date: Month 7 Day 8 Year 85

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: F. W. Schlundt — Signature: F W Schlundt — Date: Month 7 Day 8 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: FRANK PRICE — Signature: Frank Price — Date: Month 7 Day 9 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

204 F T-50

UJ8144

**STATE OF ILLINOIS** ENVIRONMENTAL PROTECTION AGENCY DIVISION OF [illegible] CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0610

LPC 62 8/81

Please print [illegible] 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 980994586 — Manifest Document No.: 0003

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: PLASTIC DECORATORS INC, 1330 HOLMES RD. ELGIN, IL. 60120

4. Generator's Phone (312) 697-1330

A. Illinois Manifest Document Number: IL 1309936

B. Illinois Generator's ID: 0313065006

5. Transporter 1 Company Name: LANDGREBB MOTOR TRANSIT

6. US EPA ID Number: IND 009842824

C. Illinois Tranporter's ID: 11875

D. (312) 842-3121 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, IND 46319

10. US EPA ID Number: IND 016360265

G. Illinois Facility's ID: 918089002

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 METHAL ETHAL KEYTONE SOLUTION FLAMABLE LIQUID UN 1993 | X | 5 | DRUM | 275 GAL | 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: RAYMOND A DEMATTEO II — Signature: Raymond A DeMatteo II — Date: Month 11 Day 21 Year 85

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Mitchell E. Mullins — Signature: Mitchell E. Mullins — Date: Month 11 Day 21 Year 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 11 Day 22 Year 85

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

204 ET-63

008145

**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 980994586 | Manifest Document No. 0004 | 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
PLASTIC DECORATORS, INC.
1330 HOLMES RD ELGIN, IL 60120

4. Generator's Phone ( 312 ) 697-1330

A. Illinois Manifest Document Number IL 1309937

B. Illinois Generator's ID 0313965096

5. Transporter 1 Company Name: LANDGREBB MOTOR TRANSIT | 6. US EPA ID Number: IND 009842824 | C. Illinois Tranporter's ID 11875

D. (312) 842-3121 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
HWY 6 COLFAX
GRIFFITH, IND 46319 | 10. US EPA ID Number: IND 016 360 265 | G. Illinois Facility's ID 9118108900 2

H. Facility's Phone (219) 838-3100

| | 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 MIETHAL ETHAL KETONE SOLUTION FLAMABLE LIQUID (UN1993) | X | 5 | DM | 27.5 GAL | 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
2,250 # WT

K. Handling Codes for Wastes Listed Above
1 = 5 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: RAYMOND A DEMATTEO II | Signature: Raymond A DeMatteo | Date: Month Day Year 02 03 86

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Landgrebe Motor Philip L Lyons | Signature: Philip L Lyons | Date: Month Day Year 02 04 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: MURPHY | Signature | Date: Month Day Year 02 07 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

204K T-50 ✓

012015

**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 980994586 | Manifest Document No. 00005 | 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
PLASTIC DECORATORS INC
1330 HELMAR RD ELGIN IL 60120

4. Generator's Phone ( 312 ) 697-1330

5. Transporter 1 Company Name: LAIDLAW WASTE TRANSIT | 6. US EPA ID Number: IND 007842824

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

9. Designated Facility Name and Site Address
AMERICAN ENVIRONMENTAL SERVICE
GRIFFITH IND. 46319 | 10. US EPA ID Number: IND 006360 265

A. Illinois Manifest Document Number: IL 1309938
B. Illinois Generator's ID: 0313065996
C. Illinois Tranporter's ID: 118715
D. (312) 842-3121 Transporter's Phone
E. Illinois Transporter's ID
F. ( ) Transporter's Phone
G. Illinois Facility's ID: 9180890002
H. Facility's Phone: (312) 768-2400

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 METHAL ETHAL KETONE SOLUTION FLAMMABLE LIQUID UN1993 | 3 | DM | 2,165GAL | 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: RAYMOND A DEMATTEO II | Signature | Date: Month 04 Day 14 Year 86

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: BOB PIENTKA | Signature | Date: Month 4 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: A WHITAKER | Signature | Date: Month 4 Day 25 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

204 CT50

012016

**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 980994586 — Manifest Document No.: 0007

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: Plastic Decorators Inc, 1370 Holmes Rd, Elgin IL 60120

4. Generator's Phone (312) 697-1330

A. Illinois Manifest Document Number: IL 1309940

B. Illinois Generator's ID: 0313065906

5. Transporter 1 Company Name: Landgraf Motor Transit — 6. US EPA ID Number: IND 009842824

C. Illinois Tranporter's ID: 11825

D. ( ) Transporter's Phone

7. Transporter 2 Company Name: Landgraf Motor Transit — 8. US EPA ID Number: IND 009842824

E. Illinois Transporter's ID

F. ( ) Transporter's Phone

9. Designated Facility Name and Site Address: American Chemical Service, Griffith Ind 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. | Waste Methanol Ethanol Butanol Solution Flammable Liquid UN 1993 | X | 10 | DRUM | 550 GAL | | EPA HW Number: D001 / Authorization Number |
| b. | | | 5 | | | | EPA HW Number / Authorization Number |
| c. | | | | | 25600 | | EPA HW Number / Authorization Number |
| d. | DT - UN 1993 | | | | | | 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: RAYMOND A DeMATTEO II — Signature: [signature] — Date: Month 10 Day 6 Year 86

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Fred L. Koselke — Signature: Fred L. Koselke — Date: Month 10 Day 7 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: H.F. Schmidt — Signature: [signature] — Date: Month 10 Day 08 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

125 FT 63

012017

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 8 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law. |
|---|---|---|---|
| ILD981100464 | 00002 | | |

3. Generator's Name and Mailing Address
PLASTICRAFTERS
P.O. BOX 7540., ROCKFORD, IL 61126-7540

4. Generator's Phone (815) 229-8200

A. State Manifest Document Number: INA 0114786

B. State Generator's ID: 2010305224

5. Transporter 1 Company Name: MR w FRANK INC.

6. Use EPA ID Number: ILD069506160

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.
COLFAX RD & C.&O.R.R.
GRIFFITH, IN 46319

10. Use EPA ID Number: IND016360265

G. State 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. | I. Waste No. |
|---|---|---|---|---|---|
| a. WASTE FLAMMABLE LIQUID N.O.S FLAMMABLE LIQUID UN1993 | 003 | DM | 0165 | P | D001 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

GENERATOR

J. Additional Descriptions for Materials Listed Above
LACQUER THINNERS

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
IF WASTE 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.

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 |
|---|---|---|---|---|
| KOREN MANLEY | Koren Manley | 05 | 28 | 87 |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| Dave Voss | Dave Voss | 05 | 28 | 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 | Harold F. Schmidt | 05 | 29 | 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.

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

MRC
1 - 204K TSD 2 - 126K TSD

INA 0114786

012606

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. ILD981100464 Manifest Document No. 00000
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
PLASTICRAFTERS INC.
4550 KISHWAUKEE STREET
ROCKFORD, IL 61109 (815) 229-8200

A. State Manifest Document Number INA 0224419
B. State Generator's ID 2010305224
C. State Transporter's ID 0079
D. Transporter's Phone (312) 720-0700
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID 9180890002
H. Facility's Phone (312) 1768-3400

4. Generator's Phone

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 SERVICES
COLFAX AVE. AT C & O R.R.
GRIFFITH, INDIANA 46319
10. Use EPA ID Number P.O. BOX 190 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 | 009 | DM | 00495 | 1 | 001 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
LACQUER THINNER

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: KOREN MANLEY Signature: Koren Manley Date: Month 07 Day 06 Year 88

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: CARL E MILBURN Signature: Carl E. Milburn Date: Month 07 Day 06 Year 88

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: PETER C. RAUEN Signature: Peter C. Rauen Date: Month 07 Day 07 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: JAMES MURPHY Signature: James Murphy Date: Month 07 Day 07 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.

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

4-20YR TSO
3-(149 GALS) 20YR TSO 9/12
21 PAILS (126 GALS) - ASH GROVE 11/15/88 AR 265282

INA 0224419

0015131

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.: ILD981100464 — Manifest Document No.: 00000
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: PLASTICRAFTERS, 4550 KISHWAUKEE ST, ROCKFORD IL 61109
4. Generator's Phone: 815/229-8200

A. State Manifest Document Number: INA 0139993
B. State Generator's ID: 2010305224

5. Transporter 1 Company Name: MR FRANK INC
6. Use EPA ID Number: [illegible]
C. State Transporter's ID: 0079
D. Transporter's Phone: 708/720-0700

7. Transporter 2 Company Name:
8. Use EPA ID Number: CEM ILD984775049
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address: AMERICAN CHEMICAL SERVICES PO BOX 190, COLFAX AVE @ C & O RR, GRIFFITH IN 46319
10. Use EPA ID Number: IN0016360265
G. State Facility's ID: 9180890002
H. Facility's Phone: 708/768-3400

| 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. FLAMMABLE LIQUID UN 1993 | 010 | DM | 550 | | D001 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above: LACQUER THINNER
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: KOREN MANLEY — Signature: [signature] — Date: Month 11 Day 27 Year 89

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: CARL E. MILBURN — Signature: [signature] — Date: Month 12 Day 7 Year 89

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

19. Discrepancy Indication Space: 7-126 TCT 63 11/29; 2-204 TCT 50 11/29; 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 H — Signature: [signature] — Date: Month 11 Day 28 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 0139993

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

0016856

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.9.8.1.1.0.0.4.6.4
Manifest Document No.: 00000
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
PLASTERCRAFTERS, INC.
4550 Kishwaukee Street
Rockford, IL 61109 (815)229-8200

4. Generator's Phone

A. State Manifest Document Number: INA 0267993
B. State Generator's ID: 2010305224

5. Transporter 1 Company Name: MR FRANK INC.
6. Use EPA ID Number: I.L.D.9.6.9.5.0.6.1.6.0
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
Colfax Ave. @ C & O.R.R.
Griffith, IN 46319
10. Use EPA ID Number: P. O. Box 190 I.N.0.0.1.6.3.6.0.2.6.5
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 FLAMMABLE LIQUID, N.O.S. FLAMMABLE LIQUID UN 1993 | 0.10 | D-M | 0.0.5.5.0 | 1 | D001 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above: LACQUER THINNER
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.

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Printed/Typed Name: f Koren Manley
Signature: Koren Manley
Date: Month 02 Day 17 Year 89

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JON PORTER
Signature: Jon Porter
Date: Month 02 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 Item 19.
Printed/Typed Name: Whitaker A
Signature: Whitaker A
Date: Month 02 Day 22 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 0267993

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

4-204 TC TSD 3/6
4-204 TC TSD 3/8

14 PAILS (84 GAL) ASTRONOTE 8/15/89 9/03
26 GAL 204 TC TSD 8/15/89

COPY 5. TSD COPY

0016857

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 1 1 0 0 4 6 4 — Manifest Document No. 0 0 0 0 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
PLASTICRAFTERS
4550 KISHWAUKEE ST ROCKFORD, IL 61109
4. Generator's Phone ( 815 ) 229-8200

A. State Manifest Document Number: INA 0442490
B. State Generator's ID: 2010305224

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&O R.R.~~
GRIFFITH, IN 46319
10. Use EPA ID Number 420 South
I N D 0 1 6 3 6 0 2 6 5
G. State Facility's ID: 9180890002
H. Facility's Phone: 708/768-3400

| 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. (LACQUER THINNERS) FLAMMABLE LIQUID UN 1993 | 0 1 1 | D M | 0 0 0 5 5 | G | D001 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above: LACQUER THINNER
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: RONALD L. OLTHOFF SR. — Signature — Date: Month 6 Day 26 Year 90

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Miguel A. Ortiz — Signature — Date: Month 6 Day 26 Year 90
18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Date: Month Day Year

FACILITY
19. Discrepancy Indication Space
#4. Manifest shall read 420 S. Colfax Ave.

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Alvin Whitaker — Signature — Date: Month 7 Day 2 Year 90

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-89)

2 12 T-3 7/31 (LIQUID)
6 (277 GALS) 121 TR 763 8/1/90
33 DRUMS (198 GAL) ASH 10/3/90 9010X

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 0442490

0018305

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. IND027475698 | Manifest Document No. CC1 | 2. Page 1 of | Information in the shaded areas is not required by Federal law.

**GENERATOR**

3. Generator's Name and Mailing Address
Plastics Thermo-Forming, Inc.
67819 SR 15 New Paris, IN 46553
4. Generator's Phone ( 219 ) 831-4340

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

5. Transporter 1 Company Name: American Chemical Service | 6. US EPA ID Number: IND016380265
C. State Transporter's ID
D. Transporter's Phone (312) 768-3400

7. Transporter 2 Company Name: Strand Trucking | 8. US EPA ID Number: ILD000646810
E. State Transporter's ID
F. Transporter's Phone (312) 385-5440

9. Designated Facility Name and Site Address
American Chemical
420 S. Colpax Ave.
Griffith, IN 46319
10. US EPA ID Number: IND016380265
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) | HM | 12. Containers No. | 12. Containers Type | 13. Total Quantity | 14. Unit Wt/Vol | I. Waste No. |
|---|---|---|---|---|---|---|
| a. Acetone Ignitable Foo3 UN 1090 | | 014 ~~040~~ | DM | 725 ~~550~~ | G | D001 |
| b. | | | | | | |
| c. | | | | | | |
| d. | | | | | | |

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

K. Handling Codes for Wastes Listed Above
UN1090

15. Special Handling Instructions and Additional Information
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 healti

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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 the enviroment.

| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| Randall C. Myers | [signature] | 11 7 85 |

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| JAMES BATTEN | [signature] | 11 07 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) |
|---|---|---|
| [illegible] | [signature] | |

Style F15-6 Labelmaster, Chicago, IL 60646

EPA Form 8700-22 (3-84)

120K T-63

TSDF COPY

038142

# HAZARDOUS WASTE MANIFEST

ORIGINAL – NOT NEGOTIABLE

P11 – 1
MANIFEST DOCUMENT NUMBER

STRAND TRUCKING
~~Mr. Frank, Inc.~~
NAME OF CARRIER (SCAC)

SHIPPER NUMBER

CARRIER NUMBER

## IDENTIFICATION

| | 12 DIGIT EPA ID # | COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER | DATE SHIPPED OR RECEIVED |
|---|---|---|---|
| GENERATOR/ SHIPPER | ILD005122163 | Playskool, Inc., 4501 W. Augusta Blvd. Chicago, Il. (312) 276-6700 | 11/26/80 |
| TRANSPORTER # 1 | ILT0006468/0 ~~ILD069506160~~ | STRAND TRUCKING ~~Mr. Frank, Inc., South Holland, Illinois~~ | 11/26/80 |
| TRANSPORTER # 2 (If required) | | | |
| TSDF TREATMENT STORAGE OR DISPOSAL FACILITY | IND016360265 | American Chemical Company, Griffith, Indiana (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) |
|---|---|---|---|---|---|---|---|---|---|---|
| 2-55 Gal. Drums | X | F017 | Waste Flammable Liquid N.O.S. | UN1993 | Flammable Liquid | Less Than 60° C | 55/Gal | 2860 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

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 BE COMPLETED BY WASTE GENERATOR

# STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0168419

Authorization Number 997209

PLAYSKOOL, INC. (Company Name) | 4501 W. AUGUSTA BLVD. Address

CHICAGO City | ILLINOIS State | 60651 Zip

0 3 1 6 0 0 0 3 4 8 G Generator Number

WASTE HAULER(S)

(1) AMERICAN CHEMICAL COMPANY Hauler Name | GRIFFITH, INDIANA Hauler Address | S.W.H. Registration Number 0 0 2 4 0 0 2

(2) _____ Hauler Name | _____ Hauler Address | S.W.H. Registration Number _____

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL CO. (Facility Name) | GRIFFITH, INDIANA Address | 9 1 8 0 8 9 0 2 Site Number

_____ City | _____ State | _____ Zip

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ~~XXXXXXXXXXXXXX~~ DIRTY THINNER | 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: |
|---|---|
| ~~LACTOL SPIRITS~~ | 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: 1-7-80 | C Burmeister (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 80-55 | (1) GALLONS (2) CU. YDS. (Circle One)

METHOD OF SHIPMENT (Circle One) (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) J Hazelwood (Authorized Signature) | DATE 01/22/80

(2) _____ (Authorized Signature) | DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

Michael Chung (Authorized Signature) | DATE: 1/22/80

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

DD 0105

TO BE COMPLETED BY WASTE GENERATOR

# STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0168420

Authorization Number 99 7209

Playskool, Inc. (Company Name) | 4501 W. Augusta Blvd. (Address)

Chicago, (City) | Illinois (State) | 60651 (Zip)

0 3 1 6 0 0 0 3 4 8 G
Generator Number

WASTE HAULER(S)

(1) American Chemical Co. (Hauler Name) | Griffith, Indiana (Hauler Address) | S.W.H. Registration Number 0 0 2 4 0 0 1

(2) (Hauler Name) | (Hauler Address) | S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Co. (Facility Name) | Griffith, Indiana (Address) | 9 1 8 0 8 9 0 2 Site Number

(City) | (State) | (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Dirty Thinner | 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: |
|---|---|
| Lactol Spriits | 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: 07/24/80 | C. Hermann (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED 001100 (1 GALLONS / 2 CU. YDS.) (Circle One) 1

METHOD OF SHIPMENT (Circle One) 22 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) John Haywood (Authorized Signature) DATE 07/24/80

(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: 7-24-80

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

000103

TO BE COMPLETED BY WASTE GENERATOR

# STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0168422

WASTE GENERATOR

Authorization Number 997209

Playskool, Inc. (Company Name) | 4501 W. Augusta Blvd. (Address)

Chicago (City) | Illinois (State) | 60651 (Zip)

0316000348 G (Generator Number)

WASTE HAULER(S)

(1) American Chemical Company (Hauler Name) | Griffith, Indiana (Hauler Address) | S.W.H. Registration Number 0024002

(2) (Hauler Name) | (Hauler Address) | S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical, Co. (Facility Name) NO1-O | Griffith, Indiana (Address) | 918089002 (Site Number)

(City) | (State) | (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: DIRTY THINNER

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: LACTOL SPRITS

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: 10-7-80

X (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 00425 (1 GALLONS / 2 CU. YDS.) (Circle One)

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER VAC (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: 10/21/80

(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: 10/21/80

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS, 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS, 800 / 424-9802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

000102

TO BE COMPLETED BY WASTE GENERATOR

# STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0168423

WASTE GENERATOR

Authorization Number 997209

Playskool, Inc. (Company Name) | 4501 W. Augusta Blvd. (Address)

Chicago (City) | Illinois (State) | 60651 (Zip)

03 1 6 0 0 0 3 4 8 G
Generator Number

WASTE HAULER(S)

(1) American Chemical Co. (Hauler Name) | Griffith, Indiana (Hauler Address) | S.W.H. Registration Number 00 2 4 0 0 2

(2) (Hauler Name) | (Hauler Address) | S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Co. (Facility Name) | Griffith, Indiana (Address) | 9 1 8 0 8 9 0 2 Site Number

(City) | (State) | (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Dirty Thinner

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: Lactol Sprits

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: 10.14.80

(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 002700 (1) GALLONS (2) CU. YDS. (Circle One)

METHOD OF SHIPMENT (Circle One) (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) (Authorized Signature) DATE: 10/15/80

(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: 10/15/80

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

0000100

TO BE COMPLETED BY WASTE GENERATOR

# STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0168424 (1–7)

WASTE GENERATOR

Authorization Number: 9 9 7 2 0 9 (8–13)

Playskool, Inc. (Company Name) | 4501 W. Augusta Blvd. (Address) | Chicago (City) | Illinois (State) | 60651 (Zip)

0 3 1 6 0 0 0 3 4 8 G (14–24) Generator Number

WASTE HAULER(S)

(1) American Chemical Co. (Hauler Name) | Griffith, Indiana (Hauler Address) | S.W.H. Registration Number: 0 0 2 v 4 0 0 2 (25–31)

(2) (Hauler Name) | (Hauler Address) | S.W.H. Registration Number (32–38)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical (Facility Name) | Griffith, Indiana (Address) | 9 1 8 0 8 9 0 2 (39–46) Site Number

(City) | (State) | (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: DIRTY THINNER

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: Lactol Sprits

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

X DATE: 10-22 X [signature] (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 004000 (47–52) 1 GALLONS 2 CU. YDS. (Circle One) (53)

79

METHOD OF SHIPMENT (Circle One) 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) [signature] (Authorized Signature) DATE: 10/22/80 (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: 10/23/80 (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

TO BE COMPLETED BY WASTE GENERATOR

# STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0168425

WASTE GENERATOR

Authorization Number 997209

ILD005122163

Playskool, Inc. (Company Name) — 4501 W. Augusta Blvd. (Address)

Chicago (City) — Illinois (State) — 60651 (Zip)

0316000348 G (Generator Number)

WASTE HAULER(S)

(1) American Chemical Co. (Hauler Name) — Griffith, Indiana (Hauler Address) — S.W.H. Registration Number 0024002

ILT000646810

(2) STRAND TRUCKING (Hauler Name) — CRESTWOOD (Hauler Address) — S.W.H. Registration Number 0024001

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Co. (Facility Name) — Griffith, Indiana (Address) — 91808902 (Site Number)

City — State — Zip

IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Dirty Thinner

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: Lactol Sprits

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: 11/26/80 F005 [signature] (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 002860 (47–52) — 1 GALLONS / 2 CU. YDS. (Circle One)

METHOD OF SHIPMENT (Circle One) 52 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) William J. Sylvester (Authorized Signature) — DATE: 11/26/80

(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: __/__/__

COMMENTS OR SPECIAL INSTRUCTIONS: unloaded on Rack 12-1 pumped to 124 TK 12-3

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8302

DISTRIBUTION: PART - 1 GENERATOR — PART - 2 IEPA — PART - 3 SITE — PART - 4 HAULER — PART - 5 IEPA — PART 6 GENERATOR

SITE COPY - PART 3

0000279

# STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0482436

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 997209

PLAYSKOOL INC. (Company Name) | 4501 AUGUSTA BLVD. (Address) | 312-276-6700 (Phone Number) | 0316000348 (Generator Number)

CHICAGO (City) | ILL (State) | 60651 (Zip) | ILD005122163 (EPA Number)

WASTE HAULER(S)

MR. FRANK Co. (Hauler Name) | 201 W. 155TH ST. SOUTH HOLLAND, ILL 60473 (Hauler Address) | Phone Number | S.W.H. Registration Number 0079 001 | ILD069506160 (EPA Number)

Hauler Name | Hauler Address | Phone Number | S.W.H. Registration Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | GRIFFITH, INDIANA (Address) | 91808902 (Site Number)

City | State | 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: DIRTY THINNER 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: LACTOL SPIRITS | HAZARD CLASS: FLAMMABLE | 1993 (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: 005000 (1) GALLONS (Circle One) CU. YDS. 1

METHOD OF SHIPMENT (Circle One) (DRUMS_____ Number) (TANK TRUCK) OPEN TRUCK OTHER (Specify) _____

F-005

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 D. L. Hemphill (Authorized Signature) DATE 4-28-82

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 04 29 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 04 / /

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 126K T-63 GRM 4-28-82

003702

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

0633476 (1 7)

Authorization Number [redacted] (8 13)

GEN # 0316000348

PLAYSKOOL INC. (Company Name) | 4501 AUGUSTA BLVD. (Address) | 312-276-6700 (Phone Number) | ILD005122163 (EPA Number) (14 24)

CHICAGO (City) | ILLINOIS (State) | 60651 (Zip)

WASTE HAULER(S)

MR. FRANK CO. (Hauler Name) | 201 W. 155TH ST. (Hauler Address) | S.W.H. Registration Number 0079021 (25 31)

So. HOLLAND, ILL. #60473 (Hauler Address) | 312-596-3377 (Phone Number) | ILD069506160 (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 CO. (Facility Name) | 420 So. COLFAX AVE # (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: DIRTY THINNER 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: LACTOL SPIRITS FLAMMABLE | HAZARD CLASS: F-005 | 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: 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: 10-4-82

**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) Tom Berry (Authorized Signature) DATE: 10 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.

[signature] (Authorized Signature) DATE: 10/4/82 (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 # 4

SITE COPY - PART 3

To 210 K T-50 GRM 10.4

IL 532 (-10
EPC 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

0633477
1 7

**TO BE COMPLETED BY WASTE GENERATOR**

Authorization Number 997209
8 13

PLAYSKOOL INC. (Company Name) | 4501 AUGUSTA BLVD. (Address) | 312-276-6700 (Phone Number) | 0316000348 (Generator Number) 14 G 24

CHICAGO (City) | ILLINOIS (State) | 60651 (Zip) | ILD 005122163 (EPA Number)

WASTE HAULER(S)

MR. FRANK CO. (Hauler Name) | 201 W. 155TH ST. (Hauler Address) | S.W.H. Registration Number 0079029 25 31

SO. HOLLAND, ILL #60473 | 312 596 3377 (Phone Number) | ILD 069506161 (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 CO. (Facility Name) | GRIFFITH INDIANA #46319 (Address) | 91808502 39 Site Number 46

400 S. COLFAX AVE (City) | (State) | (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: DIRTY THINNER | 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: LACTOL SPIRITS | HAZARD CLASS: FLAMMABLE | 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: 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) _____

F-005

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 D. Hemphill (Authorized Signature) | DATE: 5-24-82

**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) Robert Perkins (Authorized Signature) | DATE: 05 24 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: 5/24/82 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. # 4

SITE COPY - PART 3

To 125K T-63 GRM 5.24.82

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

0633478

Authorization Number

| | | | |
|---|---|---|---|
| PLAYSKOOL INC. | 4501 AUGUSTA BLVD. | 312-276-6700 | 0316000348 |
| (Company Name) | Address | Phone Number | Generator Number |
| CHICAGO | ILLINOIS 60651 | | ILD005122163 |
| City | State Zip | | EPA Number |

WASTE HAULER(S)

| | | | |
|---|---|---|---|
| MR. FRANK CO. | 201 W. 155TH ST. | | S.W.H. Registration Number 0079009 |
| Hauler Name | Hauler Address | | |
| SO. HOLLAND, ILL, 60473 | | 312-596-3377 | ILD068506169 |
| | | 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 | 420 SO. COLFAX | | | 91808902 |
| (Facility Name) | Address | | | Site Number |
| GRIFFITH | INDIANA | #46319 | 312-768-3400 | 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: DIRTY THINNER-STILL BOTTOMS WASTE PHASE: LIQUID-SEMI/SOLID (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 |
|---|---|---|---|
| LACTOL SPIRITS | FLAMMABLE | 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: 002500 (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 W. Hemphill (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) Tom Berry (Authorized Signature) DATE: 01/07/83 (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:

F. Duffee (Authorized Signature) DATE: 1/7/83 (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. # 4

**SITE COPY - PART 3**

TO 210 KT-50 GRM 1.7.83

005092

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

0749483

Authorization Number

PLAYSKOOL INC. (Company Name) | 4501 AUGUSTA (Address) | 312-276-6700 (Phone Number) | 0316000348 (Generator Number)

CHICAGO (City) | ILLINOIS (State) | 60651 (Zip) | ILD005122163 (EPA Number)

WASTE HAULER(S)

MR. FRANK CO (Hauler Name) | 201 W. 155TH ST. (Hauler Address) | S.W.H. Registration Number 0079019

So. HOLLAND, ILL, 60473 | 3125963377 (Phone Number) | ILD069506160 (EPA Number)

Hauler Name | Hauler Address | S.W.H. Registration Number

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL CO. (Facility Name) | 420 So. COLFAX AVE (Address) | 91808902 (Site Number)

GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | 3127683400 (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: DIRTY THINNER | 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: LACTOL SPIRITS | HAZARD CLASS: FLAMMABLE | 1993 (UN or NA Number) | F-005 (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: 3000XX (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 ✓ Edw. S. Hanzlik - 8-24-83 (Authorized Signature) DATE ✓ 8/24/83

**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) Michael Martin (Authorized Signature) DATE: 08/24/83 (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 08/24/83 (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

SITE COPY - PART 3

To 124 KT-63 GRM 8-24-83

005343

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

0848942
OUT OF STATE
Authorization Number C C C C C C (8–13)

PLAYSKOOL INC. (Company Name) | 4501 AUGUSTA (Address) | 3122766700 (Phone Number) | 0316000348 G (14–24 Generator Number)

CHICAGO (City) | ILL (State) | 60651 (Zip) | ILD005122163 (EPA Number)

WASTE HAULER(S)

MR. FRANK CO. (Hauler Name) | 201 W. 155TH ST (Hauler Address) | SOUTH HOLLAND, ILL. 60473 | S.W.H. Registration Number 0079001 (25–31) | 3125963377 (Phone Number) | ILD069506160 (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) | 420+50 COLFAX (Address) | 91808902 (39–46 Site Number)

GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | 3127683400 (Phone Number) | 016360265IND (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: DIRTY THINNER 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 |
|---|---|---|---|
| LACTOL SPIRITS | 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: 00 1500 (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 Edward S. Hamlik (Authorized Signature) DATE: 12-9-83

**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: 12/09/83 (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: 12-9-83 (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. # 4

SITE COPY–PART 3 TO 210 FT-50 GRN 12-9-83

005374

STATE OF MICHIGAN

Rev. 8/81

# WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS) ☐ Act 136 Waste ☐ Other MI 0226383

006122

## IDENTIFICATION

| Generator's Name | Primary Transporter's Name | Treatment, Storage or Disposal Facility |
|---|---|---|
| PMI Laboratories, Inc. | Valley City Refuse Disposal, Inc. | American Chemical Service, Inc. |
| **Site Address** | **Transporters Address** | **Facility Address** |
| 550 Cottage Grove<br>Grand Rapids, MI 49507 | 2650 Thornwood<br>Wyoming, MI 49509 | 420 S. Colfax<br>Griffith, IN 46319 |
| **Phone Number** | **Phone Number** | **Phone Number** |
| (616) 452-1441 | (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** |
| MIG 800 001 656 | 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 ALCOHOL N.O.S. | Flamable Liquid | 1987 | 07 | 15 | DR | | X | | | 825 | Gals | D001 |
| 2. | Ethylene Glycol N Butyl Ether | ~~Combustible~~ Flamable | 1149 | 07 | 1 | DR | | X | | | 55 | Gals | 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 * Raymond C Dells

Date Shipped MO. DAY YEAR: 090882

## 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 Russ Heminger

Subsequent transporter(s) signature(s): ③

Date(s) Received: 090982

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: 91382

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.

T0204ET-50GRM 9.13.82 TSDF COPY

R 4896
Rev. 3/81

STATE OF MICHIGAN

# WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS) ☐ Act 136 Waste (OTHER) MI 0003103

## IDENTIFICATION

| Generator's Name | Primary Transporter's Name | Treatment, Storage or Disposal Facility |
|---|---|---|
| PMI Laboratories, Inc. | Valley City Refuse Disposal, Inc. | American Chemical Service, Inc. 002436 |
| **Site Address** | **Transporters Address** | **Facility Address** |
| 550 Cottage Grove<br>Grand Rapids, MI 49507 | 2650 Thornwood, S.W.<br>Wyoming, MI 49509 | 420 S. Colfax<br>Griffith, IN 46319 |
| **Phone Number** | **Phone Number** | **Phone Number** (area code and no.) |
| (616) 452-1441 | (616) 538-8499 | (219) 924-4370 |
| **Generator's Site EPA I.D. Number** | **Transporter's EPA I.D. Number** | **Facility's EPA I.D. Number** |
| MIG 000 001 656 | MID 055 855 373 | IND 000 360 765 |

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 Alcohol, NOS | Flammable Liquid | 1987 | 07 | 7 | DF | | X | | | 385 | gal | D001 |
| 2. | | | | | | | | | | | | | |
| 3. | | | | | | | | | | | | | |
| 4. | | | | | | | | | | | | | |
| 5. | | | | | | | | | | | | | |
| 6. | | | | | | | | | | | | | |

## COMMENTS

Include Safety precautions and special handling instructions.

## 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 Raymond C. Dell

Date Shipped (MO. DAY. YEAR) 10/13/82

## 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

Transporter(s) Signature ② Russell Hemingway

Date(s) Received 10/13/82

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 T. D. Lee

Facility Site EPA I.D. Number IND 000 618 686

☒ 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

TSDF COPY TO 20 AT [illegible] 10/15/82

R 4896
Rev. 8/81

STATE OF MICHIGAN

# WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS) ☐ Act 136 Waste ☐ Other **MI 0326977**

005242

**IDENTIFICATION**

| Generator's Name | Primary Transporter's Name | Treatment, Storage or Disposal Facility |
|---|---|---|
| PMI Laboratories, Inc. | Valley City Refuse Disposal, Inc. | American Chemical Service, Inc. |
| Site Address: 550 Cottage Grove, Grand Rapids, MI 49507 | Transporters Address: 2650 Thornwood, S.W., Wyoming, MI 49509 | Facility Address: 420 S. Colfax, Griffith, IN 46319 |
| Phone Number: (616) 452-1441 | Phone Number: (616) 538-8499 | Phone Number: (219) 924-4370 |
| Generator's Site EPA I.D. Number: MIG 000 001 656 | 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 Alcohol, NOS~~ | ~~Flammable Liquid~~ | ~~1987~~ | ~~07~~ | | ~~DR~~ | | X | | | | ~~GAL~~ | ~~D001~~ |
| 2. | Waste Dichloromethane (Methylene Chloride) | ORM-A | 1593 | 09 | 1 | DR | | X | | | 50 | GAL | F002 |
| 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 Caryl L Burke — Date Shipped MO. DAY YEAR: 10 03 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 H830366

Subsequent Transporter Vehicle I.D. No's

Transporter Signature: ② [signature] — Date(s) Received: 10 03 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 R Kushnik

Facility Site EPA I.D. Number: DN00163600615

☒ Accepted ☐ Rejected — Date Received: 10 7 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

On dock To 120TCT-63 GRM 12-7-83

STATE OF MICHIGAN

R 4896
Rev. 8/81

# WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS) ☐ Act 136 Waste ☐ Other **MI 0286434**

## IDENTIFICATION

| Generator's Name | Primary Transporter's Name | Treatment, Storage or Disposal Facility |
|---|---|---|
| PMI Laboratories, Inc. | Valley City Refuse Disposal, Inc. | American Chemical Service, Inc. |
| **Site Address** | **Transporters Address** | **Facility Address** |
| 550 Cottage Grove<br>Grand Rapids, MI 49507 | 2650 Thornwood, S.W.<br>Wyoming, MI 49509 | 420 S. Colfax<br>Griffith, IN 46319 |
| **Phone Number** | **Phone Number** | **Phone Number** |
| (616) 452-1441 | (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** |
| MIG 000 001 656 | 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 Alcohol, NOS | Flammable Liquid | 1987 | 08 | 3 | DR | | X | | | 165 | GAL | D001 |
| 2. | Waste Dichloromethane(Methylene Chloride) ORM-A | | 1593 | 13 | 1 | DR | | X | | | 55 | GAL | F002 |
| 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 Caryl L Burke — 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. No. 1 H83,09,10

Subsequent Transporter Vehicle I.D. No's

Transporter Signature ② Jack Pate — Date(s) Received: 02 07 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 — Facility Site EPA I.D. Number: IND 016 360 265 — ☒ Accepted ☐ Rejected — Date Received: 02 08 84

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 119 Te T-63 Rbl 2.8.84

C07412

STATE OF MICHIGAN

R 4896
Rev. 8/81

# WASTE DISPOSAL MANIFEST

[X] Act 64 Waste (HAZARDOUS) [ ] Act 136 Waste [ ] Other

MI 0286485

## IDENTIFICATION

| Generator's Name | Primary Transporter's Name | Treatment, Storage or Disposal Facility |
|---|---|---|
| PMI Laboratories, Inc. | Valley City Refuse Disposal, Inc. | American Chemical Service, Inc. |
| Site Address: 550 Cottage Grove, Grand Rapids, MI 49507 | Transporters Address: 2650 Thornwood, S.W., Wyoming, MI 49509 | Facility Address: 420 S. Colfax, Griffith, IN 46319 |
| Phone Number: (616) 452-1441 | Phone Number: (616) 538-8499 | Phone Number: (219) 924-4370 |
| Generator's Site EPA I.D. Number: MIG 000 001 656 | 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 Alcohol, N.O.S. | Flammable Liquid | 1987 | 08 | 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 Caryl L Burke

Date Shipped: MO. DAY YEAR 3 22 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. 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: 3 22 84

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: 3 26 84

Describe any significant discrepancies between manifest and shipment.

Was a Surcharge Assessed? [ ] Yes [X] 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 + 1-50 GRM 3-26-84

007413

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. MND102243458 — 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: POLAR PAINT & BODY SPEC. 2634 FLORENCE Hwy 61 N. WHITE BEAR LAKE, MN 55110
A. State Manifest Document Number: MN 0016171
B. State Generator's ID:
4. Generator's Phone: 612 426-3032
5. Transporter 1 Company Name: AUTO BODY SUPPLY INC — 6. US EPA ID Number: MN 0 0 2 7 0 3 3 7 7 — C. State Transporter's ID: — D. Transporter's Phone: 612-788-7616
7. Transporter 2 Company Name: ~~STRAND TRUCKING~~ ABC SERVICES — 8. US EPA ID Number: ~~ILD 000 646 810~~ — E. State Transporter's ID: ~~FLS 0170511~~ — F. Transporter's Phone: ~~219-397-8110~~
9. Designated Facility Name and Site Address: AMERICAN CHEM SERV. 420 S COLFAX GRIFFITH, INDIANA 46319 — 10. US EPA ID Number: ~~ILD 098 079 839~~ IND 016 360 265 — G. State Facility's ID: ~~414-657-6222~~ ILL 9180990002 — 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 PAINT RELATED MATERIAL FLAMMABLE LIQUID NA 1263 - F003 | X | 1 | DM | 55 | 400 | 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 governmental regulations, and Minnesota rules.

| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| CLAYTON JON JOHNSON | | 6 13 86 |

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| DOUGLAS A. WEIMER | Douglas A Weimer | 06 13 86 |

18. Transporter 2 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| FRANK LEFS | | 06 20 86 |

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 6 7 86 |

GENERATOR / TRANSPORTER / FACILITY

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.

Minnesota Form PQ-00371-01(10 84)

COPY 4: TSDF RETAIN

012014

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 8 | 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 7 4 4 3 2 3 0 3 | 6 2 7 3 4 | | |

3. Generator's Name and Mailing Address
Polychrome Chemicals Corporation
Cellofilm Division 7252 W. 66th Street
Chicago, IL 60638

A. State Manifest Document Number: INA 0162734

4. Generator's Phone

B. State Generator's ID: 0316001000

5. Transporter 1 Company Name: Mr. Frank, Inc.

6. US EPA ID Number: I L D [illegible]

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 Services P.O. Box 1900
Colfax Ave. at C & O Railroad
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: 9108903002

H. Facility's Phone: 312-766-3400

| 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 | 0 0 1 | T I | 0 3 6 3 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.

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| Steven G. Wentink | Steven Wentink | 0 9 | 0 3 | 8 7 |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| Miguel Garcia | [signature] | 09 | 03 | 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 |
|---|---|---|---|---|
| FRONTEE | [signature] | | | 87 |

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

10 ETSUM

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 0162734

012607

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·0·7·6·4·3·2·3·0·3 | 3·4·3·7·2 | | |

3. Generator's Name and Mailing Address
Polychrome Chemicals Corp.
Cellofilm Division
7252 West 66th Street
Chicago, Illinois 60638

4. Generator's Phone

A. State Manifest Document Number: INA 0154372

B. State Generator's ID: 6316001000

5. Transporter 1 Company Name: Mr. Frank, Inc.
6. US EPA ID Number: I·L·D·0·1·6·3·6·0·2·6·5
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
Colfax Ave at C&O Railroad P.O. BOX 1900
Griffith, Ind. 46319
10. US EPA ID Number: I·N·D·0·1·6·3·6·0·2·6·5
G. State 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. | I. Waste No. |
|---|---|---|---|---|---|
| a. Waste - Flammable Liquid N.O.S., Flammable Liquid, UN 1993 | 0 0 1 | T | 05500 | 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 |
|---|---|---|---|---|
| Steven G. Wentink | Steven G Wentink | 07 | 21 | 87 |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date Month | Day | Year |
|---|---|---|---|---|
| Joe Kooinga | Joe Kooinga | 07 | 21 | 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 |
|---|---|---|---|---|
| [illegible] | [illegible] | 07 | 21 | 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 0154372

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 LOT TSD

012606

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.: ILD074432303 | Manifest Document No.: 4776

2. Page 1 of 9 — 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:
Polychrome Chemical Corp.
Cellofilm Division
7252 W. 66th St. Chicago, IL 60638

A. State Manifest Document Number: INA 0114776

4. Generator's Phone: 312-585-3100

B. State Generator's ID: 0316001000

5. Transporter 1 Company Name: MR. FRANK INC

6. Use EPA ID Number: ILD069506160

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
Colfax Ave. at C & O Railroad P.O. Box 1900
Griffith, IN 46319

10. Use EPA ID Number: IND016360265

G. State 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. | 15. Waste No. |
|---|---|---|---|---|---|
| a. Waste Flammable Liquid N.O.S., Flammable Liquid, UN1993 | 001 | TT | 04700 | 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: Steven Wentink | Signature: Steven Wentink | Date: Month 06 Day 04 Year 87

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Mor Wor[illegible] | Signature: Mor Wor[illegible] | Date: Month 06 Day 04 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 06 Day 04 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 0114776

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

all 211K T50B

DISTRIBUTION:
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PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

012605

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·0·7·4·4·3·2·3·0·3
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
Polychrome Chemicals
7252 W. 66th St., Chicago, IL 60638

A. State Manifest Document Number: INA 0154373

4. Generator's Phone (312) 585-3100

B. State Generator's ID: 0310120010

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 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: 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 | 004 | TT | 1155 | 7 | 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: R.J. Vorrier
Signature: Robert J. Vorrier
Date: Month 07 Day 21 Year 88

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JOE WEBER
Signature: Joe Weber
Date: Month 07 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: FDUNFEE
Signature: FDunfee
Date: Month 07 Day 21 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 0154373

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

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PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

212 TC TSD 7/21/88

0015404

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 8 | 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 7 4 4 3 2 3 0 3 | | | |

3. Generator's Name and Mailing Address
Polychrome Chemicals
7252 W. 66th St.
Chicago, IL 60638

A. State Manifest Document Number: INA 0154374

4. Generator's Phone ( 312 ) 585-3100

B. State Generator's ID: 0310120010

5. Transporter 1 Company Name: Mr. Frank, Inc

6. US EPA ID Number: I L D 0 0 5 0 7 1 6 0

C. State Transporter's ID: 0079

D. Transporter's Phone: (312)596-8377

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
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: 9180650002

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 | DM | 00055 | 1 | D001 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
ALL 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 |
|---|---|---|---|---|
| R.J. Vorrier | | 08 | 22 | 88 |

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| Randy Karlovsky | | 08 | 24 | 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 in Item 19.

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| EDUNFEE | | 08 | 29 | 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 0154374

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

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PAGE 8 (white) TRANSPORTER 2 COPY

211FCT50 9/29M

0015105

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.: ILD074432303 — Manifest Document No.: 5 7 5 7 5
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
Polychrome Chemicals
7252 W. 66th St.
Chicago, IL 60638

4. Generator's Phone (312)

A. State Manifest Document Number: INA 0154375
B. State Generator's ID:
C. State Transporter's ID: 0079
D. Transporter's Phone: (312) 596-3877
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID: 9180890002
H. Facility's Phone: 219-924-4370

5. Transporter 1 Company Name: Mr. Frank
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 Services, Inc
420 S. Colfax Ave
Griffith, IN 46319-0190

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, UN1933 | 001 | TT | 03300 | | |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above: 1 - GALLONS
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: R.J. Vorrier — Signature: R.J. Vorrier — Date: Month 11 Day 19 Year 88

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Randy Kaclovsky — Signature: Randy Kaclovsky — Date: Month 11 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: F DUNFEE — Signature: F Dunfee — Date: Month 11 Day 17 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 0154375

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

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PAGE 8 (white) TRANSPORTER 2 COPY

212TCT50 11/17

0015406

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

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# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: ILD074432303
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
Polychrome Chemicals
7252 W. 66th St.
Chicago, IL 60638
4. Generator's Phone ( )

A. State Manifest Document Number: INA 0267927
B. State Generator's ID: 0310120010

5. Transporter 1 Company Name: Mr. Frank, Inc.
6. Use EPA ID Number: ILD069506160
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 S. Colfax Ave
Griffith, IN 46319-0190
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 Flammable Liquid, N.O.S. Flammable Liquid, UN1993 | 001 | TT | 03100 | 1 | 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

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GENERATOR

Printed/Typed Name: R.J. Vorrier
Signature: Robert J. Vorrier
Date: Month 04 Day 18 Year 89

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Joseph L. Kooinga
Signature: Joseph L Kooinga
Date: Month 04 Day 18 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 A
Signature:
Date: Month 4 Day 18 Year 89

2111C TSD 11/5

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

0016855

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 8 | Information in the shaded areas is not required by Federal law, but Items D, F, H and I are required by State law. |
|---|---|---|---|
| WID 006103899 | 000 05 | | |

3. Generator's Name and Mailing Address
POLYDYNK 1606 PEARL ST. WAUKESHA WI 53186

4. Generator's Phone ( 414 ) 542-8800

A. State Manifest Document Number: INA 0162767

B. State Generator's ID:

5. Transporter 1 Company Name: CHEM CENTRAL
6. Use EPA ID Number: WID 000713669
C. State Transporter's ID:
D. Transporter's Phone: 414/781-2400

7. Transporter 2 Company Name: MR. FRANK INC.
8. Use EPA ID Number: ILD 069506166
E. State Transporter's ID: 0079
F. Transporter's Phone: (800) 642-2201

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
420 S. COLFAX AVE.
GRIFFITH IN 46319
10. Use EPA ID Number: IND 016360265
G. State Facility's ID: IN 9180090006
H. Facility's Phone: (219) 397-1141

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 N.O.S. HAZARD CLASS FLAMMABLE LIQUID UN 1993 | 004 | DM | 220 | 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.

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| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| KEVIN R. HAZEN | Kevin R. Hazen | 10 | 26 | 87 |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| LARRY RUMMEL | Larry Rummel | 10 | 27 | 87 |

18. Transporter 2 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| DAVE VOSS | Dave Voss | 10 | 29 | 87 |

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. SCHMITT | Harold F. Schmitt | 10 | 30 | 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 0162767

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865 4-20ft-T.50 11/87 gm

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PAGE 6 (canary) GENERATOR COPY
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PAGE 8 (white) TRANSPORTER 2 COPY

012604

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 136572

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Anchor Coatings
2. EPA IDENTIFICATION NO.: WID006103899
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 1606 Pearl St
5. CITY, STATE, ZIP CODE: Waukesha Wi 53186
6. TELEPHONE NUMBER: (414) 542-8072

| 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 X | 111 | Flammable Liquid N.O.S. | Flammable Liquid | UN 1993 | 1. Solid 3. Mixture 2. Liquid [2] | D001 D004 D008 | |
| | | | | | 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): Thomas J. Kapusta, Vice-President
17. DATE SHIPPED M D Y: / /

## TRANSPORTER SECTION

18. COMPANY NAME:
19. EPA IDENTIFICATION NO.:
20. P.O. BOX OR STREET ADDRESS:
21. CITY, STATE, ZIP CODE:
22. TELEPHONE NUMBER: ( ) -
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:

I hereby certify that the above named materials and indicated quantity(ies) has (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: IND016360265
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:

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):
40. Date Accepted: 8/9/83

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

On dock 8.9.83

HAZARDOUS WASTE FACILITY

To 204K
T-50 GAM 8/10/83

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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.9.8.1.7.9.5.3.8.8 — Manifest Document No.: 06449

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: Portage Ind. 1325 Adams St Portage, Wisconsin

A. State Manifest Document Number: INA 0126491

4. Generator's Phone: (608) 742-7123 53901

B. State Generator's ID:

5. Transporter 1 Company Name: CBC Transport

6. Use EPA ID Number: W.I.D.0.4.7.2.5.9.2.8.8

C. State Transporter's ID: 11556

D. Transporter's Phone: (414) 764-7005

7. Transporter 2 Company Name: E&K Hazardous Waste Services Inc

8. Use EPA ID Number: W.I.D.9.8.2.2.1.9.5.2.9

E. State Transporter's ID: 11608

F. Transporter's Phone: (414) 458-6030

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

10. Use EPA ID Number: F.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. RQ, Waste 1,1,1, Trichloroethane ORM-A, UN2831, (F001) | 001 | DM | 0.0020 | 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.

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 Putnam — Signature: Kevin Putnam — Date: Month 03 Day 14 Year 88

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Bruce Benoit Env. Tech. — Signature: [signature] — 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: Harrold F. Schmidt — Date: Month 03 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 0126491

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
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PAGE 6 (canary) GENERATOR COPY
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PAGE 8 (white) TRANSPORTER 2 COPY

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INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
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P.O. Box 7035
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# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: IND016370793
Manifest Document No.: 7001
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: PORTER CLEANERS 4524 HOHMAN AVE HAMMOND, IN 46327
4. Generator's Phone: 219 932 3331
A. State Manifest Document Number: INA 0117764
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: PORTER CLEANERS
6. Use EPA ID Number:
7. Transporter 2 Company Name:
8. Use EPA ID Number:
9. Designated Facility Name and Site Address: AMERICAN CHEMICAL SERVICE 4205 COLTA COVE GRIFFITH IN 46315
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 PETROLEUM NAPHTHA COMBUSTIBLE LIQUID UNIT 55 | 7 | DR | 385 | | [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:

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Printed/Typed Name: DENNIS J PORTER
Signature: [signature]
Date: Month 8 Day 3 Year 7

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: FRANK [illegible]
Signature: [signature]
Date: Month 8 Day 3 Year 7

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]
Month 8 Day 4 Year 7

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 0117764

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State Form 11865

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DIVISION OF HAZARDOUS MATERIAL AND WASTE MANAGEMENT

KENTUCKY DEPARTMENT FOR NATURAL RESOURCES AND ENVIRONMENTAL PROTECTION

# HAZARDOUS WASTE MANIFEST

MANIFEST DOCUMENT NUMBER 001-1981

## IDENTIFICATION INFORMATION

| | ID CODE | NAME | ADDRESS | TELEPHONE | DATE |
|---|---|---|---|---|---|
| GENERATOR | KYD006382253 | Porter Paint Co.Plt #1 | 400 South 13 St. Lou.Ky. 40201 | (502)588-9200 | 3/16/81 |
| TRANSPORTER | ILD069506160 | Mr. Frank Ind.Disposal | 201 W. 155 St. Chicago Ill. | (312)596-3377 | 3/16/81 |
| TSDF* | IN001636029 | Amer.Chem. Services | 8420 S. Colfax Griffith Ind. | 219 924 4370 | 3/17/81 |

## WASTE INFORMATION

| SHIPPING DESCRIPTION | HAZARD CLASS DOT | EPA | KY | PHYSICAL STATE | QUANTITY | UNITS OF MEASURE | CONTAINERS NUMBER | TYPE |
|---|---|---|---|---|---|---|---|---|
| Dirty Thinner (Waste Solvents) | FL | I,T | I,T | Liquid | 2700 | gallons | | tank wagon |
| | | | | | | | | |
| | | | | | | | | |

## EMERGENCY INFORMATION

IMMEDIATE RESPONSE INFORMATION

Pick up all available material and contaminated soil with sand. Flush balance with water. Dam up to prevent any runoff. Repack in DOT approved drums and call disposedr at (502) 588-9200. Call Fire Dept and State Fire marshall. DO NOT DISCUSS WITH NEWS MEDIA.

*IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, US COAST GUARD, 800-424-8802 FOR EMERGENCY ASSISTANCE*

SPECIAL HANDLING INSTRUCTIONS

Avoid prolonged contact with skin. Wash with large volumes of water. Avoid breathing vapors.

COMMENTS

X

## CERTIFICATIONS

*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, THE U.S. ENVIRONMENTAL PROTECTION AGENCY, AND THE KENTUCKY DIVISION OF HAZARDOUS MATERIAL AND WASTE MANAGEMENT.*

Joyce Specht-Mgr-Govt Compliance — AUTHORIZED REPRESENTATIVE OF GENERATOR

[signature] — GENERATOR REPRESENTATIVE'S SIGNATURE

3/16/81 — DATE

*THIS IS TO CERTIFY ACCEPTANCE OF THE HAZARDOUS WASTE SHIPMENT DESCRIBED ABOVE.*

DONALD HBUIT — AUTHORIZED REPRESENTATIVE OF TRANSPORTER

[signature] — TRANSPORTER REPRESENTATIVE'S SIGNATURE

3-16-81 — DATE

*THIS IS TO CERTIFY ACCEPTANCE OF THE HAZARDOUS WASTE SHIPMENT DESCRIBED ABOVE FOR ☐ TREATMENT ☐ STORAGE OR ☒ DISPOSAL*

[signature] — AUTHORIZED REPRESENTATIVE OF TSDF

F DUNFEE — TSDF REPRESENTATIVE'S SIGNATURE

3/17 — DATE

TO EAST ACT 3/17/81 T-50 Jim Murphy

*TREATMENT, STORAGE, OR DISPOSAL FACILITY

HMWM-2

000679

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

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# 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 A D 0 7 5 8 3 5 0 8 2 | | | |

**GENERATOR**

3. Generator's Name and Mailing Address
Pospisil Painting, Inc.
728 58th Ave. S.W.; Cedar Rapids, Ia. 52404

A. State Manifest Document Number: INA 0135279

4. Generator's Phone ( 319 ) 362-4356

B. State Generator's ID:

5. Transporter 1 Company Name: Watts Trucking Service, Inc.

6. US EPA ID Number: I L D 0 4 5 3 7 5 1 0 0

C. State Transporter's ID: 0 2 2 5

D. Transporter's Phone: 309-786-3421

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: I N D 0 1 6 3 8 3 6 5 6 0 2

G. State Facility's ID:

H. Facility's Phone: 219-924-4356

| 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. (D001) UN1993 Flammable Liquid | 12 | DM | 660 | GAL | D001 |
| b. Grouped - 90- | | | 495 | GAL | |
| c. Rejected 3 Dr. | | | | | |
| 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 |
|---|---|---|---|---|
| Nancy J. Kendall, Secretary | | 11 | | |

**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
Rejected 3 Dr - Material Not Pumpable

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 Schmidt | HAROLD F Schmidt | 11 | 3 | 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 0135279

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

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# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: IAD075835082
Manifest Document No.: 00001
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
Pospisil Painting, Inc.
728-58th Ave. S.W. Ct.; Cedar Rapids, Ia. 52404
4. Generator's Phone 319 362-4356

A. State Manifest Document Number: INA 0135286
B. State Generator's ID:
C. State Transporter's ID: 0225
D. Transporter's Phone: 309-788-3421
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: Watts Trucking Service, Inc.
6. Use EPA ID Number: ILD045376100
7. Transporter 2 Company Name:
8. Use EPA ID Number:
9. Designated Facility Name and Site Address
American Chemical Services, INC.
C&O Railroad & 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. | Waste No. |
|---|---|---|---|---|---|
| a. Waste Flammable Liquid, N.O.S. UN1993 Flammable Liquid | 22 | DM | 1,210 | 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

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Printed/Typed Name: Rose Ann Pospisil, Sec.-Treas.
Signature: [signature]
Month 6 Day 16 Year 87

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: William L Atkins
Signature: William L. Atkins
Month 6 Day 16 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: [signature]
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 0135286

EPA Form 8700-22 (Rev. 9-86)
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PAGE 8 (white) TRANSPORTER 2 COPY

MRC 22-204R TSD B

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INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
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# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I A D 0 7 5 8 3 5 0 8 2 — Manifest Document No. 0 0 0 0 0 — 2. Page 1 of 1 — Information in the shaded areas is not required by Federal law, but items D, F, H and J are required by State law.

3. Generator's Name and Mailing Address
Pospisil Painting, Inc.
728 58th Ave. S.W. Ct.; Cedar Rapids, In. 52404
309 362-4358

A. State Manifest Document Number: INA 0230207

B. State Generator's ID

4. Generator's Phone

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: 0225

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, 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. | Waste No. |
|---|---|---|---|---|---|
| a. "RQ" Waste Flammable Liquid, N.O.S. (D001) UN1993 Flammable Liquid | 015 | D M | 00825 | GALS | D001 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

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

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Paul Myers — Signature: Paul Myers — Date: Month Day Year: 06 7 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: ALVIN WHITAKER — Signature: Alvin Whitaker — Date: Month Day Year: 07 06 88

GENERATOR / TRANSPORTER / FACILITY

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INA 0230207

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14-123RT63 7/7
1-204RT50 7/7

0015402

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# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: I.A.D.0.7.5. 8 3 5 0 8 2 — Manifest Document No.: [illegible]
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
Pospisil Painting
728 58th Ave. SW Ct.; Cedar Rapids, Ia. 52404

4. Generator's Phone ( 319 ) 362-4356

A. State Manifest Document Number: INA 0296859
B. State Generator's ID:

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, 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: 21
H. Facility's Phone: 219-924-4356

| 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. (D001) UN1993 Flammable Liquid | 017 | DM | 00935 | GALS | 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
F003 & F005 Also applies to this Shipment

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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.

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

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Paul Myers Signature: Paul Myers 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: HARROLD F. Schmidt Signature: Harold F. Schmidt Date: Month Day Year 03 22 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)

16-123TCT63 3/23
1-204TCT50 3/23

COPY 5. TSD COPY

0016853

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 A D 0 7 5 8 3 5 0 8 2 — Manifest Document No.: 00603
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
POSPISIL PAINTING
728 58th AVE SW CT., CEDAR RAPIDS, IA ~~XXXXX~~ 52404

4. Generator's Phone ( 319 ) 362-4356

A. State Manifest Document Number: INA 0371553
B. State Generator's ID:

5. Transporter 1 Company Name: S 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: 0225
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, INC.
420 SO. COLFAX AVE
GRIFFITH, IN. 46319

10. Use EPA ID Number: IN D 0 1 6 3 6 0 2 6 5
G. State Facility's ID:
H. Facility's Phone: (319) 924-4356

| 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. (D001) FLAMMABLE LIQUID UN1993 | 0.2.1 | D M | 0.1.1.55 | G | D001 |
| b. | | | | G | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above: F003 + F005 Alternoolyl 6 [illegible] Shipment
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 [illegible] Day [illegible] Year [illegible]

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Paul Myers — Signature: Paul Myers — Date: Month 1 1 Day 1 3 Year 8 9

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

19. Discrepancy Indication Space
1 8 123TC T63 11/17/89
2-204TC T50 11/17/89
1- MARINE SHALE 2/26/90 010750

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 16 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 0371553

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

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# HAZARDOUS WASTE MANIFEST

A1001
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 | | The Post Tribune 1065 Broadway Gary, IN. 886-5000 | |
| TRANSPORTER # 1 | IND009842824 | Landgrebe Motor Transport Inc. STRD. 130W. Valpo. IN. 219 4624181 | |
| TRANSPORTER # 2 (if required) | | | |
| TSDF TREATMENT STORAGE OR DISPOSAL FACILITY | IND016360265 | ~~American Chemical Service Inc. P.O. Box 190 Griffith, IN.~~ ALTERNATE | 7/21/81 |
| 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) |
|---|---|---|---|---|---|---|---|---|---|---|
| 12 | | D001 | Flammable Liquid NOS | 1993 | | | | | | |

**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

UNLOADED AT DOCK 7/21/81 TO #20 KETTLE 7/21/81 T-50 9PM

5

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

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000678

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

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**UNIFORM HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.: MND980990667
Manifest Document No.:
2. Page 1 of 8
Information in the shaded areas is not required by Federal law

3. Generator's Name
Postier & Eggers Buick Mazda
Highway 63 & 37th Street, N.E., Rochester, MN 55903

4. Generator's Phone (507) 289-3996

A. State Manifest Document Number: IN 034271
B. State Generator's ID:
C. State Transporter's ID: 0311
D. Transporter's Phone: 312-385-8440
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
6. US EPA ID Number: ILD000646810
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. | Type | 13. Total Quantity | 14. Unit Wt/Vol | Waste No. |
|---|---|---|---|---|---|
| RQ WASTE PAINT RELATED MATERIAL (F003) FLAMMABLE LIQQID NA1263 | 1 | DM | 55 | 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: [illegible] Signature: [illegible] Month Day Year: 08 21 2018

GENERATOR / TRANSPORTER / FACILITY

IN 034271

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

116TCT63 8/15

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0015400

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

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: MND 980 990 667

Manifest Document No.: 11168D

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
Postier & Eggers Buick Mazda
HWY. 63 & 37th St., NE, Rochester, MN. 55903

4. Generator's Phone ( 507 ) 289-3996

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: ABDO 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) | 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 | | 2 | dm | 110 | 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: Steve L Gr[illegible]

Signature: [signature]

Month 12 Day 10 Year 88

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Ronald R Bullard

Signature: [signature]

Month 12 Day 6 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 in Item 19.

Printed/Typed Name: Whitaker A

Signature: [signature]

Month 12 Day 12 Year 88

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 12/12

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0015401

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

**UNIFORM HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.: MND 980 990 667
Manifest Document No.: 051589F
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Postier & Eggers Buick Mazda
Hwy. 63 & 37th St., N.E., Rochester, MN 55903
4. Generator's Phone ( )

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 219-924-4380

5. Transporter 1 Company Name: ADCO Express
6. US EPA ID Number: ILD 040 7267 354
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

| | 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 | 3 | dm | 167 | 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 |
|---|---|---|---|---|
| VINCENT C. AGUILAR | | 05 | 16 | 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 | Signature | Month | Day | Year |
|---|---|---|---|---|
| WHITAKER A | | 5 | 22 | 89 |

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

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

ID 47CT63 523

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

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: MND980990667 — Manifest Document No.: 8229E

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
Postier & Eggers Buick Mazda
Hwy 63 & 37th St., N.E., Rochester, MN 55903

4. Generator's Phone ( 507 ) 289-3996

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: ADCOM EXPRESS

6. US EPA ID Number: ILD047267364

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: 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. RQ WASTE PAINT RELATED MATERIAL (F003) FLAMMABLE LIQUID NA 1263 | X | 002 | dm | 110 | 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: Keith Augustin — Signature: Keith Augustin — Month Day Year: 08 23 89

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: STEPHEN SEERUP — Signature: Stephen Seerup — Month Day Year: 08 23 89

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: Whitaker A — Signature: A Whitaker — Month Day Year: 8 28 89

GENERATOR — TRANSPORTER — FACILITY

Style F15 REV-6 LABELMASTER, Div. of AMERICAN LABELMARK CO., CHICAGO, IL 60646

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

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: MND980890667 — Manifest Document No.: 11300

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
Postier & Eggers Buick Mazda
Hwy. 63 & 37th St.,N.E., Rochester, MN 55903

4. Generator's Phone ( 507 ) 289-3996

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: ADCOM EXPRESS

6. US EPA ID Number: ILD047257364

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: IND016360265

G. State Facility's ID

H. Facility's Phone: 299-924-4370

| 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 | | 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: Terry Burchart — Signature: Terry Burchart — Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: STEPHEN SEERUP — Signature: Stephen Seerup — Month Day Year: 12 9 89

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: Whitaker A — Signature: A Whitaker — Month Day Year: 12 11 89

GENERATOR

TRANSPORTER

FACILITY

Style F15 REV-6 LABELMASTER, Div. of AMERICAN LABELMARK CO., CHICAGO, IL 60646

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

126 OCT 63 12/12

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

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: MND980990667 — Manifest Document No.: 31900

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

3. Generator's Name and Mailing Address
Postier & Eggers Buick Mazda
Hwy 63 & 37th St. N.E. Rochester, MN 55903

4. Generator's Phone ( 507 ) 289-3996

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 Servie
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. | Type | 13. Total Quantity | 14. Unit Wt/Vol | I. Waste No. |
|---|---|---|---|---|---|---|
| a. | RQ WASTE PAINT RELATED MATERIAL (F003 & F005) FLAMMABLE LIQUID NA1263 | 2 | DM | 119 | 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 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: 3 21 90

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: STEPHEN SEERUP — Signature: Stephen Seerup — Month Day Year: 03 21 90

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: A Whitaker — Signature: A Whitaker — Month Day Year: 3 28 90

GENERATOR — TRANSPORTER — FACILITY

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 4/8

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0018304

PRINTED BY: HAZARDOUS MATERIALS PUBLISHING CO., KUTZTOWN, PA. 19530, 215-683-6721

| REPORT ANY UNRECOVERED DISCHARGE EQUAL TO OR IN EXCESS OF EACH HAZARDOUS WASTE ASSIGNED "RQ" VALUE TO NATIONAL RESPONSE CENTER 800-424-8802 | REPORTABLE QUANTITY VALUE 1 = 5000 LBS. 2 = 1000 LBS. 3 = 100 LBS. 4 = 10 LBS. 5 = 1 LB. | CHEM TREC = 800-424-9300; EPA HOTLINE = 800-424-9346; CDC POISON CENTER = 404-635-5313; DOT = 202-426-1830 | PLACARDS PROVIDED |
|---|---|---|---|

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 and Mailing Address
Power Box Inc. 1718 E. 7th Street
Mishawaka, IN. 46544

4. Generator's Phone (219 )259-6376

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Landgrebe Motor Transit
6. US EPA ID Number: IND 009842824

C. State Transporter's ID

D. Transporter's Phone 219-[illegible]62 4184

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

10. US EPA ID Number: IND 0.1.6.3.6.0265

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. |
|---|---|---|---|---|---|---|
| GENERATOR a. | Flammable Liquid N.O.S. Ignitable UN 1993 | 2 | DN | 110 | 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.

| Printed/Typed Name | Signature | Date Month Day Year |
|---|---|---|
| LARRY MARSHALL | Larry Marshall | 4 17 85 |

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 | 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 | 4 17 85 |

EPA Form 8700-22 (3-84)

Frank Price 204 E T-50 4/18/85

#2 - TREATMENT, STORAGE, DISPOSAL FACILITY COPY

038131

PRINTED BY: HAZARDOUS MATERIALS PUBLISHING CO., KUTZTOWN, PA. 19530, 215-683-6721

| REPORT ANY UNRECOVERED DISCHARGE EQUAL TO OR IN EXCESS OF EACH HAZARDOUS WASTE ASSIGNED "RQ" VALUE TO NATIONAL RESPONSE CENT: 800-424-8802 | REPORTABLE QUANTITY VALUE<br>1 = 5000 LBS. 4 = 10 LBS.<br>2 = 1000 LBS. 5 = 1 LB.<br>3 = 100 LBS. | CHEM TREC = 800-424-9300<br>EPA HOTLINE = 800-424-9346<br>CDC POISON CENTER = 404-635-5313<br>DOT = 202-426-1[illegible] | PLACARDS PROVIDED |
|---|---|---|---|

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 and Mailing Address
Power Box Inc. 1718 E. 7th Street
Mishawaka, IN. 46544
4. Generator's Phone 219 ) 259-6376

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

5. Transporter 1 Company Name: Landgrebe Motor & Transit
6. US EPA ID Number: IND.009842824
C. State Transporter's ID
D. Transporter's Phone 219-462-4184

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
10. US EPA ID Number: IND.0.1.6.3.6.0265
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. Flammable Liquid N.O.S. Ingitable UN 1993 | | DN | 2 | 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.

| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| Larry Marshall | Larry Marshall | 10 1 85 |

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 | Signature | Date (Month Day Year) |
|---|---|---|
| LANDGREBE MOTOR TRANSPORT INC. | Jim T Jean Thompson | 10 1 85 |

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 | 10 12 85 |

EPA Form 8700-22 (3-84)

204 ET-50

#2 - TREATMENT, STORAGE, DISPOSAL FACILITY COPY

U05100

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

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

GENERATOR

3. Generator's Name and Mailing Address
Power Box Inc. 1718 E. Seventh St.
Mishawaka, IN. 46544
4. Generator's Phone ( 219 ) 259-6376

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Landgrebe Motor Transit
6. US EPA ID Number: IND 009842824

C. State Transporter's ID

D. Transporter's Phone: 219-462-4184

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
10. US EPA ID Number: IND 01636 0265

G. State Facility's ID

H. Facility's Phone: 1-219-924-4370

| 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. Flammable Liquid N.O.S. Ingitable UN1993 | | | DR | @ 2 | 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 |
|---|---|---|---|---|
| Larry Marshall | Larry Marshall | 1 | 23 | 86 |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| Landgrebe Motor Transit | | 1 | 23 | 86 |

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 |
|---|---|---|---|---|
| FRANK PRICE | Frank Price | 1 | 24 | 86 |

Style F15R-6 Labelmaster, Div. of American Labelmark Co. Inc. 60646

EPA Form 8700-22 (Rev. 4-85) Previous edition is obsolete.

204 RT-50

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012010

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Form Approved. OMB No. 2000-0404. Expires 7-31-86

**UNIFORM HAZARDOUS WASTE MANIFEST**

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

**GENERATOR**

3. Generator's Name and Mailing Address
Power Box Inc. 1718 E. Seventh St.
Mishawaka, IN. 46544
4. Generator's Phone ( 219 ) 259-6376

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

5. Transporter 1 Company Name: Landgrebe Motor Transit | 6. US EPA ID Number: IND 009842842 | C. State Transporter's ID | D. Transporter's Phone: 219-462-4284

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 | 10. US EPA ID Number: IND 01636 0265 | 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. Flammable Liquid N.O.S. Ingitable UN 1993 | | 3 | DR | 165 | 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: Larry Marshall | Signature | Month 10 | Day 9 | Year 91

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Landgrebe Motor Transit | 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 10 | Day 10 | Year 91

Style F15R-6 Labelmaster, Div. of American Labelmark Co. Inc. 60646

EPA Form 8700-22 (Rev. 4-85) Previous edition is obsolete.

125R763

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012011

BY: HAZARDOUS MATERIALS PUBLISHING CO., KUTZTOWN, PA. 19530, 215-683-6721

| REPORT ANY UNRECOVERED DISCHARGE EQUAL TO OR IN EXCESS OF EACH HAZARDOUS WASTE ASSIGNED "RQ" VALUE TO NATIONAL RESPONSE CENTER 800-424-8802 | REPORTABLE QUANTITY VALUE 1 = 5000 LBS. 2 = 1000 LBS. 3 = 100 LBS. 4 = 10 LBS. 5 = 1 LB. | CHEM TREC = 800-424-9300; EPA HOTLINE = 800-424-9346; CDC POISON CENTER = 404-635-5313; DOT = 202-426-1830 | PLACARDS PROVIDED |
|---|---|---|---|

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.: APPLIED FOR
Manifest Document No.:
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

GENERATOR

3. Generator's Name and Mailing Address
Power Box Inc.
1718 E. Seventh Street
Mishawaka, Indiana 46544

4. Generator's Phone: (219) 259-6376

A. State Manifest Document Number: ACS 00128
B. State Generator's ID:

5. Transporter 1 Company Name: Landgrebe Motor Transit
6. US EPA ID Number: IND 009842842
C. State Transporter's ID:
D. Transporter's Phone: 219 462-4184

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
10. US EPA ID Number: IND 01636 0265
G. State Facility's ID: 1719/924-4370///
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. Flammable Liquid N.O.S. Ingitable UN 1993 | 5 | DR | 275 | 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.

Printed/Typed Name: John Coomer
Signature: John Coomer
Date: Month 1 Day 5 Year 88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Landgrebe Motor Transit
Signature: Paul Smallenger
Date: Month 1 Day 5 Year 88

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 Schmider
Signature: Harrold F Schmider
Date: Month 01 Day 06 Year 88

EPA Form 8700-22 (3-84) S-123K T-63 1/7/88

#2 - TREATMENT, STORAGE, DISPOSAL FACILITY COPY

0015335

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·0·4·1·9·3·7·8·0·6 | 0·0·0·0·1 | | |

3. Generator's Name and Mailing Address
Power Box 1718 E. Seventh St.
Mishawaka, IN 46544
4. Generator's Phone (219) 259-6376

A. State Manifest Document Number: INA 0249597
B. State Generator's ID:

| 5. Transporter 1 Company Name | 6. US EPA ID Number | C. State Transporter's ID |
|---|---|---|
| Landgrebe Motor Transit | I·N·D·0·0·9·8·4·2·8·4·2 | |

D. Transporter's Phone 219-462-8284

| 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 | 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. Flammable Liquids N.O.S. Ingitable UN 1993 | 0 0 4 | D M | 0 0 2 2 0 | L | F003-005 |
| 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.

GENERATOR

| Printed/Typed Name | Signature | Date Month | Day | Year |
|---|---|---|---|---|
| Dennis Janiszewski | | 12 | 14 | 88 |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date Month | Day | Year |
|---|---|---|---|---|
| Landgrebe Motor Transit | | 12 | 16 | 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 |
|---|---|---|---|---|
| WHITAKER A | | 12 | 16 | 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

123RT63 12/19

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 0249597

0015339

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

PLEASE PRINT OR TYPE IND (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.: 9 1 8 1 4 1 6 8 1 9 . . 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: Power Box Inc 1718 E 7th St Mishawaka, IN 46544
4. Generator's Phone (219) 259-6376
A. State Manifest Document Number: INA 0317993
B. State Generator's ID: 041 [illegible]
5. Transporter 1 Company Name: Landgrebe Motor Transport Inc
6. Use EPA ID Number: IND069842824
C. State Transporter's ID: 1875
D. Transporter's Phone: 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 Inc 420 S. Colfax Ave Griffith, IN 46319
10. Use EPA ID Number: IND016360265
G. State Facility's ID: 016360265
H. Facility's Phone: 1-924-4370

| 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. Flammable Liquid Nos 1993 | 14 15 | DR | 770 15 | 7700 | 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.

Printed/Typed Name: LARRY MARSHALL
Signature: Larry Marshall
Date: Month 11 Day 14 Year 89

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Landgrebe Steven J Ferenci
Signature: Landgrebe Steven J Ferenci
Date: Month 11 Day 14 Year 89

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

19. Discrepancy Indication Space: 13123 IC 63 11/17
1-MARINE SHALE 3/6/90 010881

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 N Day 15 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 0317993

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY

0016849

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.918416819 | Manifest Document No.: 00001 | 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
Power Box, Inc
1718 E 7th Street / P O Box 433 / Mishawaka, IN 46544
4. Generator's Phone ( 219 ) 259-6376

A. State Manifest Document Number: INA 0249600
B. State Generator's ID: [illegible] 041937806
C. State Transporter's ID: 1875
D. Transporter's Phone: 462-4181
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID: 016360265
H. Facility's Phone: 1-924-4370

5. Transporter 1 Company Name: Landgrebe Motor Transp Inc
6. Use EPA ID Number: IND009842824
7. Transporter 2 Company Name:
8. Use EPA ID Number:
9. Designated Facility Name and Site Address
American Chemical Service Inc
420 S 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 Paint Thinner Flammable Liquid Nos 1993 | 3 | DR | 165.00 gal | | F005 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: Larry Marshall — Signature: [signature] — Date: Month 4 Day 10 Year 90

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials — Printed/Typed Name: Steven J. Francis / Landgrebe Trnas — Signature: [signature] — Date: Month 4 Day 10 Year 90
18. Transporter 2 Acknowledgement of Receipt of Materials — Printed/Typed Name: — Signature: — Date: Month . Day . Year .

FACILITY
19. Discrepancy Indication Space
204 DET 50 4/17
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: STEVE KULAVIC — Signature: [signature] — Date: Month 04 Day 11 Year 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 0249600

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

DISTRIBUTION:
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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

001302

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.: 91 8 1 4 1 6 8 19
Manifest Document No.: 00001
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
Power Box Inc.
1718 E. 7th Street/P.O. Box 433
Mishawaka, IN 46544
4. Generator's Phone (219) 259-6376

A. State Manifest Document Number: INA 0249599
B. State Generator's ID: 041937806

5. Transporter 1 Company Name: Landgrebe Motor Transp Inc
6. Use EPA ID Number: IND009842824
C. State Transporter's ID: 1875
D. Transporter's Phone: 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 Inc
420 S. Colfax Avenue
Griffith, IN 46319
10. Use EPA ID Number: IND016360265
G. State Facility's ID: 016360265
H. Facility's Phone: 1-924-4370

| 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 Thinning Flammable Liquid Nos 1993 | 3 | DF | 165 GL | 105 | 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.

Printed/Typed Name: Larry Marshall
Signature: [signature]
Date: Month 1 Day 17 Year 90

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Landgrebe Wayne Heath
Signature: Landgrebe Wayne Heath
Date: Month 1 Day 17 Year 90

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

19. Discrepancy Indication Space
123TCT63 1/15

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 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 0249599

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

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PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
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PAGE 6 (canary) GENERATOR COPY
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PAGE 8 (white) TRANSPORTER 2 COPY

0018303

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. MID105747041 — 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
POWER PLAY BOATS INC
2225 - 112th AVE
HOLLAND, MI 49424
4. Generator's Phone (616) 772-9474

A. State Manifest Document Number: MI 0707756
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: VALLEY CITY REFUSE
6. US EPA ID Number: MID055855373
7. Transporter 2 Company Name
8. US EPA ID Number
9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE INC
420 S COLLAY AVE
GRIFFITH, INDIANA 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 | I. Waste No. | N/H |
|---|---|---|---|---|---|---|---|---|
| a. | X | IMMABLE LIQUID UN 1090 | | | | | | |
| | | BED ACETONE SOLVENT N.D.S. | 010 | DM | 00555 | 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) |
|---|---|---|
| KEVIN L. HIRDES | Kevin L Hirdes | 07 10 86 |

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| Arnold Dykstra | Arnold Dykstra | 07 10 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) |
|---|---|---|
| EDWIN FEE | F Dunfee | 7 14 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

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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. (12 CPI)

Form Approved. OMB No. 2000-0404. Expires 7-31-86

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MID106747041 Manifest Document No. 1
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
POWER PLAY BOAT CO.
2385 112th Ave.
Holland, MI 49423

4. Generator's Phone (616) 772-9474

A. State Manifest Document Number M 0707755
B. State Generator's ID

5. Transporter 1 Company Name
~~Thermo Service Inc~~

6. US EPA ID Number
~~MID 072724015~~

C. State Transporter's ID
D. Transporter's Phone

7. Transporter 2 Company Name
Waste Oil Pick Up

8. US EPA ID Number
MID 015281575

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
AHERON CHEMICAL SERVICE INC.
420 S. COLFAX AVE
GRIFFITH, INDIANA 46319

10. US EPA ID Number
IND 063602665

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. | X FLAMMABLE LIQUID, N.O.S. (USED ACETONE SOLVENT) UN 1993 | 002 | DM | 0120 | 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
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.

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) |
|---|---|---|
| TODD KAMPS | | |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| James Loots | James Loots | 04 09 86 |

18. Transporter 2 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| | | |

FACILITY

19. Discrepancy Indication Space
2 Drums Solid J.L.

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 | | 04 09 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)

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PR 5110
Rev. 4/85

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012592

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. |
|---|---|---|---|
| IN 1 D1 0 67 8 70 4 1 | | | |

3. Generator's Name and Mailing Address
Power Play Boats, Inc.
2385-112th Ave.
Holland, MI 49424

A. State Manifest Document Number: INA 0113911

4. Generator's Phone: 616 772-9474

5. Transporter 1 Company Name: Haviland Products Co.

6. Use EPA ID Number: H I D 0 0 6 0 2 8 4 9 2

B. State Generator's ID

C. State Transporter's ID

D. Transporter's Phone: 616-361-6691

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 Co.
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. | Waste No. |
|---|---|---|---|---|---|
| a. Waste Acetone, Flamable Liquid UN 1090 | 5 | DM | 275 | 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

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GENERATOR

| Printed/Typed Name | Signature | Date Month | Day | Year |
|---|---|---|---|---|
| | | 8 | 2 | 87 |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date Month | Day | Year |
|---|---|---|---|---|
| KEITH SAVAGE SR | | 8 | 2 | 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 | | 8 | 4 | 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 0113911

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865
5 12/87 T-63 8/31/87

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PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

012599

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

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Form Approved OMB No. 2000 0404 Expires 7 31 86

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MID106747041 — Manifest Document No.

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

3. Generator's Name
Power Play Boats, Inc.

4. Generator's Phone (II)
2385 112th Avenue
Holland, MI 49424
616-772-9474

A. State Manifest Document Number
IN 093071

B. State Generator's ID

5. Transporter 1 Company Name
Haviland Products Co.

6. US EPA ID Number
MIDO06028492

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 Co.
Griffith, IN 46319

10. US EPA ID Number
INDO16360265

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. FLAMMABLE LIQUID UN 1090 USED ACETONE SOLVENT N.O.S. | 110 | DR | 1515 | 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

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GENERATOR

Printed/Typed Name: Jon VanTil — Signature — Month 11 Day 12 Year 87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials — Printed/Typed Name — Signature — Date Month 11 Day 12 Year 87

18. Transporter 2 Acknowledgement of Receipt of Materials — Printed/Typed Name — Signature — Date Month 11 Day 12 Year 87

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 12 Day 1 Year 87

IN 093071

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

T.S.D. DETACH AND RETAIN THIS COPY

10-118E TG3 6

012594

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

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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.: MID106747041
Manifest Document No.:
2. Page 1 of 1
Information in the shaded areas is not required by Federal law

3. Generator's Name
Power Play Boats, Inc.
2385 112th Avenue
Holland, MI 49424

4. Generator's Phone
616-772-9474

A. State Manifest Document Number: IN 093196
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 Co.
6. US EPA ID Number: MID006028492
7. Transporter 2 Company Name:
8. US EPA ID Number:
9. Designated Facility Name and Site Address: American Chemical Co. 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. Flammable Liquid UN 1090 Used Acetone Solvent N.O.S. | 9 | 0 | 470 | 91 | 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.

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

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

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

GENERATOR — TRANSPORTER — FACILITY

IN 093196

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

T.S.D. DETACH AND RETAIN THIS COPY

MRK 9-12-2K TG3 B

012595

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

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Form Approved OMB No. 2000 0404 Expires 7 31 86

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: MID106747041
Manifest Document No.:
2. Page 1 of 1
Information in the shaded areas is not required by Federal law

3. Generator's Name
Power Play Boats, Inc.
2385 112th Ave.
Holland, MI 49424
4. Generator's Phone ( 616 ) 772-9474

A. State Manifest Document Number: IN 093073
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 Co.
6. US EPA ID Number: MID006028492
7. Transporter 2 Company Name:
8. US EPA ID Number:
9. Designated Facility Name and Site Address: American Chemical Co. Griffith, IN 46319
10. US EPA ID Number: IN0016360265

| 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 UN 1090 USED ACETONE SOLVENT N.D.S. | 10 | Drums | 522 | gal | F-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

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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: 05 20 87

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: [illegible] Signature: [illegible] Month Day Year: 05 20 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: [illegible] Month Day Year:

GENERATOR / TRANSPORTER / FACILITY

IN 093073

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

MRK T.S.D. DETACH AND RETAIN THIS COPY 10-121E T63B

012597

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 D 1 0 6 7 4 7 0 4 1 | | | |

3. Generator's Name and Mailing Address
Power Play Boats, Inc.
2385 112th Ave.
Holland, MI 49424

4. Generator's Phone (616) 772-9474

A. State Manifest Document Number: INA 0113910

B. State Generator's ID:

5. Transporter 1 Company Name: Haviland Products Co.

6. US EPA ID Number: I D D 0 6 0 2 8 4 9 2

C. State Transporter's ID:

D. Transporter's Phone: 616-361-6691

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 Co.
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. | Type | 13. Total Quantity | 14. Unit Wt/Vol. | Waste No. |
|---|---|---|---|---|---|
| a. Waste Acetone, Flamable Liquid UN 1090 | 4 | DM | 700 | G | F-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

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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 |
|---|---|---|---|---|
| Jim Van Till | | 7 | | 7 |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| Ted Stokes | | 7 | | 7 |

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 E. Schmidt | | 07 | 22 | 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 0113910

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

4-1882-103
13

27

012598

**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

0514993

Authorization Number 993640

CLEMCO INC (Company Name) | 999 LEE ST (Address) | 3125935050 (Phone Number) | 0314400081 (Generator Number)

ELK GROVE (City) | ILL (State) | 60007 (Zip) | ILD043362444 (EPA Number)

WASTE HAULER(S)

LANDGREBE MOTOR TRAN. (Hauler Name) | CHGO. ILL. (Hauler Address) | S.W.H Registration Number

3128423121 (Phone Number) | INDD099425 24 (EPA Number)

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMER. CHEM. SERV. (Facility Name) | 420 S. COLFAX (Address) | 1808902 (Site Number)

GRIFFITH (City) | IND. (State) | 46319 (Zip) | 2199244370 (Phone Number) | IND016362655 (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: FLAMMABLE LIQ. NOS - FLAM.

HAZARD CLASS: UN1993 (UN or NA Number) | F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE 9600 (LBS / TONS (circle one))

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 1200 (1 GALLONS / 2 CU. YDS. (Circle One)) 1

METHOD OF SHIPMENT (Circle One) (DRUMS 24 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 William Hankadt (Authorized Signature) DATE: 8-25-81

**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) (Authorized Signature) (24) DATE 8/24/81

(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

(Authorized Signature) DATE 8/25/81

COMMENTS OR SPECIAL INSTRUCTIONS: UNLOADED AT DOCK 8/25/81

TO 112X T-63 8/28/81 gnm

*24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*

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

001374

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

~~111600~~ 0514994

Authorization Number 993640

111637

CLEMCO INC. (Company Name) 999 LEE ST. (Address) 312593505 (Phone Number) 0314400081 (Generator Number)

City State Zip 1LD043362441 (EPA Number)

WASTE HAULER(S)

LANDGREBE (Hauler Name) CHGO. ILL. (Hauler Address) S.W.H. Registration Number 1CC

3128423121 (Phone Number) 1ND009842824 (EPA Number)

Hauler Name Hauler Address S.W.H. Registration Number

Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMER. CHEM. SERV. (Facility Name) 420 S. COLFAX (Address) 918089 02 (Site Number)

GRIFFITH (City) IND. (State) 46319 (Zip) 2199244370 (Phone Number) 1ND016360265 (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: FLAMMABLE LIQ. HAZARD CLASS: NOS - FLAM. UN 1993 (UN or NA Number) F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE 4,900 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 600 (1) GALLONS (Circle One) (2) CU. YDS. 1

METHOD OF SHIPMENT (Circle One) DRUMS 12 (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 William Lenhardt (Authorized Signature) DATE: 10-13-81

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) [signature] (Authorized Signature) DATE 10/13/81

(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 10/14/81

COMMENTS OR SPECIAL INSTRUCTIONS: UNLOADED 10/14/81
TO 112 TK - T63 - EAM 11/10/81

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

001376

**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

0514995 (1–7)

Authorization Number 993640 (8–13)

EAGLE CONVERTING (Company Name) | 999 LEE ST (Address) | 3125935050 (Phone Number) | 0314400081 G (14 Generator Number 24)

ELK GROVE (City) | ILL. (State) | 60007 (Zip) | ILD043362441 (EPA Number)

WASTE HAULER(S)

LANDGREBE (Hauler Name) | CHGO. ILL. (Hauler Address) | S.W.H. Registration Number ICC2980 (25–31)

3128423121 (Phone Number) | IND088428254 (EPA Number)

Landgrebe (Hauler Name) | P.O. Box 32 Valparaiso, Ind (Hauler Address) | S.W.H. Registration Number (32–38)

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMER. CHEM. SERV. (Facility Name) | 420 S. COLFAY (Address) | 91802902 (39–46 Site Number)

GRIFFITH (City) | IND. (State) | 46319 (Zip) | 2199424370 (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: 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: FLAMMABLE LIQ. NOS. - FLAM

HAZARD CLASS:

UN1993 (UN or NA Number)

F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE 4,400 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 550 (47–52) (GALLONS (Circle One) CU YDS.) 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS) 11 (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 William Landgrebe (Authorized Signature) DATE 12-2-81

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) Landgrebe - Ind - 12-2-81 (Authorized Signature) DATE 12/2/81 (54–59)

(2) _____ (Authorized Signature) DATE / / (54–59)

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

Frank Irons Inc (Authorized Signature) DATE 12/3/81 (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

On dock 12/3/81 GRM To 204K T-50 CRM 12/15/81

001377

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

0514996

Authorization Number 9 9 3 6 4

| Eagle Converting | 999 Lee Street | 3125935050 | 0314400081 |
|---|---|---|---|
| (Company Name) | Address | Phone Number | Generator Number |

| Elk Grove | Ill. | 60007 | I L D 0 4 3 3 6 2 4 4 1 |
|---|---|---|---|
| City | State | Zip | EPA Number |

WASTE HAULER(S)

| Landgrebe | Chicago, Ill. | S.W.H. Registration Number I C C 2 9 8 0 |
|---|---|---|
| Hauler Name | Hauler Address | |

| 3 1 2 8 4 2 3 1 2 1 | I N D 0 0 9 8 4 2 8 2 4 |
|---|---|
| Phone Number | EPA Number |

| Landgrebe | P.O. Box 32, Valpraso, IND. | S.W.H. Registration Number |
|---|---|---|
| Hauler Name | Hauler Address | |

Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

| American Chemical Serv. | 420 S. Colfay | 9 1 8 0 8 9 0 2 |
|---|---|---|
| (Facility Name) | Address | Site Number |

| Griffith | Indiana | 46319 | 2 1 9 9 4 2 4 3 7 0 | I N D 0 1 6 3 6 0 2 6 5 |
|---|---|---|---|---|
| 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 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 |
|---|---|---|---|
| Flammable Liquid | NOS.=Flam. | U N 1 9 9 3 | B 0 0 5 |

WEIGHT FOR D.O.T USE 4,000 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED 5 0 0 (1) GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) (DRUMS 10 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 William E. Forhart (Authorized Signature) DATE: 2-4-82

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) Mitchell E. Mullins (Authorized Signature) DATE 2/ 4/ 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:

Bob Mauck (Authorized Signature) DATE 2/2/82

COMMENTS OR SPECIAL INSTRUCTIONS

IN ILLINOIS, 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-267

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

Ondock 2/5/82 GRM
to 210 TK T-50 GRM 2/19/82

003676

# STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0514997

Authorization Number 993640

**TO BE COMPLETED BY WASTE GENERATOR**

EAGLE CONVERTING (Company Name) | 999 LEE ST. (Address) | 3125935050 (Phone Number) | 0314400081 G (Generator Number)

ELK GROVE (City) | ILL (State) | 60007 (Zip) | (EPA Number)

WASTE HAULER(S)

LANDGREBE (Hauler Name) | CHGO. ILL. (Hauler Address) | S.W.H. Registration Number ICC2980

3128423121 (Phone Number) | ILD009842824 (EPA Number)

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMER. CHEM. SERV. (Facility Name) | 420 S. COLFAX (Address) | 918089 02 (Site Number)

GRIFFITH (City) | IND (State) | 46319 (Zip) | 2199424320 (Phone Number) | ILD016360265 (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: FLAMMABLE LIQ NOS. FLAM. HAZARD CLASS: UN1993 (UN or NA Number) F005 (EPA HW Number)

WEIGHT FOR O.O.T. USE 4,406 (LBS) TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 550 (1) GALLONS (Circle One) 2 CU YDS. 1

METHOD OF SHIPMENT (Circle One) (DRUMS) 11 (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 W. Richard Parker (Authorized Signature) DATE 4-7-82

**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) Fred Kuelbs DATE __/__/__

(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 4/8/82

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**

On dock 4.12.82 GRM
To 112R T-63 GRM 4.14.82

003577

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

0514998

Authorization Number 1 9 3 6 4 0

Eagle Converting Corp. (Company Name) | 999 Lee Street (Address) | (3 1 2) 593- 5050 (Phone Number) | 0 3 1 4 4 0 0 0 8 1 G (Generator Number)

Elk Grove Village (City) | Illinois (State) | 60007 (Zip) | I L D 0 4 3 3 6 2 4 4 1 (EPA Number)

WASTE HAULER(S)

Landgrebe (Hauler Name) | Chicago, IL (Hauler Address) | S.W.H. Registration Number I C C 2 9 8 0

3 1 2 8 4 2 3 1 2 1 (Phone Number) | I N D 0 0 9 8 4 2 8 2 4 (EPA Number)

Landgrebe (Hauler Name) | P.O. Box 32, Valparaso, IN (Hauler Address) | S.W.H. Registration Number

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Serv. (Facility Name) | 420 South Colfay (Address) | 9 1 8 0 8 9 0 2 (Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip) | 2 19 94 2 43 70 (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 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: | U N 1 9 9 3 (UN or NA Number) | F 0 0 5 (EPA HW Number) |
|---|---|---|---|
| Flammable Liquid | NOS.- Flam. | | |

WEIGHT FOR D.O.T. USE 4,000 (LBS) TONS (circle one) — WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. — QUANTITY OF WASTE DELIVERED: 5 0 0 — (1) GALLONS (Circle One) (2) CU. YDS. 1

METHOD OF SHIPMENT (Circle One) (DRUMS 10 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 William F Lenhardt (Authorized Signature) DATE: 6/2/82

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) [signature] (Authorized Signature) DATE 6/2/82

(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

Frank Price (Authorized Signature) DATE 6/3/8[illegible]

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

On dock 6.3.82 GRM
To 112 RT-63 GRM 6.4.82

003675

IL 532 610
IPC 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

0647459

Authorization Number [illegible]

| (Company Name) | Address | Phone Number | Generator Number |
|---|---|---|---|
| EAGLE CONVERTING CORP | 999 LEE STREET | 312 5935050 | 0 3 1 4 4 0 0 0 8 1 G |

| City | State | Zip | EPA Number |
|---|---|---|---|
| ELK GROVE VILLAGE | IL. | 60007 | IL D 0 4 3 3 6 2 4 4 1 |

WASTE HAULER(S)

| Hauler Name | Hauler Address | S.W.H. Registration Number | Phone Number | EPA Number |
|---|---|---|---|---|
| LANDGREBE MOTOR TRANSP. | CHICAGO, ILL. | 4649MCR | 3128423121 | IND009842824 |
| | | | | |

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

| (Facility Name) | Address | Site Number | City | State | Zip | Phone Number | EPA Number |
|---|---|---|---|---|---|---|---|
| AMER. CHEM. SERV. | 420 S. COLFAX | 91808902 | GRIFFITH | IND. | 46319 | 2199244370 | IND 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: FLAMMABLE LIQUID HAZARD CLASS: NOS - FLAM. UN1993 (UN or NA Number) F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE 4000 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 500 GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) (DRUMS 10 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: 10-6-82

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: 10/6/82

(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: 10/7/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-26

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

On dock 10/7/82 To 204 R T-50 ERM 10.13.82

003878

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

0647460

Authorization Number ~~943640~~

| (Company Name) | Address | Phone Number | Generator Number |
|---|---|---|---|
| EAGLE CONVERTING CORP. | 999 LEE STREET | 312 593 5050 | 0314400081 |

| City | State | Zip | EPA Number |
|---|---|---|---|
| ELK GROVE VILLAGE | IL. | 60007 | ILD043362441 |

WASTE HAULER(S)

| Hauler Name | Hauler Address | S.W.H. Registration Number | Phone Number | EPA Number |
|---|---|---|---|---|
| LANDGREBE MOTOR TRANSPORT | CHICAGO, IL. | 4649MCR | 3128423121 | IND009842824 |
| | | | | |

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

| (Facility Name) | Address | Site Number | City | State | Zip | Phone Number | EPA Number |
|---|---|---|---|---|---|---|---|
| AMERICAN CHEM. SERVICE | 420 S. COLFAX | 918089 | GRIFFITH | IND. | 46319 | 2199244370 | IND016360265 |
| | | | | | | | |

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: FLAMMABLE LIQUID HAZARD CLASS: NOS - FLAM. UN1993 (UN or NA Number) F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE 4400 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 2 550 GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) (DRUMS 11 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: 11/30/82

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: 11/30/82

(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:

Frank Price (Authorized Signature) DATE: 12/1/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2

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

On dock 12-1-82

To 204 RT-50
GPM 12-8-82

003879

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

0647461

Authorization Number 993640

| (Company Name) | Address | Phone Number | Generator Number |
|---|---|---|---|
| EAGLE CONVERTING CORP | 999 LEE ST. | 312 593 5050 | 031 440 0081 G |

| City | State | Zip | EPA Number |
|---|---|---|---|
| ELK GROVE | ILL | 60007 | ILD043362441 |

WASTE HAULER(S)

| Hauler Name | Hauler Address | S.W.H. Registration Number | Phone Number | EPA Number |
|---|---|---|---|---|
| LANDGREBE MOTOR TRANSPORT | CHICAGO ILL. | 4649 MCR | 3128423121 | IND009842824 |

| Hauler Name | Hauler Address | S.W.H. Registration Number | Phone Number | EPA Number |
|---|---|---|---|---|
| | | | | |

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

| (Facility Name) | Address | Site Number |
|---|---|---|
| AMER. CHEM. SERV. | 420 S. COLFAX | 91808902 |

| City | State | Zip | Phone Number | EPA Number |
|---|---|---|---|---|
| GRIFFITH | IND. | 46319 | 2199244370 | IND016360265 |

| 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: FLAMMABLE LIQUID NOS- FLAM.

HAZARD CLASS: UN1993 (UN or NA Number) F005. (EPA HW Number)

WEIGHT FOR D.O.T. USE 4000 LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED 500 (47–52)

1 GALLONS (Circle One) 2 CU. YDS. 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS 24) 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 Gene F. Elder (Authorized Signature) DATE: 2/7/83

**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) Fred Koselke (10) (Authorized Signature) DATE: 2/8/83 (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.

Frank Price (Authorized Signature) DATE: 2/9/83 (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

SITE COPY - PART 3

TO210 K T-50 GRM 2-9-83

004740

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

0647462

Authorization Number: ~~993640~~

EAGLE CONVERTING CORP. (Company Name) | 999 LEE ST. (Address) | 312 593 5050 (Phone Number) | 03 1 4400081 (Generator Number)

ELK GROVE VILLAGE (City) | ILL (State) | 60007 (Zip) | ILD 043362441 (EPA Number)

WASTE HAULER(S)

LANDGREBE MTR. TRANSP (Hauler Name) | CHICAGO, ILL. (Hauler Address) | S.W.H. Registration Number 4649MCR

3128423121 (Phone Number) | IND098428294 (EPA Number)

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEM. SERVICE (Facility Name) | 420 SOUTH COLFAX (Address) | 91808902 (Site Number)

GRIFFITH (City) | IND. (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: 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: FLAMMABLE LIQUID HAZARD CLASS: NOS - FLAM. UN 1993 (UN or NA Number) F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE 7200 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 660 GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) (DRUMS) 12 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 Gene F. Elder (Authorized Signature) DATE: 2/7/83

**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) (12) Fmt. Fred (Authorized Signature) DATE: 3/23/83

(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:

F Dunfee (Authorized Signature) DATE: 3/24/83

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 # 4

SITE COPY - PART 3

On dock 3-24-83
To 204 TCT-50 GRM 3-25-83 004741

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

0647464
Authorization Number N174

EAGLE CONVERTING CORP. | 999 LEE STREET | 3125935050 | 0314400081 G
(Company Name) | Address | Phone Number | Generator Number

ELK GROVE VILLAGE | ILL. | 60007 | ILD043362441
City | State | Zip | EPA Number

WASTE HAULER(S)

LANDGREECE MOTOR TRANSPORT | CHICAGO, ILL. | S.W.H. Registration Number 46H9MCR
Hauler Name | Hauler Address

3128423121 | ILD009842824
Phone Number | EPA Number

Hauler Name | Hauler Address | S.W.H. Registration Number
Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEM. SERV. | 420 S. COLFAX | 91808902 Site Number
(Facility Name) | Address

GRIFFITH | IND. | 46319 | 2199244370 | 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: 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: FLAMMABLE LIQUID | HAZARD CLASS: NOS - FLAM. | UN 1993 UN or NA Number | F005 EPA HW Number

WEIGHT FOR D.O.T. USE 6000 (LBS) TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 600 750 | GALLONS (Circle One) 2. CU. YDS. 1.

METHOD OF SHIPMENT (Circle One) (DRUMS) 12345 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: 5/23/83

**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: 5/23/83

(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: 5/24/83

COMMENTS OR SPECIAL INSTRUCTIONS: 5 (15)

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 2047-T-58 GRM 6-1-83

004142

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

0647466

Authorization Number

EAGLE CONVERTING (Company Name) | 999 LEE STREET (Address) | 312 593 5050 (Phone Number) | 031 440 0081 G (Generator Number)

ELK GROVE VILLAGE (City) | IL. (State) | 60007 (Zip) | ILD043362441 (EPA Number)

WASTE HAULER(S)

LANDGREBE MOTOR TRANSPORT (Hauler Name) | CHICAGO, IL (Hauler Address) | S.W.H. Registration Number 4649 MCR

312 842 3121 (Phone Number) | IND009842824 (EPA Number)

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number 220

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEM. SERV. (Facility Name) | 420 S. COLFAX (Address) | 918 089 02 (Site Number)

GRIFFITH (City) | IND. (State) | 46319 (Zip) | 219 924 4370 (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: 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: FLAMMABLE LIQUID

HAZARD CLASS: NOS.-FLAM

UN 1993 (UN or NA Number) | F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE 4000 LBS TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 500 | 1 GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) (DRUMS) 10 (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: 6/24/83

**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) Fred Kuselka (Authorized Signature) DATE: 6/24/83

(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.

F. Dunfee (Authorized Signature) DATE: 6/27/83

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 204 RT-50 GRM 6-27-83

004743

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

0647467

Authorization Number 269489

EAGLE CONVERTING (Company Name) | 999 LEE STREET (Address) | 3125935050 (Phone Number) | 0344700261 (Generator Number)

ELK GROVE VILLAGE (City) | IL. (State) | 60007 (Zip) | ILD043362441 (EPA Number)

WASTE HAULER(S)

LANDGREBE MOTOR TRANSPORT (Hauler Name) | CHICAGO, ILL. (Hauler Address) | S.W.H. Registration Number 4649MCR

3128423121 (Phone Number) | IND009842824 (EPA Number)

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number

(Phone Number) | 18100 (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 S. COLFAX (Address) | 91808902 (Site Number)

GRIFFITH (City) | INDIANA (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: 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: FLAMMABLE LIQUID HAZARD CLASS: NOS-FLAM UN 1993 (UN or NA Number) F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE 3,600 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 450 GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) DRUMS 9 (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: 8/12/83

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: 8/12/83

(2) (Authorized Signature) DATE: 1/2/

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: 8/12/83

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. # 4

SITE COPY - PART 3

To 204KT-50 GM 8-15-83

004739

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

0647468

Authorization Number

EAGLE CONVERTING (Company Name) | 999 LEE STREET (Address) | 3145935050 (Phone Number) | 0314400081 (Generator Number)
ELK GROVE VILLAGE (City) | IL (State) | 60007 (Zip) | ILD0 43362441 (EPA Number)

WASTE HAULER(S)

LANDGREBE MOTOR TRANSPORT (Hauler Name) | CHICAGO IL. (Hauler Address) | S.W.H. Registration Number 4649MCR
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 CHEM. SERV. (Facility Name) | 420 SOUTH COLFAX (Address) | 91808902 (Site Number)
GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | 2199244370 (Phone Number) | IND016360365 (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: FLAMMABLE LIQUID
HAZARD CLASS: NOS-FLAM
UN 1993 (UN or NA Number) | F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE 4800 LBS TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 600 | 1 GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) (DRUMS 12 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: 11/30/83

**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) 12 Lmt-Fred-12-1-83 (Authorized Signature) DATE: 12/1/83

(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: 12/2/83

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 # 4

SITE COPY - PART 3

T0204KT-50GRM 12.2.83

004744

**STATE OF ILLINOIS** ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL53.

LPC 62 8/8

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.

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: ILD043362441 — Manifest Document No.: 1
2. Page 1 of 1 — Information in the shaded area required by Federal law, but is requ... by Illinois law.

3. Generator's Name and Mailing Address: EAGLE CONVERTING CORP. 999 LEE STREET, ELK GROVE VILLAGE IL. 60007

4. Generator's Phone (312) 593-5050

A. Illinois Manifest Document Number: IL 1126578

B. Illinois Generator's ID: 0314405081

5. Transporter 1 Company Name: LANDGREBE MOTOR FREIGHT

6. US EPA ID Number: IND009842824

C. Illinois Tranporter's ID: 4649

D. (312) 842-3121 Transporter's Phone

7. Transporter 2 Company Name:

8. US EPA ID Number: ICC 2980

E. Illinois Transporter's ID: Jcc 2980

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

| | 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 NOS. FLAM UN1993 | 10 | DM | 500 | 1 | EPA HW Number 1993 / 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: GENE F. ELDER — Signature: Gene F. Elder — Date: Month 9 Day 26 Year 84

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Landgrebe — Signature: F. Schlundt 10 — Date: Month 9 Day 27 Year 84

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name: LANDGREBE — Signature: [signature] — Date: Month 9 Day 28 Year 84

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 Rushnok — Signature: R Rushnok — Date: Month 9 Day 28 Year 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

204 R 1-50

008179

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.: ILD043362441 — Manifest Document No.: 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: EAGLE CONVERTING CORP. 999 LEE STREET, ELK GROVE VILLAGE, IL 60007

4. Generator's Phone (312) 593-5050

A. Illinois Manifest Document Number: IL 1126579

B. Illinois Generator's ID: 0314405081

5. Transporter 1 Company Name: LANDGREBE MOTOR TRANSPORT

6. US EPA ID Number: IND009842824

C. Illinois Tranporter's ID: 4649

D. (312) 842-3121 Transporter's Phone

7. Transporter 2 Company Name:

8. US EPA ID Number:

E. Illinois Transporter's ID: 2990

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: (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 | Waste No. |
|---|---|---|---|---|---|---|---|
| a. | X | WASTE SOLVENT NOS. FLAM UN1993 | 12 | DM | 600 | 1 | EPA HW Number 1993 / 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 |
|---|---|---|
| GENE F. ELDER | Gene F. Elder | 10 17 84 |

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date Month Day Year |
|---|---|---|
| Landgrebe Motor | Phil Lyons | 10 18 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 | Signature | Date Month Day Year |
|---|---|---|
| R Rushnock | R Rushnock | 10 18 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

204 RT-50 9500 BTU 1.7% Cl.

008176

**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

0514999
Authorization Number

EAGLE CONVERTING (Company Name) | 999 LEE STREET (Address) | 312 593 5060 (Phone Number) | 0314400051 (Generator Number)
ELK GROVE VILLAGE (City) | IL. (State) | 60007 (Zip) | ILD064263441 (EPA Number)

WASTE HAULER(S)

LANDEFELD
MOTOR TRANSPORT (Hauler Name) | CHICAGO IL. (Hauler Address) | S.W.H. Registration Number 4649MCR
312 842 2121 (Phone Number) | IND009842824 (EPA Number)

[redacted] (Hauler Name) | [redacted] (Hauler Address) | S.W.H. Registration Number
Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEM. SERVICE (Facility Name) | 420 SOUTH CALFAX (Address) | 9180902 (Site Number)
GRIFFITH (City) | INDIANA (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: 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: FLAMMABLE LIQUID NOS-FLAM
HAZARD CLASS: UN1993 (UN or NA Number)
EPA HW Number: F005

WEIGHT FOR D.O.T. USE: 4400 (LBS) TONS (circle one)
WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.
QUANTITY OF WASTE DELIVERED: 550
1 GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One): (DRUMS) 11 (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: 1/17/84

**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) Fred Rueth (Authorized Signature) (11) DATE: 1/17/84

(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: 1-18-84

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. # 3

SITE COPY - PART 3

TO204 RT-50 GRM 1.18.84

038183

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

0930827

Authorization Number 1

| (Company Name) | Address | Phone Number | Generator Number |
|---|---|---|---|
| EAGLE CONVERTING | 999 LEE STREET | 312 593 5050 | 031 440 0081 |

| City | State | Zip | EPA Number |
|---|---|---|---|
| ELK GROVE VILLAGE | ILL. | 60007 | ILD043362441 |

WASTE HAULER(S)

| Hauler Name | Hauler Address | Phone Number | S.W.H. Registration Number / EPA Number |
|---|---|---|---|
| LANDGREBE MOTOR TRANSPORT | CHICAGO, IL. | 3128423721 | 4649MCR / IND009842824 |
| | | | |

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

| (Facility Name) | Address | Site Number |
|---|---|---|
| AMERICAN CHEM. SERVICE | 420 SOUTH COLFAX | 91808902 |

| City | State | Zip | Phone Number | EPA Number |
|---|---|---|---|---|
| GRIFFITH [redacted] | INDIANA | 46319 | 2199244370 | IND016360265 |

| Alternate (Facility Name) | Address | Site Number |
|---|---|---|
| | | |

| City | State | Zip | Phone Number | EPA Number |
|---|---|---|---|---|
| | A/C/ | | | |

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: FLAMMABLE LIQUID HAZARD CLASS: NOS-FLAM UN 1993 (UN or NA Number) F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE 4400 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 550 1 GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) (DRUMS 11 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 Gene F. Eldor (Authorized Signature) DATE: 2/28/84

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) (11) Smt. Tel (Authorized Signature) DATE: 3/1/84

(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:

R. Rishik (Authorized Signature) DATE: 3/2/84

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 TO 204 F 7-50 GKM 3.2.84 on dock

008182

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

0930828

Authorization Number 542784

EAGLE CONVERTING CORP (Company Name) | 999 LEE STREET (Address) | 3125935050 (Phone Number) | 0314400081 (Generator Number)

ELK GROVE VILLAGE (City) | IL. (State) | 60007 (Zip) | ILD043362441 (EPA Number)

WASTE HAULER(S)

LANDGREBE MOTOR TRANSPORT (Hauler Name) | CHICAGO IL. (Hauler Address) | S.W.H. Registration Number 4649MCR

3128423121 (Phone Number) | IND009842824 (EPA Number)

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number 1CC2480

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEM. SERVICE (Facility Name) | 420 S. COLFAX (Address) | 91808902 (Site Number)

GRIFFITH (City) | INDIANA (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: 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: FLAMMABLE LIQUID HAZARD CLASS: NOS - FLAM UN 1993 (UN or NA Number) D001 (EPA HW Number)

WEIGHT FOR D.O.T. USE 4000 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 500 1 GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) (DRUMS 10 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: 6/08/84

**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) 10 DATE: 6/13/84

(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: 6/18/84

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

204 ET-50

008181

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

0930829

**TO BE COMPLETED BY WASTE GENERATOR**

Authorization Number 36266

EAGLE CORRUGATION (Company Name) | 999 LEE STREET (Address) | 3125935050 (Phone Number) | 0314405081 ~~0314400001~~ (Generator Number)

ELK GROVE VILLAGE (City) | IL. (State) | 60007 (Zip) | IL-D0433624 4 (EPA Number)

WASTE HAULER(S)

LAND GREEN MOTOR TRANSPORT (Hauler Name) | CHICAGO IL. (Hauler Address) | S.W.H. Registration Number 4649MCR | 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 CHEM. SERVICE (Facility Name) | 420 SOUTH COLFAX (Address) | ~~IL 0 3 9 0 0 0~~ ~~4180 8902~~ (Site Number)

GRIFFITH (City) | INDIANA (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: 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 |
|---|---|---|---|
| FLAMMABLE LIQUID | NOS-FLAM | UN 1993 | D001 |

WEIGHT FOR D.O.T. USE 4000 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 500 (GALLONS) 2 CU. YDS. (Circle One) 1

METHOD OF SHIPMENT (Circle One) (DRUMS) 10 (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 Elena T. Eldin (Authorized Signature) DATE: 9/6/84

**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) Lon L Schmidt (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: R Reuter (Authorized Signature) DATE: 9/12/84

COMMENTS OR SPECIAL INSTRUCTIONS: 204 R T-50

*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**

038100

**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. ILD043362441 — Manifest Document No. 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
PPC LAMINATIONS INC.
999 LEE STREET, ELK GROVE VILLAGE, IL. 60007

4. Generator's Phone ( 312 ) 593-5050

A. Illinois Manifest Document Number IL 1126580

B. Illinois Generator's ID 0314405082

5. Transporter 1 Company Name: LAND GREBE MOTOR TRANSPORT — 6. US EPA ID Number: IND009842824

C. Illinois Tranporter's ID 4649

D. (312) 842-3121 Transporter's Phone

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

E. Illinois Transporter's ID 2980

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 (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 | Waste No. |
|---|---|---|---|---|---|---|
| a. WASTE SOLVENT NOS. FLAM UN1993 | X | 10 | DM | 500 | 1 | EPA HW Number 1993 / 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 4002

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: GENE F. ELDER — Signature: Gene F. Elder — Date: Month 11 Day 19 Year 84

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 — 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

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

204 FT. 50

007402

**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

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# UNIFORM ~~HAZARDOUS~~ WASTE MANIFEST

1. Generator's US EPA ID No.: ILD043362441 — Manifest Document No.: 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: PPC LAMINATIONS, INC. 999 LEE ST. ELK GROVE VILLAGE, IL. 60007

4. Generator's Phone (312) 593-5050

A. Illinois Manifest Document Number: IL 1126581

B. Illinois Generator's ID: 0314405081

5. Transporter 1 Company Name: LANDGREBE MOTOR TRANSPORT

6. US EPA ID Number: IND009842824

C. Illinois Tranporter's ID: 4649

D. (312) 842-3121 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: 0978089 0002

H. Facility's Phone: [illegible]

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number): NON HAZARDOUS IGNITABLE

| | HM | 12. Containers No. | Type | 13. Total Quantity | 14. Unit Wt/Vol | Waste No. |
|---|---|---|---|---|---|---|
| a. | | 10 | DM | 500 | 1 | EPA HW Number: [illegible] Authorization Number: |
| b. | | | | | | EPA HW Number: Authorization Number: |
| c. | | | | | | EPA HW Number: Authorization Number: |
| d. | | | | | | EPA HW Number: Authorization Number: |

{Hauler 1875-001}

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 |
|---|---|---|---|---|
| GENE F ELDER | [signature] | 1 | 15 | 85 |

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date Month | Day | Year |
|---|---|---|---|---|
| LANDgrebe Fred Koselke | [signature] | 1 | 17 | 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 | Signature | Date Month | Day | Year |
|---|---|---|---|---|
| ~~Frank Price~~ FRANK PRICE | Frank Price | 1 | 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

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FACILITY COPY - PART 3

204RT-50

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**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

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# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: ILD043362441 — Manifest Document No.: 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: PPC LAMINATIONS, INC. 999 LEE STREET ELK GROVE VILLAGE, IL. 60007
4. Generator's Phone (312) 593-5050

A. Illinois Manifest Document Number: IL 1118161
B. Illinois Generator's ID: 0314400021
C. Illinois Tranporter's ID: 4649
D. (312) 842-3121 Transporter's Phone
E. Illinois Transporter's ID: 1845
F. Transporter's Phone
G. Illinois Facility's ID: 9880890002
H. Facility's Phone: (219) 924-4370 24700

5. Transporter 1 Company Name: LANDGREBE MOTOR TRANSPORT
6. US EPA ID Number: IND0098428 24

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

9. Designated Facility Name and Site Address: AMERICAN CHEMICAL SERVICE 420 SOUTH COLFAX GRIFFITH, INDIANA 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 | Waste No. |
|---|---|---|---|---|---|---|
| HAZARDOUS - IGNITABLE | | | | | | |
| a. WASTE SOLVENT NOS FLAM, UN1993 | | 10 | DM | 500 | 1 | EPA HW Number: F003 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 3,550#

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: GENE F. ELDER — Signature: Gene F. Elder — Date: Month 3 Day 13 Year 85

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Philip L Lyons Landgrebe — Signature: Philip Lyons Landgrebe — Date: Month 03 Day 18 Year 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 3 Day 19 Year 85

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

**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

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**UNIFORM HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. ILD 043362441 | Manifest Document No. 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
PPG LAMINATIONS INC.
999 LEE ST.
ELK GROVE VILLAGE IL. 60007

4. Generator's Phone ( 312 ) 593-5050

A. Illinois Manifest Document Number IL 1118162

B. Illinois Generator's ID 0313400021

5. Transporter 1 Company Name: LANDGREBE MOTOR TRANS.

6. US EPA ID Number: IND 009842824

C. Illinois Tranporter's ID 41649

D. (312) 842-3721 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 SERV.
420 S. COLFAX
GRIFFITH IN. 46319

10. US EPA ID Number: IND 016 360 265

G. Illinois Facility's ID 0313400021

H. Facility's Phone (219) 924-7337

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 | Waste No. |
|---|---|---|---|---|---|---|
| a. | HM HAZARDOUS - IGNITABLE WASTE SOLVENT NOS, FLAM UN 1993 | 1 | DM | 350 | 1 | EPA HW Number D001 |
| 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 2,500 #

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: WILLIAM F. LENHARDT | Signature: William F. Lenhardt | Date: Month 6 Day 11 Year 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Fred L. Koselke | Signature: Fred L. Koselke | Date: Month 6 Day 14 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: FRANK PRICE | Signature: Frank Price | Date: Month 6 Day 17 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

204RT-50

U38033

**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. ILD043312441 Manifest Document No. 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
P.P.C. LAMINATIONS
999 LEE ST ELK GROVE VILLAGE, Ill. 60007

4. Generator's Phone ( 312 593 5050

A. Illinois Manifest Document Number IL-1118163

B. Illinois Generator's ID 0311400021

5. Transporter 1 Company Name: LANDGREBE MOTOR TRANSPORT

6. US EPA ID Number: IND009842824

C. Illinois Tranporter's ID 4749

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
GRIFFITH, INDIANA 46319

10. US EPA ID Number: IND016360265

G. Illinois Facility's ID 9180890002

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. |
|---|---|---|---|---|---|---|---|
| GENERATOR a. | HAZARDOUS - IGNITABLE WASTE SOLVENT - NOS FLAM UN1993 | | 6 | DM | 2400 | P | EPA HW Number F003 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: William M Panzer | Signature: William M Panzer | Date: Month 9 Day 14 Year 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Fred | Signature: Fred F. Fuchs | Date: Month 9 Day 19 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: MURPHY | Signature | Date: Month 9 Day 1 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 EPA 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

204 TK T-50 10700 BTU

I.I.I. CO.

U38031

**STATE OF ILLINOIS** ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 78

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.: ILD043362441 /

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
PPC LAMINATIONS
999 LEE ST, ELK GROVE VILLAGE, Ill 60007
4. Generator's Phone ( 312-593-5050

A. Illinois Manifest Document Number: IL 1118164

B. Illinois Generator's ID: 0314400021

5. Transporter 1 Company Name: LANDGREBE MOTOR TRANSPORT
6. US EPA ID Number: INDOD842824

C. Illinois Tranporter's ID: 4649

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
GRIFFITH, INDIANA 46319
10. US EPA ID Number: IND016360245

G. Illinois Facility's ID: 1978089002

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 | Waste No. |
|---|---|---|---|---|---|---|---|
| a. | HAZARDOUS WASTE SOLVENT - NOS FLAM IGNITABLE UN 1993 | | 10 | DM | 4000 | 1 | EPA HW Number: F003; 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) |
|---|---|---|
| William M PANZER | William M. Panzer | 11 14 85 |

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| F. W. Schlundt | F W Schlundt | 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) |
|---|---|---|
| FRANK. Price | Frank Price | 11 15 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

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FACILITY COPY - PART 3

204TH-50

038033

**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 (3-64)** Form Approved. OMB No. 2000-0404. Expires 7-31-86

## UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. ILD043362441 Manifest Document No. 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
PPG LAMINATIONS
999 LEE ST. ELK GROVE VILLAGE, IL 60007

4. Generator's Phone ( 312) 593-5050

5. Transporter 1 Company Name — 6. US EPA ID Number: LANDGREBE MOTOR TRANSPORT | IND 009842824

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

9. Designated Facility Name and Site Address — 10. US EPA ID Number
AMERICAN CHEMICAL SERVICE
420 S COLFAX
GRIFFITH, IND. 46319 | IND 016360265

A. Illinois Manifest Document Number: IL 1118165

B. Illinois Generator's ID: 0314H0002

C. Illinois Tranporter's ID: 46419

D. (312) 842-3121 Transporter's Phone

E. Illinois Transporter's ID: 11875

F. ( ) Transporter's Phone

G. Illinois Facility's ID: 1918089002

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

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. State Waste No. / EPA HW Number / Authorization Number |
|---|---|---|---|---|---|---|---|
| a. | | HAZARDOUS - IGNITABLE WASTE SOLVENT - NOS FLAM UN 1993 | 1 | DM | 355 | 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 governmental regulations, and Illinois regulations.

Printed/Typed Name: William M. Panzer — Signature: William M. Panzer — Date: Month 1 Day 21

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: F. W. Schlandt — Signature: F. W. Schlandt — Date: Month 1 Day 27 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: FRANK PRICE — Signature: Frank Price — Date: Month 1 Day 27 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

204K T-50

010994

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. ILD043362441 — 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
PPC LAMINATIONS
999 LEE ST. ELK GROVE VILLAGE ILL. 60007

4. Generator's Phone ( 312 ) 593-5050

A. Illinois Manifest Document Number 1507911

B. Illinois Generator's ID 0314600991

5. Transporter 1 Company Name: LANDGREBE MOTOR TRANSIT — 6. US EPA ID Number: IND 009842824 — C. Illinois Transporter's ID [illegible]

D. 219-462-4181 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 AVE.
GRIFFITH, IND. 46319

10. US EPA ID Number: IND 016360265

G. Illinois Facility's ID RA18089.0002

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 FLAMMABLE LIQUID N.O.S. FLAMMABLE LIQUID UN 1993 | X | 10 | DM | 500 | 1 | EPA HW Number F003 / 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
GROSS WT 5,000 #

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 | Signature | Date (Month Day Year) |
|---|---|---|
| MARK A. HVIDHYLD | Mark A. Hvidhyld | 12/19/86 |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| Fred L. Koselke | Fred L. Koselke | 12/19/86 |

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) |
|---|---|---|
| HARRY F. SCHMIDT | [signature] | 12-22-86 |

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

~~DUPLICATE~~ 6LM 10-2545 T50 1/2

010995

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. [illegible] | Manifest Document No. [illegible] | 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: PPC LAMINATIONS [illegible] 60007

4. Generator's Phone ( [illegible] ) [illegible]

A. State Manifest Document Number: INA 0166024

B. State Generator's ID: [illegible]

5. Transporter 1 Company Name: [illegible]

6. Use EPA ID Number: [illegible]

C. State Transporter's ID: [illegible]

D. Transporter's Phone: [illegible]

7. Transporter 2 Company Name: [illegible]

8. Use EPA ID Number: [illegible]

E. State Transporter's ID: [illegible]

F. Transporter's Phone: [illegible]

9. Designated Facility Name and Site Address: [illegible]

10. Use EPA ID Number: [illegible]

G. State Facility's ID: [illegible]

H. Facility's Phone: (317) [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. FLAMMABLE LIQUID UN 1993 | 10 | DM | 500 | [illegible] | F003 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above: Gross Wt. 3550#

K. Handling Codes for Wastes Listed Above: [illegible]

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: Carl Koal[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: HARROLD F. Schmidt | Signature: [illegible] | Month 12 Day 30 Year [illegible]

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 0166024

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

7-204R T-50 1/7/88
3-204R T-50 1/12/88

012739

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. [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: PPC LAMINATIONS [illegible] VILLAGE ILLINOIS [illegible]
4. Generator's Phone (312) 293-5050
A. State Manifest Document Number: INA 0166023
B. State Generator's ID: 03144 00081
5. Transporter 1 Company Name: LANDGREBE MOTOR TRANSIT
6. Use EPA ID Number: IND [illegible]
C. State Transporter's ID: 1875
D. Transporter's Phone: (312) 842-3121
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, 470 S. COLFAX AVE, GRIFFITH, IND. 46319
10. Use EPA ID Number: IND 016360265
G. State Facility's ID: 918089 0002
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 UN 1993 | 14 | DM | 700 | 1 | F003 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above: GROSS WT. 4970#
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: MARK HUIDHYLD | Signature: M. Huidhyld | Date Month 1 Day 1 Year 87

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: KEG GUSTAFSON | Signature: [signature] | Date Month 1 Day 1 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: HARROLD F. [illegible] | Signature: [signature] | Month 1 Day 13 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 0166023

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

DISTRIBUTION:
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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

8-204R T-50 11/16/87
5-204R T-50 11/12/87
1-204R T-50 11/19/87

012738

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.N.D.0.4.3.3.6.2.4.1.1 | 0000.04 | | |

3. Generator's Name and Mailing Address: PPG LAMINATIONS

A. State Manifest Document Number: INA 0166022

B. State Generator's ID:

4. Generator's Phone ( 812 ) 925-2525

5. Transporter 1 Company Name: [illegible]

6. US EPA ID Number: I.N.D.0.[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:

9. Designated Facility Name and Site Address: MIDWEST CHEMICAL SERVICE
4525 CLAY AVE
GRIFFITH IND 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. | 15. Waste No. |
|---|---|---|---|---|---|
| a. WASTE FLAMMABLE SOLID N.O.S. 3175 | 1 | M | 150 | | |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above: GROSS WT. [illegible]

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 | Signature | Month | Day | Year |
|---|---|---|---|---|
| MARK HUIDHYLD | [illegible] | 09 | 15 | 87 |

18. Transporter 2 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| Fred L. Koselke | Fred L. Koselke | 09 | 18 | 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 | Signature | Month | Day | Year |
|---|---|---|---|---|
| HAROLD F SCHMIDT | [illegible] | 09 | 21 | 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 0166022

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865 15-20FR-T-50 9/22/87

DISTRIBUTION:
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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

012737

157

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. [illegible] Manifest Document No. [illegible]

2. Page 1 of 1

Information in the shaded areas is not required by Federal law

3. Generator's Name [illegible]

4. Generator's Phone ( [illegible] ) [illegible]

A. State Manifest Document Number IN 084500

B. State Generator's ID [illegible]

5. Transporter 1 Company Name LANDFREE [illegible] TRUCK

6. US EPA ID Number [illegible]

C. State Transporter's ID [illegible]

D. Transporter's Phone [illegible]

7. Transporter 2 Company Name [illegible]

8. US EPA ID Number [illegible]

E. State Transporter's ID [illegible]

F. Transporter's Phone [illegible]

9. Designated Facility Name and Site Address AMERICAN [illegible] SERVICE 420 S. [illegible] AVE. GRIFFITH IND 46319

10. US EPA ID Number [illegible]

G. State Facility's ID [illegible]

H. Facility's Phone (312) [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 | Waste No. |
|---|---|---|---|---|---|
| a. WASTE [illegible] LIQUID NOS. [illegible] IN 1993 | [illegible] | | [illegible] | 1 | F003 |
| b. Accepted | [illegible] | | [illegible] | | F003 |
| c. Rejected 1 Dr. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above: [illegible] Wt. 3550#

K. Handling Codes for Wastes Listed Above: 1 = [illegible]

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: Mark Hvidhyld Signature: [illegible] Month Day Year: [illegible] 17

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Fred L. Koselke Signature: Fred L Koselke Date: 06 30 87

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name Signature Date Month Day Year

19. Discrepancy Indication Space

Rejected 1 Dr Not Pumpable
Accepted 9 Dr

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: [illegible] Month Day Year: [illegible]

IN 084500

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

T.S.D. DETACH AND RETAIN THIS COPY MRK 9-204R T50-B

012736

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. [illegible] Manifest Document No. [illegible]

2. Page 1 of 1

Information in the shaded areas is not required by Federal law

3. Generator's Name PPC LAMINATIONS [illegible]

4. Generator's Phone ( [illegible] ) [illegible]

A. State Manifest Document Number IN 084499

B. State Generator's ID [illegible]

5. Transporter 1 Company Name [illegible]

6. US EPA ID Number [illegible]

C. State Transporter's ID [illegible]

D. Transporter's Phone [illegible]

7. Transporter 2 Company Name [illegible]

8. US EPA ID Number [illegible]

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address [illegible] GRESHA IND 46319

10. US EPA ID Number [illegible]

G. State Facility's ID [illegible]

H. Facility's Phone [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 | 15. Waste No. |
|---|---|---|---|---|---|
| a. [illegible] | [illegible] | [illegible] | [illegible] | 1 | [illegible] |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above [illegible] 3175 #

K. Handling Codes for Wastes Listed Above [illegible]

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 Fred Kosecke 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 [illegible] Signature [illegible] Month Day Year [illegible]

GENERATOR

TRANSPORTER

FACILITY

IN 084499

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

T.S.D. DETACH AND RETAIN THIS COPY MAK 9-204R TSD B

012735

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.: ILD043367441 / 000001
2. Page 1 of: 1
Information in the shaded areas is not required by Federal law

3. Generator's Name: PPC LAMINATIONS
999 LEE ST. ELK GROVE VILLAGE ILL. 60007
4. Generator's Phone: (312) 593-5050

A. State Manifest Document Number: IN 084498
B. State Generator's ID: 031440008
C. State Transporter's ID: 1875
D. Transporter's Phone: (312) 462-4181
E. State Transporter's ID: (312) 842-3121
F. Transporter's Phone:
G. State Facility's ID: 918089000
H. Facility's Phone: (312) 768-3400

5. Transporter 1 Company Name: LANDGREBE MOTOR TRANSIT
6. US EPA ID Number: IWD009814828
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 IND. 46319
10. US EPA ID Number: IND016360265

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 | Waste No. |
|---|---|---|---|---|---|
| a. WASTE FLAMMABLE LIQUID N.O.S. FLAMMABLE LIQUID UN 1993 | 009 | DM | 450 | 1 | F003 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above: GROSS WT. 3195 #

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.

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: MARK HVIDHYLD | Signature: Mark Hvidhyld | Month 02 Day 20 Year 87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: CLIFF LOFF | Signature: Cliff Loff | Month 02 Day 24 Year 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: HARROLD F. SCHMIDT | Signature: Harold F. Schmidt | Month 02 Day 25 Year 87

IN 084498

EPA Form 8700-22A (Rev. 11-85)

RETURNED TO THE GENERATOR BY THE T.S.D. 9-204R F50 3

UHWM 2/LP2

012734

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. [illegible] Manifest Document No. [illegible]

2. Page 1 of 1

Information in the shaded areas is not required by Federal law

3. Generator's Name [illegible]

4. Generator's Phone [illegible]

A. State Manifest Document Number IN 084498

B. State Generator's ID [illegible]

5. Transporter 1 Company Name [illegible] WATER TRANSIT

6. US EPA ID Number [illegible]

C. State Transporter's ID [illegible]

D. Transporter's Phone [illegible]

7. Transporter 2 Company Name [illegible]

8. US EPA ID Number

E. State Transporter's ID (312) [illegible]

F. Transporter's Phone

9. Designated Facility Name and Site Address [illegible]

10. US EPA ID Number [illegible]

G. State Facility's ID [illegible]

H. Facility's Phone [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 | Waste No. |
|---|---|---|---|---|---|
| a. WASTE FLAMMABLE LIQUID NOS, FLAMMABLE LIQUID UN 1993 | [illegible] | DM | [illegible] | [illegible] | F003 |
| b. | | | [illegible] | | |
| c. | | | [illegible] | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above: GROSS WT. 3115 #

K. Handling Codes for Wastes Listed Above: 1 = [illegible]

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 [illegible] Signature [illegible] Month Day Year [illegible]

GENERATOR / TRANSPORTER / FACILITY

IN 084498

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

T.S.D. DETACH AND RETAIN THIS COPY

MRK

012733

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.

3. Generator's Name and Mailing Address: PPG LAMINATIONS

A. State Manifest Document Number: INA 0166025

4. Generator's Phone

5. Transporter 1 Company Name | 6. Use EPA ID Number | 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
GRIFFITH, IN 46319 | 10. Use EPA ID Number: IND 1 1 3 6 1 7 4 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. | 13 | DM | 650 | P | F003 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above: GROSS WT 4615

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: Fred Kaselke | Signature: Fred Kaselke | Date: 03 03 88

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Date

FACILITY

19. Discrepancy Indication Space: N/A

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

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
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PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

595 gal 12-20HRT-50 3/7/88
1 (55 GAL) MARINE SHALE 10/11/88 804093

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 0166025

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. [illegible] | 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: PPC LAMINATIONS, 999 LEE ST. [illegible]

4. Generator's Phone (312) [illegible]

A. State Manifest Document Number: INA 0166026

B. State Generator's ID: [illegible]

5. Transporter 1 Company Name: [illegible]

6. Use EPA ID Number: [illegible]

C. State Transporter's ID: [illegible]

D. Transporter's Phone: [illegible]

7. Transporter 2 Company Name: [illegible]

8. Use EPA ID Number: [illegible]

E. State Transporter's ID: [illegible]

F. Transporter's Phone: [illegible]

9. Designated Facility Name and Site Address: AMERICAN CHEMICAL SERVICE, 420 S. COLFAX, GREENWOOD, IND 46319

10. Use EPA ID Number: IND 0163 [illegible]

G. State Facility's ID: [illegible]

H. Facility's Phone: [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. | Waste No. |
|---|---|---|---|---|---|
| a. [illegible] | [illegible] | DM | [illegible] | | |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above: GROSS WT 5905

K. Handling Codes for Wastes Listed Above: [illegible]

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: FRED KOSELKE | Signature: Fred Koselke | Month 05 | Day 03 | 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: [illegible] | Month 05 | Day 05 | 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 0166026

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

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PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

204TC T50 [illegible]

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.I.D.0.4.5.5.4.2.4.1.1 | 5.0.0.0.1 | 1 of 1 | |

**GENERATOR**

3. Generator's Name and Mailing Address
PPG LAMINATIONS
9119 CEE STREET
[illegible]

A. State Manifest Document Number: INA 0166027

B. State Generator's ID: 03147000081

4. Generator's Phone ( 312 ) 364-7731

5. Transporter 1 Company Name | 6. Use EPA ID Number: IND 0 5 4 2 4

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
4233 COLFAX AVE
GRIFFITH, IND. 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) 924-2580

| 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. (PAINT THINNER), 3, UN1993, PG II | 001 | DM | 0055 | G | D001 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
GROSS WT. 4260

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.

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

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: FRED KOSECKE | Signature: Fred Kosecke | Date: Month 06 Day 30 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: JOHN S. HERDA | Signature: John S. Herda | Date: Month 07 Day 01 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.

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865 8-204 TSD 7/SA
4-204 TSD 7/SA

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PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

INA 0166027

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.

3. Generator's Name and Mailing Address: PPC LAMINATIONS

4. Generator's Phone ( )

A. State Manifest Document Number: INA 0166028

B. State Generator's ID

5. Transporter 1 Company Name | 6. Use EPA ID Number

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. CREEK AVE, GRIFFITH, IND. 46319

10. Use EPA ID Number: IND016[illegible]0265

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 FLAMMABLE LIQUID NOS. FLAMMABLE LIQUID UN 1993 | 020 | PM | 1000 | 1 | F003 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above: GROSS WT 7100

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: [illegible] | Signature: [illegible] | Month | Date Day | Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: FRED KOSELKE | Signature: Fred Koselke | Month 09 | Date Day 06 | Year 88

18. Transporter 2 Acknowledgement of Receipt of Materials

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

19. Discrepancy Indication Space: 6 PAILS (24 GALS) ASH GROVE - 11/15/88 AR 265 282

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

Printed/Typed Name: ARVIN WHITAKER | Signature: Arvin Whitaker | Month 09 | Day 07 | 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 0166028

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

DISTRIBUTION:
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PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

10-204TC TSO 9/9/88 9 Dec-204TC TSO 9/12 1(26 SAL-204X TSO 9/10/88

0015534

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

Mr. Frank

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 9-80

MANIFEST NUMBER 819-80-243

A 25033

## GENERATOR (SHIPPER) SECTION

| | |
|---|---|
| 1. COMPANY NAME | PPG INDUSTRIES |
| 2. EPA IDENTIFICATION NO. | WID0 59972935 |
| 3. COMMENTS/SPECIAL INSTRUCTIONS | |
| 4. P.O. BOX OR STREET ADDRESS | 10800 So 13th St |
| 5. CITY, STATE, ZIP CODE | OAK CREEK WIS |
| 6. TELEPHONE NUMBER | (414)-761-6000 |

| 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) |
|---|---|---|---|---|---|---|---|
| | | WASTE RESIN MIXTURE | FLAMMABLE LIQUID | UN 1866 | 1. Solid 3. Mixture 2. Liquid [2] | D001 D003 | ~39,600# |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | 1100 GAL |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

| 15. AUTHORIZED SIGNATURE | 16. NAME (Print) | 17. DATE SHIPPED M D Y |
|---|---|---|
| H. L. Timian | H. L. TIMIAN | 11 24 80 |

## TRANSPORTER SECTION

| | |
|---|---|
| 18. COMPANY NAME | MR FRANK INC |
| 19. EPA IDENTIFICATION NO. | FLD069506160 |
| 20. P.O. BOX OR STREET ADDRESS | 201 W 155th ST. |
| 21. CITY, STATE, ZIP CODE | SO HOLLAND ILL |
| 22. TELEPHONE NUMBER | (312)-596-3377 |
| 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 |
|---|---|---|
| Michael D Martin | MICHAEL D. MARTIN | 11 / 24 / 80 |

I hereby certify that the above named materials and indicated quantity(ies) has (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. |
|---|---|
| MR FRANK INC | FLD069506160 |

| 29. AUTHORIZED SIGNATURE | 30. NAME (Print) | 31. Date Accepted |
|---|---|---|
| Michael D Martin | MICHAEL MARTIN | 11 24 80 |

## HAZARDOUS WASTE FACILITY SECTION

| | |
|---|---|
| 32. FACILITY NAME | AMERICAN CHEMICAL SERVICE |
| 33. EPA IDENTIFICATION NO. | IND016360215 |
| 34. P.O. BOX OR STREET ADDRESS | PO Box 190 |
| 35. CITY, STATE, ZIP CODE | GRIFFITH INDIANA 46319 |
| 36. TELEPHONE NUMBER | (219) 924 4370 |
| 37. COMMENTS | T/N 61515 Unloaded in part TRANSPORTED BY MR FRANK 11-24 ON OUR PO# 78632 |

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 |
|---|---|---|
| X [signature] | | 11 24 80 |

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 |
|---|---|---|
| | | [illegible] |

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

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

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

0000282

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

Mr. Frank

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 9-80

MANIFEST NUMBER
819-80-775
A 25036

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID0 5997293
3. COMMENTS/SPECIAL INSTRUCTIONS: TRANSPORTED BY MR FRANK TO AMERICAN CHEMICAL SERVICE ON OUR PO # 18667 T/N 64621
4. P.O. BOX OR STREET ADDRESS: 10800 SO 13th ST
5. CITY, STATE, ZIP CODE: OAK CREEK WIS 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 3800 | WASTE RESIN MIXTURE | IGNITIBLE | UN1866 | 1. Solid 3. Mixture 2. Liquid [2] | F005 F005 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): HOWARD L TIMAN
17. DATE SHIPPED M D Y: 12 / 1 / 80

## TRANSPORTER SECTION

18. COMPANY NAME: MR. FRANK INC
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W 155th ST
21. CITY, STATE, ZIP CODE: SOUTH HOLLAND ILL 60473
22. TELEPHONE NUMBER: (312) 596-3377
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): [illegible]
26. Date Accepted M / D / Y: 12 / 9 / 80

I hereby certify that the above named materials and indicated quantity(ies) has (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: PO Box 190
35. CITY, STATE, ZIP CODE: GRIFFITH INDIANA 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS: Unloaded in west 12-1-80

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: 12 / 9 / 80

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 53707

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

FOR DNR USE ONLY

ZARDOUS 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 9-80

MANIFEST NUMBER
819-80-275
A 25038

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID 059472935
3. COMMENTS/SPECIAL INSTRUCTIONS: TRANSPORTED BY MR FRANK TO AMERICAN CHEMICAL SERVICE ON OUR PO # 18220
4. P.O. BOX OR STREET ADDRESS: 10800 So 13th ST
5. CITY, STATE, ZIP CODE: Oak Creek WIS 53154
6. TELEPHONE NUMBER: (414)-764-1000

| 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) |
|---|---|---|---|---|---|---|---|
| TANK WAGON | | WASTE RESIN MIXTURE | FLAMMABLE LIQUID | UN 1866 | 1. Solid 3. Mixture 2. Liquid [2] | [illegible] | [illegible] |
| BULK | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | 4[illegible]0 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | 40660 |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): Howard L. Timian
17. DATE SHIPPED M D Y: 12/5/80

## TRANSPORTER SECTION

18. COMPANY NAME: MR FRANK INC
19. EPA IDENTIFICATION NO.: ILD069586160
20. P.O. BOX OR STREET ADDRESS: 201 W 155th St
21. CITY, STATE, ZIP CODE: South Holland Ill 60473
22. TELEPHONE NUMBER: (312)-596-3377
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): Miguel Garcia
26. Date Accepted M / D / Y: 12/5/80

I hereby certify that the above named materials and indicated quantity(ies) has (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.: [illegible]
34. P.O. BOX OR STREET ADDRESS: PO Box 190
35. CITY, STATE, ZIP CODE: Griffith Indiana 46319
36. TELEPHONE NUMBER: (219)-[illegible]
37. COMMENTS: TO East AGIT TE - 12/5/80 JM 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: 12/5/80

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 53707

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 9-80

MANIFEST NUMBER
819-80-250
A 25041

## GENERATOR (SHIPPER) SECTION

| 1. COMPANY NAME | 2. EPA IDENTIFICATION NO. | 3. COMMENTS/SPECIAL INSTRUCTIONS |
|---|---|---|
| PPG INDUSTRIES | WIOO5497293S5 | TRANSPORTED BY MR FRANK TO AMERICAN CHEMICAL SERVICE ON OUR PUL 18743 P/C 49816 |
| 4. P.O. BOX OR STREET ADDRESS: 10800 S 13TH ST | | |
| 5. CITY, STATE, ZIP CODE: OAK CREEK WIS 53154 | 6. TELEPHONE NUMBER: 414 764-6000 | |

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 5000 | WASTE RESIN MIXTURE FLAMMABLE LIQUID | FLAMMABLE LIQUID | UN1866 | 1. Solid 3. Mixture 2. Liquid [2] | | 40 740 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

| 15. AUTHORIZED SIGNATURE | 16. NAME (Print) | 17. DATE SHIPPED M D Y |
|---|---|---|
| Howard L Timian | HOWARD L TIMIAN | 12 11 80 |

## TRANSPORTER SECTION

| 18. COMPANY NAME | 19. EPA IDENTIFICATION NO. |
|---|---|
| MR FRANK INC | ILD069506160 |
| 20. P.O. BOX OR STREET ADDRESS: 201 W 155TH ST | |
| 21. CITY, STATE, ZIP CODE: SOUTH HOLLAND ILL. | 22. TELEPHONE NUMBER: (312)-596-3371 |

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 |
|---|---|---|
| Michael Garcia | MIKE GARCIA | 12 11 80 |

I hereby certify that the above named materials and indicated quantity(ies) has (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 SERVICE | IND063050265 |
| 34. P.O. BOX OR STREET ADDRESS: P.O. BOX 190 GRIFFITH INDIANA 46319 | |
| 35. CITY, STATE, ZIP CODE | 36. TELEPHONE NUMBER: (219)-924-1370 |

37. COMMENTS

TO EAST ACIT 12/11/80 gjm
T-50

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 |
|---|---|---|
| X F Dunfee | F DUNFEE | 12 11 80 |

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 53707

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 9-80

MANIFEST NUMBER 919-[illegible]-281
A 25042

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID0599 7295
3. COMMENTS/SPECIAL INSTRUCTIONS: TRANSPORTED BY MR FRANK TO AMERICAN CHEMICAL SERVICE ON OUR PO# 18773
4. P.O. BOX OR STREET ADDRESS: 10800 So 13th St
5. CITY, STATE, ZIP CODE: OAK CREEK WIS
6. TELEPHONE NUMBER: (414)-761-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W Bulk | | WASTE RESIN MIXTURE | Flammable Liquid | UN1866 | 1. Solid 3. Mixture 2. Liquid [2] | [illegible] | 40440 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | 472 [illegible] |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): [illegible]
17. DATE SHIPPED M D Y: 2/16/80

## TRANSPORTER SECTION

18. COMPANY NAME: MR FRANK INC
19. EPA IDENTIFICATION NO.: [illegible]
20. P.O. BOX OR STREET ADDRESS: 201 W 155th ST
21. CITY, STATE, ZIP CODE: SOUTH HILLAND ILL 60473
22. TELEPHONE NUMBER: (312) 596-3377
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): Robert Perkins
26. Date Accepted M D Y: 12/16/80

I hereby certify that the above named materials and indicated quantity(ies) has (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.: [illegible]
34. P.O. BOX OR STREET ADDRESS: PO Box 190
35. CITY, STATE, ZIP CODE: GRIFFITH IND 46319
36. TELEPHONE NUMBER: (219) 921-9370
37. COMMENTS: TO EAST AGIT. 12/16/80 JTM 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): EDDNEEE
40. Date Accepted M / D / Y: 12/16/80

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 53707

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

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

0000356

DEPARTMENT OF NATURAL RESOURCES

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Please type or print clearly using ball point pen – press hard.

# HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 25043

## GENERATOR (SHIPPER) SECTION

| 1. COMPANY NAME | 2. EPA IDENTIFICATION NO. | 3. COMMENTS/SPECIAL INSTRUCTIONS |
|---|---|---|
| PPG INDUSTRIES | WID059972293 | TRANSPORTED BY MR FRANK TO AMERICAN CHEMICAL SERVICE ON DUE POW 18785 |
| 4. P.O. BOX OR STREET ADDRESS: 1801 So 13th St | | |
| 5. CITY, STATE, ZIP CODE: Oak Creek WIS 53154 | 6. TELEPHONE NUMBER: (414) 764 [illegible] | |

| 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) |
|---|---|---|---|---|---|---|---|
| T/U Bulk | 5000 | WASTE RESIN MIXTURE | FLAMMABLE LIQUID | UN1866 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 36,540 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

| 15. AUTHORIZED SIGNATURE | 16. NAME (Print) | 17. DATE SHIPPED M D Y |
|---|---|---|
| [signature] | Maurice L Tilman | 12 17 80 |

## TRANSPORTER SECTION

| 18. COMPANY NAME | 19. EPA IDENTIFICATION NO. |
|---|---|
| MR FRANK INC. | ILD069501601 |
| 20. P.O. BOX OR STREET ADDRESS: 201 W 155th ST | |
| 21. CITY, STATE, ZIP CODE: South Holland Ill | 22. TELEPHONE NUMBER: (312) 331-3377 |

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 |
|---|---|---|
| [signature] | [illegible] | 12 17 80 |

I hereby certify that the above named materials and indicated quantity(ies) has (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 Service | IND[illegible] |
| 34. P.O. BOX OR STREET ADDRESS: P.O. Box 190 | |
| 35. CITY, STATE, ZIP CODE: Griffith Indiana 46319 | 36. TELEPHONE NUMBER: (219) 924-[illegible] |

37. COMMENTS

2500 To EAST 12/17/80 gm T-50
2500 To WEST 12/17/80 gm T-50

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] | Peter Duffy | 12 17 80 |

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. |
|---|---|
| [illegible] | |

| 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 53707

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 9-80

MANIFEST NUMBER
A 25047

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries Inc.
2. EPA IDENTIFICATION NO.: WID0 599 72735
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported By Mr Frank to American Chemical Services PPG manifest 719-[illegible]-227 on Purchase Order 17825
4. P.O. BOX OR STREET ADDRESS: 10700 S 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek WI 53154
6. TELEPHONE NUMBER: (414) 764 6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4750 | Waste Resin Mixture Flammable Liquid | Flammable Liquid | UN 1866 | 1. Solid 3. Mixture 2. Liquid [2] | | 44,140 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): Martin Schoenbaum
17. DATE SHIPPED M D Y: 12 29 80

## TRANSPORTER SECTION

18. COMPANY NAME: MR. FRANK INC.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155 ST.
21. CITY, STATE, ZIP CODE: South Holland
22. TELEPHONE NUMBER: 312 (596) 3377
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: Robert Perkins
25. NAME (Print): Robert Perkins
26. Date Accepted: 12 29 80

I hereby certify that the above named materials and indicated quantity(ies) has (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.: IND016360265
34. P.O. BOX OR STREET ADDRESS
35. CITY, STATE, ZIP CODE
36. TELEPHONE NUMBER: ( ).
37. COMMENTS: Off Spec. Rejected at Waste Facility.

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: 12 29 80

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 53707

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 9-80

MANIFEST NUMBER
A 25048

## GENERATOR (SHIPPER) SECTION

| 1. COMPANY NAME | 2. EPA IDENTIFICATION NO. | 3. COMMENTS/SPECIAL INSTRUCTIONS |
|---|---|---|
| PPG Industries, Inc. | WID[illegible] | [illegible] |
| 4. P.O. BOX OR STREET ADDRESS | | |
| [illegible] 15th Street | | |
| 5. CITY, STATE, ZIP CODE | 6. TELEPHONE NUMBER | |
| [illegible] WI [illegible] | (414) [illegible] | |

| 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) |
|---|---|---|---|---|---|---|---|
| T/W 1 dr | 3200 | Waste Resin mixture | Flammable Liquid | UN[illegible] | 1. Solid 3. Mixture 2. Liquid [2] | [illegible] | [illegible] |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): [illegible]
17. DATE SHIPPED M D Y: [illegible]

## TRANSPORTER SECTION

| 18. COMPANY NAME | 19. EPA IDENTIFICATION NO. |
|---|---|
| MR Transport Inc | ILD[illegible] |
| 20. P.O. BOX OR STREET ADDRESS | |
| [illegible] 173rd Street | |
| 21. CITY, STATE, ZIP CODE | 22. TELEPHONE NUMBER |
| South Holland IL 60473 | (312) [illegible] |

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 |
|---|---|---|
| [signature] | Miguel Garcia | 12/[illegible] |

I hereby certify that the above named materials and indicated quantity(ies) has (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 Service | ILD[illegible] |
| 34. P.O. BOX OR STREET ADDRESS | |
| P.O. Box [illegible] | |
| 35. CITY, STATE, ZIP CODE | 36. TELEPHONE NUMBER |
| C[illegible] IL [illegible] | (312) [illegible] |

37. COMMENTS
TO WEST AGIT 12/31/80 Jim Murphy
T-50

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] | [illegible] | 12/31/80 |

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 53707

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

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

INSTRUCTIONS: Use ball point pen with Firm Pressure.
All blanks must be filled out.
Generator: Retain fourth or pink copy.
Transporter: Retain third or canary copy.
Disposal Facility: Retain second or green copy:
Return first or white copy to Generator

819-80-887

# HAZARDOUS WASTE MANIFEST

Manifest Number WISCONSIN A 2504

Shipping Date 12/29/80

| GENERATOR INFORMATION | TRANSPORTER INFORMATION | TREATMENT, STORAGE, OR DISPOSER INFORMATION |
|---|---|---|
| I.D. Code 25-0730-080-819 | I.D. Code 0079/014 Ill. | I.D. Code IND 042 |
| Name PPG Industries, Inc. | D069506160 Name Mr. Frank, Inc. | Name American Chemical |
| Address 10800 S. 13th St. Oak Creek, WI 53154 | Address 201 W. 155th St. So. Holland, IL 60473 | Address Griffith, Indiana |
| Responsible Individual Dr. N. Streff | Resp. Ind. Rich Grad | Resp. Ind. James Torno |
| 24 Hr. Tel. No. 414/434-3151 | 24 Hr. Tel. No. 312/596-5377 | 24 Hr. Tel. No. |

THIS SECTION TO BE COMPLETED BY GENERATOR (WASTE DATA):

Description: Waste Lead Mix Oxide Ammonium Salts, Vi

Class: Ignitable X Corrosive Reactive Toxic X Infectious Radioactive

Quantity: Wt. Vol. 47500 L No. of Containers (Type)

Physical State: SOLID SLUDGE LIQUID X

0.8 1.0 1.2 1.4

Specific Gravity

WATER #20 OIL 600 W OIL SOLID

Viscosity

100°F 120°F 140°F

Flash Point

1 5 9 13

p-H

COMPOSITION: ABOUT 9.0% WATER

| | | | |
|---|---|---|---|
| % | | % | |
| % | | % | |
| % | | % | |
| % | | % | |

Special Handling Instructions and Comments: PPG Purchase Order 18725
Mr Frank NO 65293

I HEREBY 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 DOT AND THE US-EPA.

AUTHORIZED SIGNATURE R Schoellmann DATE 12/29/80

THIS SECTION TO BE COMPLETED BY THE TRANSPORTER:

| VEHICLE IDENTIFICATION NO. | TRANSPORTER'S PERMIT NO. | STATE | TRANSPORTER'S STATE NO. |
|---|---|---|---|
| 0079/014 | | Ill. | |

| PICK-UP DATE | QUANTITY | OFF LOAD DATE |
|---|---|---|
| 12-29-80 | 4,750 | |

I HEREBY CERTIFY THAT THE ABOVE DESCRIBED WASTES WERE ACCEPTED FOR TRANSPORTATION AT THE PRODUCER'S SITE AND DELIVERED TO AND OFF-LOADED AT THE HAZARDOUS WASTE FACILITY, BOTH AS LISTED HEREUPON.

AUTHORIZED SIGNATURE (DRIVER) Robert Robinson DATE 12-29-80

AUTHORIZED SIGNATURE (RELAY DRIVER) DATE

THIS SECTION TO BE COMPLETED BY THE RECEIVER:

I HEREBY CERTIFY THAT THE ABOVE DESCRIBED WASTES WERE DELIVERED TO THIS FACILITY, THAT THE FACILITY IS AUTHORIZED AND PERMITTED TO RECEIVE SUCH WASTES AND THAT THE FINAL DISPOSITION WAS AS SHOWN.

AUTHORIZED SIGNATURE

DATE

NAME AND LOCATION OF RECEIVING FACILITY W. Dunn 12/29/80

DISPOSITION:

% Incineration % Treatment/Processing

RECEIVED % Recovery % Land Disposal % Storage

LOADS TO BE RETURNED % Transship to

% Other (Specify)

FORM 4542 10-78.

DISPOSAL FACILITY

00:0097

INSTRUCTIONS: Use ball point pen with Firm Pressure. All blanks must be filled out. Generator: Retain fourth or pink copy. Transporter: Retain third or canary copy. Disposal Facility: Retain second or green copy. Return first or white copy to Generator.

T/N

WIS- A 25048

# HAZARDOUS WASTE MANIFEST

Manifest Number 819- 80-288

Shipping Date December 30, 1980

| GENERATOR INFORMATION | TRANSPORTER INFORMATION | TREATMENT, STORAGE, OR DISPOSER INFORMATION |
|---|---|---|
| I.D. Code WID 059972935 | I.D. Code ILD 069506160 | I.D. Code IND 016360265 |
| Name PPG Industries, Inc. | Name Mr. Frank, Inc. | Name American Chemical Serv |
| Address 10800 S. 13th St. Oak Creek, WI 53154 | Address 201 W. 155th St. So. Holland, IL 60473 | Address P.O. Box 160 Griffith, IN 46319 |
| Responsible Individual L. N. Streff | Resp. Ind. Rich Grad | Resp. Ind. James Tarpo |
| 24 Hr. Tel. No. (412) 434-3131 | 24 Hr. Tel. No. (312) 596-3377 | 24 Hr. Tel. No. 219-924-4870 |

*THIS SECTION TO BE COMPLETED BY GENERATOR (WASTE DATA):*

Description: Waste Resin Mixture

Class: Ignitable X Corrosive ___ Reactive ___ Toxic X Infectious ___ Radioactive ___

Quantity: Wt. 31060 Vol. 3200 No. ___ of Containers ___ (Type)

| | | | | | COMPOSITION | | | |
|---|---|---|---|---|---|---|---|---|
| Physical State | SOLID | SLUDGE | LIQUID | | | | | |
| | 0.8 | 1.0 | 1.2 | 1.4 | % | | % | |
| Specific Gravity | | | | | % | | % | |
| Viscosity | WATER | #20 OIL | 600 W OIL | SOLID | % | | % | |
| Flash Point | 100°F | 120°F | 140°F | | % | | % | |
| p-H | 1 | 5 | 9 | 13 | % | | % | |

Special Handling Instructions and Comments: Transportation by Mr Frank to American Chemical Services under PO 18838

I HEREBY 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 DOT AND THE US-EPA.

AUTHORIZED SIGNATURE: H Scheerbaum

DATE: 12/30/80

*THIS SECTION TO BE COMPLETED BY THE TRANSPORTER:*

| VEHICLE IDENTIFICATION NO. | TRANSPORTER'S PERMIT NO. | STATE | TRANSPORTER'S STATE NO. |
|---|---|---|---|
| 19-294 Ill | 0079/014 | Ill | |

| PICK-UP DATE | QUANTITY | OFF LOAD DATE |
|---|---|---|
| 12/30/80 | | |

I HEREBY CERTIFY THAT THE ABOVE DESCRIBED WASTES WERE ACCEPTED FOR TRANSPORTATION AT THE PRODUCER'S SITE AND DELIVERED TO AND OFF-LOADED AT THE HAZARDOUS WASTE FACILITY, BOTH AS LISTED HEREUPON.

AUTHORIZED SIGNATURE (DRIVER): Miguel Garcia — DATE: 12/30/80

AUTHORIZED SIGNATURE (RELAY DRIVER) — DATE

*THIS SECTION TO BE COMPLETED BY THE RECEIVER:*

I HEREBY CERTIFY THAT THE ABOVE DESCRIBED WASTES WERE DELIVERED TO THIS FACILITY, THAT THE FACILITY IS AUTHORIZED AND PERMITTED TO RECEIVE SUCH WASTES AND THAT THE FINAL DISPOSITION WAS AS SHOWN.

AUTHORIZED SIGNATURE: [signature]

DATE: 12/31/80

NAME AND LOCATION OF RECEIVING FACILITY: American Chem

DISPOSITION:

100 % Incineration ___ % Treatment/Processing

___ % Recovery ___ % Land Disposal ___ % Storage

___ % Transship to ___

___ % Other (Specify) ___

FORM 4542 10-78.

DISPOSAL FACILITY

0000093

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 9-80

MANIFEST NUMBER: A 48107

0034307

## GENERATOR (SHIPPER) SECTION

| 1. COMPANY NAME | 2. EPA IDENTIFICATION NO. | 3. COMMENTS/SPECIAL INSTRUCTIONS |
|---|---|---|
| PPG INDUSTRIES | WID059972935 | Transported by Mr. Frank to American Chemical Service – on our P.O.#19001 |
| 4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street | | |
| 5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154 | 6. TELEPHONE NUMBER: ( 414 ) 764-6000 | |

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 480 Gals | Waste Paint | Flammable Liquid | UN1263 | 1. Solid, 3. Mixture 2. Liquid [2] | F003 F005 | 21420 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: D.F. Scudder

16. NAME (Print): D.F. Scudder

17. DATE SHIPPED: M 2 D 11 Y 82

## TRANSPORTER SECTION

| 18. COMPANY NAME | 19. EPA IDENTIFICATION NO. |
|---|---|
| Mr. Frank Inc. | ILD069506160 |
| 20. P.O. BOX OR STREET ADDRESS: 201 West 115th Street | |
| 21. CITY, STATE, ZIP CODE: South Holland, Illinois | 22. TELEPHONE NUMBER: ( 312 ) 596-3377 |

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 |
|---|---|---|
| Robert T. Perkins | Robert T. Perkins | M 2 D 11 Y 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 |

To 211K T-50
GRM 2/11/82

HAZARDOUS WASTE FACILITY

## HAZARDOUS WASTE FACILITY SECTION

| 32. FACILITY NAME | 33. EPA IDENTIFICATION NO. |
|---|---|
| American Chemical Service | IND01630265 |
| 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

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 |
|---|---|---|
| Bob Mauck | Bob Mauck | M 2 D 11 Y 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 53707

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 9-80

MANIFEST NUMBER
819-81-08
A 11126

000743

## GENERATOR (SHIPPER) SECTION

| 1. COMPANY NAME | 2. EPA IDENTIFICATION NO. | 3. COMMENTS/SPECIAL INSTRUCTIONS |
|---|---|---|
| PPG INDUSTRIES | WID059972935 | Transported by MR. FRANK to AMERICAN CHEMICAL SERVICE on our P.O. 19001 |
| 4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street | | |
| 5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154 | 6. TELEPHONE NUMBER: (414) - 767-6000 | |

| 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) |
|---|---|---|---|---|---|---|---|
| Tank Wagon | 17 TO | Waste Resin Mixture | Flammable Liquid | UN1866 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 42220 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): Carl Harrison
17. DATE SHIPPED: M D Y: 1 / 30 / 81

## TRANSPORTER SECTION

| 18. COMPANY NAME | 19. EPA IDENTIFICATION NO. |
|---|---|
| MR. FRANK INC | ILD069506160 |
| 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

I hereby certify that the above named materials and indicated quantity(ies) has (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] | Dwight Hart | 1 / 30 / 81 |

I hereby certify that the above named materials and indicated quantity(ies) has (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 SERVICE | ILD016360265 |
| 34. P.O. BOX OR STREET ADDRESS: P.O. Box 190 | |
| 35. CITY, STATE, ZIP CODE: Griffith, Indiana 46319 | 36. TELEPHONE NUMBER: ( ) - |

37. COMMENTS

TO WEST 40 I R 1/30/81 T-508
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) | 40. Date Accepted M / D / Y |
|---|---|---|
| [signature] | EDWARDS | 1 / 30 / 81 |

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 53707

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 9-80

MANIFEST NUMBER
819-21-11
A11129

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID 055979935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank NO 65912
4. P.O. BOX OR STREET ADDRESS: 10700 South 13th Street
5. CITY, STATE, ZIP CODE: OAK Creek WI
6. TELEPHONE NUMBER: (414)-764 6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4500 | RESIN MIXTURE | Flammable Liquid | UN1866 | 1. Solid 3. Mixture 2. Liquid ☒ | F003 F005 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid ☐ | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid ☐ | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: H Scheerbaum
16. NAME (Print): Martin H Scheerbaum
17. DATE SHIPPED: M D Y 2/3/81

## TRANSPORTER SECTION

18. COMPANY NAME: Mr Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 811 W 155th Street
21. CITY, STATE, ZIP CODE: South Holland IL
22. TELEPHONE NUMBER: (312)-596-3377
23. COMMENTS: Flashpoint 78°F

I hereby certify that the above named materials and indicated quantity(ies) has (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: Michael D. Martin
25. NAME (Print): MICHAEL MARTIN
26. Date Accepted: 2/3/81

I hereby certify that the above named materials and indicated quantity(ies) has (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 01[illegible]
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith Indiana 46319
36. TELEPHONE NUMBER: (219)-9[illegible]
37. COMMENTS: TO WEST AGIT R. T-50 2/3/81 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): FWNFEE
40. Date Accepted: 2/3/81

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 53707

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

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

000746

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 9-80

MANIFEST NUMBER
8-9-81-12
A11130

000745

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID 099 72935
3. COMMENTS/SPECIAL INSTRUCTIONS: TRANSPORTED BY MR FRANK TO AMERICAN CHEMICAL SERVICE IN BUR. PA 19001.
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th ST
5. CITY, STATE, ZIP CODE: OAK CREEK WIS 53154
6. TELEPHONE NUMBER: (414)-764-1000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4500 | WASTE RESIN MIXTURE FLAMMABLE LIQUID | FLAMMABLE LIQUID | UN1866 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | [illegible] GAL. |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: Howard L. Timian
16. NAME (Print): HOWARD L. TIMIAN
17. DATE SHIPPED M D Y: 2/5/81

## TRANSPORTER SECTION

18. COMPANY NAME: MR FRANK INC
19. EPA IDENTIFICATION NO.: IL 0069506160
20. P.O. BOX OR STREET ADDRESS: 701 W 15th ST
21. CITY, STATE, ZIP CODE: So HOLLAND ILL 60473
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS: FLASH POINT 75°

I hereby certify that the above named materials and indicated quantity(ies) has (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: Donald H Bult
25. NAME (Print): DONALD H BULT
26. Date Accepted M D Y: 2/5/81

I hereby certify that the above named materials and indicated quantity(ies) has (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 011 [illegible]
34. P.O. BOX OR STREET ADDRESS: PO BOX 190 GRIFFITH IND 46319
35. CITY, STATE, ZIP CODE: GRIFFITH, INDIANA 46319
36. TELEPHONE NUMBER: (219)-921-9370
37. COMMENTS: TO EAST AGIT R T-50 Jim Murphy 2/6/81

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): FDONFEE
40. Date Accepted M / D / Y: 2/6/81

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 53707

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 9-80

MANIFEST NUMBER 819-81-13
A 11131

000744

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059472935
3. COMMENTS/SPECIAL INSTRUCTIONS: TRANSPORTED BY MR FRANK TO AMERICAN CHEMICAL SERVICE ON OUR P.O. # 15001
4. P.O. BOX OR STREET ADDRESS: 10800 SO 13th St
5. CITY, STATE, ZIP CODE: OAK CREEK WIS 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4500 gal | WASTE RESIN MIXTURE | FLAMMABLE LIQUID | UN1866 | 1. Solid 3. Mixture 2. Liquid [3] | F003 F005 | 43,000 |
| | | FLAMMABLE LIQUID | | | 1. Solid 3. Mixture 2. Liquid [ ] | | 38,160 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: Howard L Timian
16. NAME (Print): HOWARD L. TIMIAN
17. DATE SHIPPED M D Y: 2/7/81

## TRANSPORTER SECTION

18. COMPANY NAME: MR FRANK INC
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 701 W 159th ST
21. CITY, STATE, ZIP CODE: SOUTH HOLLAND ILL. 60473
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS: FLASH POINT

I hereby certify that the above named materials and indicated quantity(ies) has (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: Robert Perkins
25. NAME (Print): Robert Perkins
26. Date Accepted M/D/Y: 2/9/81

I hereby certify that the above named materials and indicated quantity(ies) has (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.: [illegible]
34. P.O. BOX OR STREET ADDRESS: PO Box 190
35. CITY, STATE, ZIP CODE: GRIFFITH INDIANA 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS: TO WEST AGIT R 2/9/81 7:50 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): FOWLER
40. Date Accepted: 2/9/81

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 53707

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 9-80

MANIFEST NUMBER
A11133

247000

## GENERATOR (SHIPPER) SECTION

| 1. COMPANY NAME | 2. EPA IDENTIFICATION NO. | 3. COMMENTS/SPECIAL INSTRUCTIONS |
|---|---|---|
| PIN INDUSTRIES | WIDO 994729[illegible] | TRANSPORTED BY ME FRANCE [illegible] HAZARDOUS CHEMICAL [illegible] ON OUR PON 1901 |
| 4. P.O. BOX OR STREET ADDRESS: 1818 S. 12th St | | |
| 5. CITY, STATE, ZIP CODE: Eau Claire, Wisconsin | 6. TELEPHONE NUMBER: (715) 834-[illegible] | |

| 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) |
|---|---|---|---|---|---|---|---|
| T/CO | 4/550 | [illegible] | [illegible] | [illegible] | 1. Solid 3. Mixture 2. Liquid | [illegible] | [illegible] |
| | | | | | 1. Solid 3. Mixture 2. Liquid | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [illegible]
16. NAME (Print): [illegible]
17. DATE SHIPPED M D Y: 2/12/81

## TRANSPORTER SECTION

| 18. COMPANY NAME | 19. EPA IDENTIFICATION NO. |
|---|---|
| Mid-State Inc | [illegible] |
| 20. P.O. BOX OR STREET ADDRESS: [illegible] | |
| 21. CITY, STATE, ZIP CODE: South Beloit, Illinois | 22. TELEPHONE NUMBER: (815) 389-[illegible] |

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 |
|---|---|---|
| [illegible] | Robert Rawls | 2/12/81 |

I hereby certify that the above named materials and indicated quantity(ies) has (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. |
|---|---|
| Midwest Chemical Services | IND [illegible] |
| 34. P.O. BOX OR STREET ADDRESS: P.O. Box 190 | |
| 35. CITY, STATE, ZIP CODE: Griffith, Indiana | 36. TELEPHONE NUMBER: (219) 924-[illegible] |

37. COMMENTS
TO EAST AGITR 2/12/81 Jim Murphy T-50

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 |
|---|---|---|
| [illegible] | [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. |
|---|---|
| EDON HE | |

| 43. AUTHORIZED SIGNATURE | 44. NAME (Print) | 45. Date Accepted M D Y |
|---|---|---|
| | | 3/12/81 |

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

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

FOR DNR USE ONLY

GENERATOR

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 9-80

B/L 47827

MANIFEST NUMBER
817-81-17
A 11136

000741

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries Inc
2. EPA IDENTIFICATION NO.: WID059978935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported under PO #19001 66564
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek WI 53154
6. TELEPHONE NUMBER: (414)-764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4500 gal | Waste Resin Mixture Flammable Liquid | Flammable Liquid | UN1866 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 39400 ~~39400~~ |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: H Scheerbaum
16. NAME (Print): Martin H Scheerbaum
17. DATE SHIPPED M D Y: 2 16 81

## TRANSPORTER SECTION

18. COMPANY NAME: MR FRANK INC
19. EPA IDENTIFICATION NO.: ILD0[illegible]
20. P.O. BOX OR STREET ADDRESS: 201 W 155th Street
21. CITY, STATE, ZIP CODE: South Holland ILL
22. TELEPHONE NUMBER: (312)-596-3377
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: Robert G Perkins
25. NAME (Print): Robert G. Perkins
26. Date Accepted M D Y: 2 16 81

I hereby certify that the above named materials and indicated quantity(ies) has (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.: IND016[illegible]
34. P.O. BOX OR STREET ADDRESS: PO Box 190
35. CITY, STATE, ZIP CODE: Griffith Indiana 46319
36. TELEPHONE NUMBER: (219)-924-4370
37. COMMENTS: TO WEST AGIT TK T-50 2/16/81 Jim Murphy

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: 02 16 81

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 53707

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 9-80

MANIFEST NUMBER 219-81-19
A11137

000740

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries Inc
2. EPA IDENTIFICATION NO.: WID 059779135
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported under PO 19001 # 66631
4. P.O. BOX OR STREET ADDRESS: 10 800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W bulk | 4550 | Waste Resin Mixture | Flammable Liquid | UN1166 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 39140 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: H Scheerbaum
16. NAME (Print): Marlin H. Scheerbaum
17. DATE SHIPPED: M D Y 2 19 81

## TRANSPORTER SECTION

18. COMPANY NAME: MR Frank Inc
19. EPA IDENTIFICATION NO.: ILD 069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 155th Street
21. CITY, STATE, ZIP CODE: South Holland ILL 60473
22. TELEPHONE NUMBER: (312) 596-3377
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: Robert Perkins
25. NAME (Print): Robert Perkins
26. Date Accepted: M D Y 2 19 81

I hereby certify that the above named materials and indicated quantity(ies) has (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 016360[illegible]
34. P.O. BOX OR STREET ADDRESS: PO Box 160
35. CITY, STATE, ZIP CODE: Griffith IN 46319
36. TELEPHONE NUMBER: (219) 994-4370
37. COMMENTS: TO WEST AGIT TC 2/19/81 T-50 Jim Murphy

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

38. AUTHORIZED SIGNATURE: James Murphy
39. NAME (Print): James Murphy
40. Date Accepted: M D Y 2 19 81

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 53707

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 9-80

MANIFEST NUMBER
[illegible]
A 11138

000750

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries Inc
2. EPA IDENTIFICATION NO.: WID [illegible]
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported under PPG Order No. [illegible]
4. P.O. BOX OR STREET ADDRESS: [illegible] 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek WI [illegible]
6. TELEPHONE NUMBER: (414)-764-[illegible]

| 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) |
|---|---|---|---|---|---|---|---|
| T/W Bulk | 4,550 | WASTE RESIN MIXTURE | Flammable Liquid | UN1866 | 1. Solid 3. Mixture 2. Liquid ☐ | F003 F005 | 37680 |
| | | | | | 1. Solid 3. Mixture 2. Liquid ☐ | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid ☐ | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): H. Lowell Timan
17. DATE SHIPPED: M D Y 3/5/81

## TRANSPORTER SECTION

18. COMPANY NAME: Mr Frank Inc
19. EPA IDENTIFICATION NO.: [illegible]
20. P.O. BOX OR STREET ADDRESS: 201 West 155 Street
21. CITY, STATE, ZIP CODE: South Holland IL 60473
22. TELEPHONE NUMBER: (312)-[illegible]-3377
23. COMMENTS: MR FRANK Log No.

I hereby certify that the above named materials and indicated quantity(ies) has (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): Robert Perkins
26. Date Accepted: M / D / Y 3/5/81

I hereby certify that the above named materials and indicated quantity(ies) has (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.: [illegible]
34. P.O. BOX OR STREET ADDRESS: PO Box [illegible]
35. CITY, STATE, ZIP CODE: Griffith In 46319
36. TELEPHONE NUMBER: (219)-[illegible]
37. COMMENTS: TO EAST AGIT K T-50 3/5/81 Jim Murphy

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 03/25/81

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 53707

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

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# HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

1/1 1/1206

MANIFEST NUMBER
819-81-20
A 11140

000739

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WI 0005997293
3. COMMENTS/SPECIAL INSTRUCTIONS: TRANSPORTED BY MR FRANK TO AMERICAN CHEMICAL SERVICE ON OUR POE 14001 TN 1206
4. P.O. BOX OR STREET ADDRESS: 10800 S 13th ST
5. CITY, STATE, ZIP CODE: OAK CREEK WIS 53154
6. TELEPHONE NUMBER: (414)-769-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4550 | WASTE RESIN MIXTURE FLAMMABLE LIQUID | FLAMMABLE LIQUID | UN1866 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 45000GAL 28940 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: Howard L Tinman
16. NAME (Print): HOWARD L TINMAN
17. DATE SHIPPED M D Y: 2/24/81

## TRANSPORTER SECTION

18. COMPANY NAME: MR FRANK INC.
19. EPA IDENTIFICATION NO.: ILD064306160
20. P.O. BOX OR STREET ADDRESS: 2010 155th ST
21. CITY, STATE, ZIP CODE: SOUTH HOLLAND ILL
22. TELEPHONE NUMBER: (312)-541-3377
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: Michael Martin
25. NAME (Print): MICHAEL MARTIN
26. Date Accepted M D Y: 2/24/81

I hereby certify that the above named materials and indicated quantity(ies) has (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.: IND011336215
34. P.O. BOX OR STREET ADDRESS: PO BOX 190
35. CITY, STATE, ZIP CODE: GRIFFITH INDIANA 46319
36. TELEPHONE NUMBER: (219)-924-4370
37. COMMENTS: TO EAST ACID K 2/24/81 T-50 Jim Murphy

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: 2/24/81

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 53707

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.
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# HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER: A 11141

## GENERATOR (SHIPPER) SECTION

| 1. COMPANY NAME | 2. EPA IDENTIFICATION NO. | 3. COMMENTS/SPECIAL INSTRUCTIONS |
|---|---|---|
| PPG INDUSTRIES | WIDOS997293 | TRANSPORTED BY MR FRANK TO AMERICAN CHEMICAL SERVICE ON OUR PO# 19001 |
| 4. P.O. BOX OR STREET ADDRESS: 10400 SOUTH 13th ST | | |
| 5. CITY, STATE, ZIP CODE: OAK CREEK WIS. 53154 | 6. TELEPHONE NUMBER: (414)-764-6000 | |

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4550 | WASTE RESIN MIXTURE FLAMMABLE LIQUID | FLAMMABLE LIQUID | UN1866 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 39460 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: Howard L Tinman
16. NAME (Print): HOWARD L. TINIAN
17. DATE SHIPPED M D Y: 2 12 81

## TRANSPORTER SECTION

| 18. COMPANY NAME | 19. EPA IDENTIFICATION NO. |
|---|---|
| MR FRANK INC | ILD064506166 |
| 20. P.O. BOX OR STREET ADDRESS: 701 W 159th ST | |
| 21. CITY, STATE, ZIP CODE: SOUTH HOLLAND ILL. 60473 | 22. TELEPHONE NUMBER: (312)-596-3377 |

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 |
|---|---|---|
| Robert Perkins | ROBERT PERKINS | 2 12 81 |

I hereby certify that the above named materials and indicated quantity(ies) has (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 SERVICE | IND081365265 |
| 34. P.O. BOX OR STREET ADDRESS: P.O. Box 190 | |
| 35. CITY, STATE, ZIP CODE: GRIFFITH INDIANA 46319 | 36. TELEPHONE NUMBER: (219)-924-4330 |

37. COMMENTS
TO EAST AGITE T-50 2/26/81
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) | 40. Date Accepted M D Y |
|---|---|---|
| BOB MALICK | BOB MALICK | 02/26/81 |

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 53707

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

FOR DNR USE ONLY [ ]

HAZARDOUS WASTE FACILITY

847000

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 9-80

MANIFEST NUMBER
819-81-
A 11142

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries Inc.
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported under PPG Order No. 19001
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: ( 414 ) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W Bulk | 660 | Waste Resin Mixture | Flammable Liquid | UN1866 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | [illegible] |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): [illegible]
17. DATE SHIPPED M D Y: 3 / 10 / 81

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 155th Street
21. CITY, STATE, ZIP CODE: South Holland, IL 60473
22. TELEPHONE NUMBER: ( 312 ) 596-3377
23. COMMENTS: Mr. Frank Log. No.

I hereby certify that the above named materials and indicated quantity(ies) has (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]
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

## HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: IND016360265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 160
35. CITY, STATE, ZIP CODE: Griffith, INDIANA 46319
36. TELEPHONE NUMBER: ( 219 ) 924-4370
37. COMMENTS: TO EAST ACRE T-50 3/10/81 Jim Mroz

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

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

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME:
43. AUTHORIZED SIGNATURE:
44. NAME:

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

HAZARDOUS WASTE FACILITY

000751

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 9-80

MANIFEST NUMBER: A11143

000752

## GENERATOR (SHIPPER) SECTION

| 1. COMPANY NAME | 2. EPA IDENTIFICATION NO. | 3. COMMENTS/SPECIAL INSTRUCTIONS |
|---|---|---|
| PPG Industries Inc. | WID059972935 | TRANSPORTED BY MR FRANK CO DOT PG II 1900 |
| 4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th Street | | |
| 5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154 | 6. TELEPHONE NUMBER: (414)-764-6000 | |

| 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) |
|---|---|---|---|---|---|---|---|
| T/W Bulk | 4,500 | Waste Resin Mixture | Flammable Liquid | UN1866 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 27720 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: Howard L. Tinman
16. NAME (Print): Howard L. Tinman
17. DATE SHIPPED M D Y: 3 12 81

## TRANSPORTER SECTION

| 18. COMPANY NAME | 19. EPA IDENTIFICATION NO. |
|---|---|
| Mr. Frank Inc. | ILD069506160 |
| 20. P.O. BOX OR STREET ADDRESS: 201 West 155th Street | |
| 21. CITY, STATE, ZIP CODE: South Holland, IL 60473 | 22. TELEPHONE NUMBER: (312)-596-3377 |

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 |
|---|---|---|
| Robert Perkins | Robert Perkins | 3 12 81 |

I hereby certify that the above named materials and indicated quantity(ies) has (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 | IND016360265 |
| 34. P.O. BOX OR STREET ADDRESS: P.O. Box 160 | |
| 35. CITY, STATE, ZIP CODE: Griffith, Indiana 46319 | 36. TELEPHONE NUMBER: (219)-924-4370 |

37. COMMENTS: TO 203X 3/12/81 T-50 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) | 40. Date Accepted M / D / Y |
|---|---|---|
| Bob Mauck | Bob Mauck | 3/13/81 |

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 53707

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 9-80

MANIFEST NUMBER
A 11144

000749

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID 59972935
3. COMMENTS/SPECIAL INSTRUCTIONS: TRANSPORTED BY MR FRANK TO AMERICAN CHEMICAL SERVICE ON OUR PO # 19001
4. P.O. BOX OR STREET ADDRESS: [illegible] 50 13th ST
5. CITY, STATE, ZIP CODE: BAR CREEK WIS. 53154
6. TELEPHONE NUMBER: (919)-719-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4000 | WASTE RESIN MIXTURE FLAMMABLE LIQUID | FLAMMABLE UN 1866 | UN 1866 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 4/620 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): [illegible]
17. DATE SHIPPED: M D Y 3 13 81

## TRANSPORTER SECTION

18. COMPANY NAME: MR FRANK INC
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W 155th ST
21. CITY, STATE, ZIP CODE: SOUTH HOLLAND ILL 60173
22. TELEPHONE NUMBER: (312)-596-3377
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): M. GARCIA
26. Date Accepted: M D Y 3 13 81

I hereby certify that the above named materials and indicated quantity(ies) has (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.: [illegible]
34. P.O. BOX OR STREET ADDRESS: PO BOX 190
35. CITY, STATE, ZIP CODE: GRIFFITH INDIANA 46319
36. TELEPHONE NUMBER: (219)-929-9570
37. COMMENTS:
TO EAST AGIT 4200 T-50 3/3/81
TO WEST AGIT 400 T-50 3/3/81
Jim Murphy

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 03 03 81

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 53707

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

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# HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 11147

000756

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME
2. EPA IDENTIFICATION NO. WID059972435
3. COMMENTS/SPECIAL INSTRUCTIONS: TRANSPORTED BY MR FRANK ON OUR PO # 19001
4. P.O. BOX OR STREET ADDRESS: PPG INDUSTRIES
5. CITY, STATE, ZIP CODE: 10800 SO 13th ST OAK CREEK WI 53154
6. TELEPHONE NUMBER: (414)-764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4000 | WASTE RESIN MIXTURE | FLAMMABLE | UN1866 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 33440 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: Howard L Tinian
16. NAME (Print): Howard L. Tinian
17. DATE SHIPPED M D Y: 3 14 81

## TRANSPORTER SECTION

18. COMPANY NAME: MR FRANK INC.
19. EPA IDENTIFICATION NO. ILDD 69506160
20. P.O. BOX OR STREET ADDRESS: 201 N 155th ST
21. CITY, STATE, ZIP CODE: SOUTH HOLLAND ILL
22. TELEPHONE NUMBER: (312)-596-3377
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: M. Garcia
25. NAME (Print): M GARCIA
26. Date Accepted: M 3 / 8 / 81

I hereby certify that the above named materials and indicated quantity(ies) has (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. IND011360265
34. P.O. BOX OR STREET ADDRESS: P. Box 190
35. CITY, STATE, ZIP CODE: GRIFFITH INDIANA 46319
36. TELEPHONE NUMBER: (219)-924-4370
37. COMMENTS: TO EAST AGIT 3/16/81 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): FOUNTEE
40. Date Accepted: M 3 / 16 / 81

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 53707

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

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# HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER: A 11149

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID [illegible] 72955
3. COMMENTS/SPECIAL INSTRUCTIONS: TRANSPORTED BY MR FRANK TO AMERICAN CHEMICAL SERVICE IN OUR PO#1901
4. P.O. BOX OR STREET ADDRESS: [illegible] Creek WI [illegible]
5. CITY, STATE, ZIP CODE:
6. TELEPHONE NUMBER: (4[illegible]) - 764 [illegible]

| 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) |
|---|---|---|---|---|---|---|---|
| 1/10 | 4500 | WASTE RESIN MIXTURE FLAMMABLE LIQUIDS | FLAMMABLE | UN1866 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: Howard L Tinian
16. NAME (Print): Howard L Tinian
17. DATE SHIPPED M D Y: 3/19/81

## TRANSPORTER SECTION

18. COMPANY NAME: MR FRANK INC
19. EPA IDENTIFICATION NO.: LLD069506160
20. P.O. BOX OR STREET ADDRESS: 2[illegible] W[illegible] ST
21. CITY, STATE, ZIP CODE: South Holland Ill [illegible]
22. TELEPHONE NUMBER: (312)-[illegible]-3377
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): DUKE GRAD
26. Date Accepted: M / D / Y 3/19/81

I hereby certify that the above named materials and indicated quantity(ies) has (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: MR FRANK INC
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.: [illegible]
34. P.O. BOX OR STREET ADDRESS: PO Box 190
35. CITY, STATE, ZIP CODE: Griffith Indiana 41[illegible]
36. TELEPHONE NUMBER: (2[illegible])-924-[illegible]
37. COMMENTS: TO WEST 4CIT T-50 3/19/81 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): EDUN FEE
40. Date Accepted: M / D / Y 3/19/81

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 53707

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

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

000824

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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# HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 11150

000755

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID049972937
3. COMMENTS/SPECIAL INSTRUCTIONS: TRANSPORTED BY MR FRANK INC PO # 19001
4. P.O. BOX OR STREET ADDRESS: 1400 S 13th ST
5. CITY, STATE, ZIP CODE: LAKE CITY WIS 31591
6. TELEPHONE NUMBER: (414)-714-1000

| 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) |
|---|---|---|---|---|---|---|---|
| T/U | 4500 | WASTE RESIN XTURE | FLAMMABLE | UN1866 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F001 | 37720 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): [illegible]
17. DATE SHIPPED M D Y: 3/18/81

## TRANSPORTER SECTION

18. COMPANY NAME: MR FRANK INC
19. EPA IDENTIFICATION NO.: ILD068506160
20. P.O. BOX OR STREET ADDRESS: 201 W 138th ST
21. CITY, STATE, ZIP CODE: SOUTH HOLLAND ILL 60473
22. TELEPHONE NUMBER: (312)-596-3377
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): M. GARCIA
26. Date Accepted M D Y: 3/19/81

I hereby certify that the above named materials and indicated quantity(ies) has (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.: ILD000777557
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: GRIFFITH IND
36. TELEPHONE NUMBER: (219)-924-4570
37. COMMENTS: TO WEST AGT T-50 3/23/81 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): DUNLAP
40. Date Accepted M D Y: 3/23/81

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 53707

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 9-80

MANIFEST NUMBER 819-81-2

A 25051

000736

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID 0 99 72935
3. COMMENTS/SPECIAL INSTRUCTIONS: TRANSPORTED BY MR FRANK TO AMERICAN CHEMICAL SERVICE ON OUR PO# 18850
4. P.O. BOX OR STREET ADDRESS: 10800 So 13th St
5. CITY, STATE, ZIP CODE: OAK CREEK WISCONSIN 53154
6. TELEPHONE NUMBER: (414)-764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 5000 | WASTE RESIN MIXTURE | FLAMMABLE LIQUID | UN 1866 | 1. Solid 3. Mixture 2. Liquid [2] | F005 F005 | 45260 |
| | | RECEIVED 1000 | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: Howard L Timian
16. NAME (Print): HOWARD L TIMIAN
17. DATE SHIPPED M D Y: 1/13/81

## TRANSPORTER SECTION

18. COMPANY NAME: MR FRANK INC
19. EPA IDENTIFICATION NO.: ILD 0 69 506160
20. P.O. BOX OR STREET ADDRESS: 2[illegible] W 1[illegible] ST
21. CITY, STATE, ZIP CODE: SOUTH HOLLAND ILL
22. TELEPHONE NUMBER: (312)-396-3377
23. COMMENTS: FLASH POINT 77°F

I hereby certify that the above-named materials and indicated quantity(ies) has (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: [illegible]
25. NAME (Print): M CHARCIA
26. Date Accepted M / D / Y: 1/13/81

I hereby certify that the above named materials and indicated quantity(ies) has (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 0 16 3 60265
34. P.O. BOX OR STREET ADDRESS: PO Box 190
35. CITY, STATE, ZIP CODE: GRIFFITH INDIANA 46319
36. TELEPHONE NUMBER: (219)-924-9370
37. COMMENTS: PUMPED 1000 GALS TO WEST AGIT R T-50 Jim Murphy ACCEPTED ONLY 1000 GALS

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: 1/13/81

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 53707

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 9-80

MANIFEST NUMBER
A 25053

000737

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WYD 059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: TRANSPORTED BY MR FRANK TO AMERICAN CHEMICAL SERVICE ON PUR POH 18957
4. P.O. BOX OR STREET ADDRESS: 10800 BO 13th ST
5. CITY, STATE, ZIP CODE: OAK CREEK WIS 53154
6. TELEPHONE NUMBER: (414)-761-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | | WASTE RESIN MIXTURE FLASH POINT 75° 9.9% WATER. | FLAMMABLE LIQUID | UN1866 | 1. Solid 3. Mixture 2. Liquid [x] | F003 F005 | 40340 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | 4500 GAL |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: Howard L. Timian
16. NAME (Print): HOWARD L. TIMIAN
17. DATE SHIPPED M D Y: 1/22/81

## TRANSPORTER SECTION

18. COMPANY NAME: MR FRANK INC
19. EPA IDENTIFICATION NO.: IL D069506160
20. P.O. BOX OR STREET ADDRESS: 201 WIS 5th ST
21. CITY, STATE, ZIP CODE: SOUTH HOLLAND ILL 60473
22. TELEPHONE NUMBER: (312)-596-3377
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: Robert Perkins
25. NAME (Print): Robert PERKINS
26. Date Accepted M/D/Y: 1/22/81

I hereby certify that the above named materials and indicated quantity(ies) has (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: PO BOX 190 GRIFFITH INDIANA 46319
35. CITY, STATE, ZIP CODE
36. TELEPHONE NUMBER: (219)-924-9370
37. COMMENTS: PUMPED TO EAST AGIT R. 1/22/81 T-50 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): F DUNEEE
40. Date Accepted M/D/Y: 1/22/81

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 53707

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 9-80

MANIFEST NUMBER: A 25054

000738

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: TRANSPORTED BY MR FRANK TO AMERICAN CHEMICAL SERVICE ON SOUP PO# 18968 [illegible]
4. P.O. BOX OR STREET ADDRESS: 10800 SO 13th ST
5. CITY, STATE, ZIP CODE: OAK CREEK WISCONSIN 53154
6. TELEPHONE NUMBER: (414)-764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | | WASTE RESIN MIXTURE FLAMMABLE LIQUID UN1866 | FLAMMABLE LIQUID | UN1866 | 1. Solid 3. Mixture 2. Liquid [2] | FOOS FOOT | 4[illegible] GAL 41,200 LBS |
| | | FLASH PT 75° | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: Howard L Timian
16. NAME (Print): HOWARD L TIMIAN
17. DATE SHIPPED M D Y: 1/23/81

## TRANSPORTER SECTION

18. COMPANY NAME: MR FRANK INC.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W 155TH ST
21. CITY, STATE, ZIP CODE: SOUTH HOLLAND FIL 60473
22. TELEPHONE NUMBER: (312)-596-5377
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: Robert Perkins
25. NAME (Print): Robert Perkins
26. Date Accepted M D Y: 1/23/81

I hereby certify that the above named materials and indicated quantity(ies) has (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.: IND011360285
34. P.O. BOX OR STREET ADDRESS: PO Box 190
35. CITY, STATE, ZIP CODE: GRIFFITH
36. TELEPHONE NUMBER: (219)-924-4370
37. COMMENTS: TO WEST AGIT R 1/23/81 T-50 Jim Mizzy

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 [illegible]
40. Date Accepted M / D / Y: 1/23/81

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 53707

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 9-80

MANIFEST NUMBER
811-71-07
A 25055

000747

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID 54972935
3. COMMENTS/SPECIAL INSTRUCTIONS: TRANSPORTED BY MR FRANK TO AMERICAN CHEMICAL SERVICE - I/R 65 105 ON OUR PO# 18974
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek WI 53154
6. TELEPHONE NUMBER: 414 1-764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| TANKWAGON | | WASTE RESIN MIXTURE | FLAMMABLE LIQUID | UN 1866 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 38720 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: Howard L. Tinian
16. NAME (Print): Howard L. Tinian
17. DATE SHIPPED M D Y: 1/28/81

## TRANSPORTER SECTION

18. COMPANY NAME: MR FRANK INC.
19. EPA IDENTIFICATION NO.: TLD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W 155th ST
21. CITY, STATE, ZIP CODE: SOUTH HOLLAND ILL
22. TELEPHONE NUMBER: (312)-596-3377
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: Donald H Bult
25. NAME (Print): Don Bult
26. Date Accepted: 1/28/81

I hereby certify that the above named materials and indicated quantity(ies) has (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: PO Box 190
35. CITY, STATE, ZIP CODE: GRIFFITH INDIANA 46319
36. TELEPHONE NUMBER: (219)-924-4370
37. COMMENTS: TO WEST AGIT R - 1/28/81 T-50 Jim Murphy

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: 01/28/81

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 53707

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 9-80

MANIFEST NUMBER
A 49331

000812

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) - 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 1/ 550 | Waste Resin Mixture Flammable Liquid | Flammable | UN1866 | 1. Solid 3. Mixture 2. Liquid [2] | R003 R005 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE
16. NAME (Print): Howard L. Timian
17. DATE SHIPPED M D Y: / /

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) - 596-3377
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): GARY DRUEN
26. Date Accepted M 10 D 19 Y 81

I hereby certify that the above named materials and indicated quantity(ies) has (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: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Indiana 46319
36. TELEPHONE NUMBER: 219 XXX - 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: 10/19/81

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 53707

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 10/19/81 JTM

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 9-80

MANIFEST NUMBER
A 49332

000813

## GENERATOR (SHIPPER) SECTION

| 1. COMPANY NAME | 2. EPA IDENTIFICATION NO. | 3. COMMENTS/SPECIAL INSTRUCTIONS |
|---|---|---|
| PPG INDUSTRIES | WID059972935 | Transported by Mr. Frank to American Chemical Service - on our P.O. #19001 |
| 4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street | | |
| 5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154 | 6. TELEPHONE NUMBER: (414) 764-6000 | |

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4 (x 110 | Waste Resin Mixture Flammable Liquid | Flammable | UN1866 | 1. Solid 3. Mixture 2. Liquid [2] | R003 R005 | 3770 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE

16. NAME (Print): Howard L. Timian

17. DATE SHIPPED M / D / Y: / /

## TRANSPORTER SECTION

| 18. COMPANY NAME | 19. EPA IDENTIFICATION NO. |
|---|---|
| Mr. Frank Inc. | ILD069506160 |
| 20. P.O. BOX OR STREET ADDRESS: 201 West 155th Street | |
| 21. CITY, STATE, ZIP CODE: South Holland, Illinois | 22. TELEPHONE NUMBER: (312) 596-3377 |

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 |
|---|---|---|
| [illegible] | [illegible] | 10 / 21 / 89 |

I hereby certify that the above named materials and indicated quantity(ies) has (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 Service | IND016360265 |
| 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
TO 2045 T-50 10/21/89 JTM

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 |
|---|---|---|
| [illegible] | [illegible] | 10 / 21 / 89 |

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 53707

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 9-80

MANIFEST NUMBER
A 49333

0008818

## GENERATOR (SHIPPER) SECTION

| 1. COMPANY NAME | 2. EPA IDENTIFICATION NO. | 3. COMMENTS/SPECIAL INSTRUCTIONS |
|---|---|---|
| PPG INDUSTRIES | WID059972935 | Transported by Mr. Frank to American Chemical Service – on our P.O. #19001 |
| 4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street | | |
| 5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154 | 6. TELEPHONE NUMBER: (414) 764-6000 | |

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 7000 | Waste Resin Mixture Flammable Liquid | Flammable | UN1866 | 1. Solid 3. Mixture [2] 2. Liquid | R003 R005 | |
| | | | | | 1. Solid 3. Mixture [ ] 2. Liquid | | |
| | | | | | 1. Solid 3. Mixture [ ] 2. Liquid | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): Howard L. Timian
17. DATE SHIPPED M D Y: 10/23/81

## TRANSPORTER SECTION

| 18. COMPANY NAME | 19. EPA IDENTIFICATION NO. |
|---|---|
| Mr. Frank Inc. | ILD069506160 |
| 20. P.O. BOX OR STREET ADDRESS: 201 West 155th Street | |
| 21. CITY, STATE, ZIP CODE: South Holland, Illinois | 22. TELEPHONE NUMBER: (312) 596-3377 |
| 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 |
|---|---|---|
| [signature] | [signature] | 10/23/81 |

I hereby certify that the above named materials and indicated quantity(ies) has (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 Service | IND016360265 |
| 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: To 210x T-50 10/23/81 jmm | |

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] | I DUNFEE | 10/23/81 |

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 53707

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 9-80

MANIFEST NUMBER
A 49334

000825

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service – on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4,500 | Waste Resin Mixture Flammable Liquid | Flammable | UN1866 | 1. Solid 3. Mixture 2. Liquid [2] | R003 R005 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE
16. NAME (Print): Howard L. Timian
17. DATE SHIPPED M D Y: 11 10 81

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 155th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
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): C.E. MILLIGAN
26. Date Accepted M D Y: 11 09 81

I hereby certify that the above named materials and indicated quantity(ies) has (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.: INDO16360265
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: To. 211K T-50 GRM 11/9/81

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

38. AUTHORIZED SIGNATURE
39. NAME (Print): EDWFEE
40. Date Accepted M D Y: 11 9 81

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 53707

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 9-80

MANIFEST NUMBER
A 49335

000820

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID0599 72935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service – our P.O. #19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: 414 ) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4000 | Waste Resin Mixture Flammable Liquid | Flammable | UN1866 | 1. Solid 3. Mixture 2. Liquid [2] | R003 R005 | [illegible] |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): Howard L. Timian
17. DATE SHIPPED M D Y: 11/2/81

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 155th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: ( 312 ) 596-3377
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): [illegible]
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:

## HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND016360265
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: To 210 K T-50 GW 11/2/81

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 18 81

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 53707

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

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# HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 49336

000823

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 3850 | Waste Resin Mixture Flammable Liquid | Flammable | UN1866 | 1. Solid 3. Mixture 2. Liquid [2] | R003 R005 | 3441 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): Howard L. Timian
17. DATE SHIPPED M D Y: 1 12 81

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 155th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
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): [signature]
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

## HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND016360265
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: TO 210 E T-50 10/26/81 [signature]

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 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 53707

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

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# HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER: A 49337

000821

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: 414 ) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 716 | Waste Resin Mixture<br>Flammable Liquid | Flammable | UN1866 | 1. Solid 3. Mixture 2. Liquid [2] | R003<br>R005 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE:
16. NAME (Print): Howard L. Timian
17. DATE SHIPPED M D Y: 10/28/81

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 155th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312 ) 596-3377
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:

I hereby certify that the above named materials and indicated quantity(ies) has (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: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Indiana 46319
36. TELEPHONE NUMBER: 219 ) 924-4370
37. COMMENTS: To 210 R T-50 10/28/81 gpm

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

38. AUTHORIZED SIGNATURE:
39. NAME (Print): DUNFEE
40. Date Accepted M / D / Y: 10/28/81

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 53707

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

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HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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# HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 49338

000822

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4411 | Waste Resin Mixture Flammable Liquid | Flammable | UN1866 | 1. Solid 3. Mixture 2. Liquid [2] | D003 D005 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

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15. AUTHORIZED SIGNATURE
16. NAME (Print): Howard L. Timian
17. DATE SHIPPED M D Y: 12/

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 155th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
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

I hereby certify that the above named materials and indicated quantity(ies) has (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: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Indiana 46319
36. TELEPHONE NUMBER: 219 924-4370
37. COMMENTS: TO 210R T-50 10/30/81 JRM

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 10 D 30 Y 81

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 53707

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

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HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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# HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER: A 49339

000819

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: 414 ) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4,200 | Waste Resin Mixture Flammable Liquid | Flammable | UN1866 | 1. Solid 3. Mixture 2. Liquid [2] | R003 R005 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): Howard L. Timian
17. DATE SHIPPED M D Y: 11 4 81

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 155th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312 ) 596-3377
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): Rich Artis
26. Date Accepted M / D / Y: 11 9 81

I hereby certify that the above named materials and indicated quantity(ies) has (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: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Indiana 64319
36. TELEPHONE NUMBER: 219 ) 924-4370
37. COMMENTS: To 211K T-50 GRM 11/4/81

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: 11 6 81

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 53707

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

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# HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 49340

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 5500 | Waste Resin Mixture Flammable Liquid | Flammable | UN1866 | 1. Solid 3. Mixture [2] 2. Liquid | R003 R005 | 22440 |
| | | | | | 1. Solid 3. Mixture [ ] 2. Liquid | | |
| | | | | | 1. Solid 3. Mixture [ ] 2. Liquid | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE
16. NAME (Print): Howard L. Timian
17. DATE SHIPPED: M D Y 11/17/81

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 155th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
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

I hereby certify that the above named materials and indicated quantity(ies) has (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: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Indiana 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS: To 211K T-50 GRM 11/11/81

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 11 19 81

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 53707

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

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

000827

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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Please type or print clearly using ball point pen – press hard.

# HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 49359

000826

## GENERATOR (SHIPPER) SECTION

| 1. COMPANY NAME | 2. EPA IDENTIFICATION NO. | 3. COMMENTS/SPECIAL INSTRUCTIONS |
|---|---|---|
| PPG INDUSTRIES | WID059972935 | Transported by Mr. Frank to |
| 4. P.O. BOX OR STREET ADDRESS | | American Chemical Service - on our P.O.#19001 |
| 10800 South 13th Street | | |
| 5. CITY, STATE, ZIP CODE | 6. TELEPHONE NUMBER | |
| Oak Creek, WI 53154 | (414) 764-6000 | |

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4,500 | Waste Resin Mixture Flammable Liquid | Flammable | UN1866 | 1. Solid 3. Mixture 2. Liquid [2] | R003 R005 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: Howard L. Timian

16. NAME (Print): Howard L. Timian

17. DATE SHIPPED M D Y: 11 16

## TRANSPORTER SECTION

| 18. COMPANY NAME | 19. EPA IDENTIFICATION NO. |
|---|---|
| Mr. Frank Inc. | ILD069506160 |
| 20. P.O. BOX OR STREET ADDRESS | |
| 201 West 155th Street | |
| 21. CITY, STATE, ZIP CODE | 22. TELEPHONE NUMBER |
| South Holland, Illinois | ( 312 ) 596-3377 |

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 |
|---|---|---|
| Robert Perkins | Robert Perkins | 11 16 81 |

I hereby certify that the above named materials and indicated quantity(ies) has (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 Service | IND016360265 |
| 34. P.O. BOX OR STREET ADDRESS | |
| P.O. Box 190 | |
| 35. CITY, STATE, ZIP CODE | 36. TELEPHONE NUMBER |
| Griffith, Indiana 46319 | (219) 924-4370 |

37. COMMENTS

To 210 K T-50 GRM 11/1/81

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 Dupree | R DUPREE | 11 16 81 |

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 53707

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 9-80

MANIFEST NUMBER
A 49365

000832

## GENERATOR (SHIPPER) SECTION

| 1. COMPANY NAME | 2. EPA IDENTIFICATION NO. | 3. COMMENTS/SPECIAL INSTRUCTIONS |
|---|---|---|
| FPC INDUSTRIES | WID059972935 | Transported by Mr. Frank to: American Chemical Service -on our P.O.#19001 |
| 4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street | | |
| 5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154 | 6. TELEPHONE NUMBER: (414) 764-6000 | |

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4 926 | Waste Resin Mixture Flammable Liquid | Flammable | UN1866 | 1. Solid 3. Mixture 2. Liquid [2] | R003 R005 | 4 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE

16. NAME (Print): Howard L. Timian

17. DATE SHIPPED M D Y: 11/1/

## TRANSPORTER SECTION

| 18. COMPANY NAME | 19. EPA IDENTIFICATION NO. |
|---|---|
| Mr. Frank Inc. | ILD069506160 |
| 20. P.O. BOX OR STREET ADDRESS: 201 West 155th Street | |
| 21. CITY, STATE, ZIP CODE: South Holland, Illinois | 22. TELEPHONE NUMBER: (312) 596-3377 |

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 |
|---|---|---|
| | | |

I hereby certify that the above named materials and indicated quantity(ies) has (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 Service | IND016360265 |
| 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: To 211 Tk T-50 GRM 11/13/81

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 |
|---|---|---|
| | E DUVEE | 11 13 81 |

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 53707

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 9-80

MANIFEST NUMBER
A 49367

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WIB059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank Inc. to: American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | [illegible] | Waste Resin Mixture Flammable Liquid | Flammable | UN1866 | 1. Solid 3. Mixture 2. Liquid [2] | R003 R005 | [illegible] |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): Howard L. Timian
17. DATE SHIPPED M D Y: 11 16 81

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 155th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
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): [signature]
26. Date Accepted M / D / Y: 11 / 16 / 81

I hereby certify that the above named materials and indicated quantity(ies) has (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: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Indiana 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS: To 211K T-50 GPM 11/16/81

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

38. AUTHORIZED SIGNATURE: X [signature]
39. NAME (Print): X EDVNFEE
40. Date Accepted M / D / Y: 11 / 16 / 81

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 53707

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

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

000831

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 9-80

MANIFEST NUMBER
A 49368

000830

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to: American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | | Waste Resin Mixture Flammable Liquid | Flammable | UN1866 | 1. Solid 3. Mixture 2. Liquid [2] | D003 D005 | 26,640 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: Howard L. Timian
16. NAME (Print): Howard L. Timian
17. DATE SHIPPED M D Y: 11 16 87

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 155th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
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: Donald H Ball
25. NAME (Print): Donald H Ball
26. Date Accepted M D Y: 11 16 87

I hereby certify that the above named materials and indicated quantity(ies) has (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: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Indiana 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS: To 211K T-50 GRM 11/18/87

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): P DUNFEE
40. Date Accepted M / D / Y: 11 18 87

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 53707

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 9-80

MANIFEST NUMBER: A 49370

000829

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: transported by Mr. Frank to: American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | | ~~Waste Resin Mixture~~ ~~Flammable liquid~~ | ~~Flammable~~ | ~~UN1866~~ | 1. Solid 3. Mixture 2. Liquid [2] | R003 R005 | 34240 |
| 1/10 | | WASTE PAINT FLAMMABLE LIQUID | FLAMMABLE | UN1263 | 1. Solid 3. Mixture [2] 2. Liquid | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: Howard L. Timian
16. NAME (Print): Howard L. Timian
17. DATE SHIPPED M D Y: 11 14 81

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 155th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
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

I hereby certify that the above named materials and indicated quantity(ies) has (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: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Indiana 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS: To 210 K TSO GCM 11/19/81

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 / D / Y: 11/19/81

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 53707

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.
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# HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER: A 49371

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to: American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 3 (X10) | ~~Waste Resin Mixture~~ Flammable Liquid (UN1263) | Flammable | ~~UN1866~~ UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | D003 D005 | 24/4/DC |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: Howard L. Tinian
16. NAME (Print): Howard L. Tinian
17. DATE SHIPPED: M D Y 11 24 87

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 155th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
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): Rich Antis
26. Date Accepted: M 11 D 24 Y 87

I hereby certify that the above named materials and indicated quantity(ies) has (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: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Indiana 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 11 D 24 Y 87

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 53707

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 K T-50 GTM 11/24/87

000835

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 9-80

MANIFEST NUMBER: A 49372

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transportdd by Mr. Frank to:
American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | | Waste Resin Mixture Flammable Liquid | Flammable | UN1866 | 1. Solid 3. Mixture 2. Liquid | R003 R005 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE:
16. NAME (Print): Howard L. Timian
17. DATE SHIPPED M D Y: 11/23/87

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.:
20. P.O. BOX OR STREET ADDRESS: 201 West 155th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
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:

I hereby certify that the above named materials and indicated quantity(ies) has (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: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Indiana 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS: To 211K TSO GLM 11/23/87

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 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 53707

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

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

000828

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 9-80

MANIFEST NUMBER
A 49373

000834

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to: American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: ( 414) - 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 11111 | Waste Resin Mixture Flammable Liquid | Flammable | UN1866 | 1. Solid 3. Mixture 2. Liquid [2] | R003 R005 | 4044 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE
16. NAME (Print): Howard L. Timian
17. DATE SHIPPED: M D Y 11 25 81

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 155th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312 ) - 596-3377
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 11 25 81

I hereby certify that the above named materials and indicated quantity(ies) has (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: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Indiana 46319
36. TELEPHONE NUMBER: (219) - 924-4370
37. COMMENTS: To 210 Tk T-50 GPM 11/25/81

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

38. AUTHORIZED SIGNATURE
39. NAME (Print): RANGE
40. Date Accepted: M 11 D 25 Y 81

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 53707

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 9-80

MANIFEST NUMBER
A 49375

000838

## GENERATOR (SHIPPER) SECTION

| 1. COMPANY NAME | 2. EPA IDENTIFICATION NO. | 3. COMMENTS/SPECIAL INSTRUCTIONS |
|---|---|---|
| PPG INDUSTRIES | WID059972935 | Transported by Mr. Frank Inc. to: |
| 4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street | | American Chemical Service - on our P.O.#19001 |
| 5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154 | 6. TELEPHONE NUMBER: (414) 764-6000 | |

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 11 111 | Waste Resin Mixture Flammable Liquid | Flammable | UN1866 | 1. Solid 3. Mixture 2. Liquid [2] | R003 R005 | 47667 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: Howard L. Timian

16. NAME (Print): Howard L. Timian

17. DATE SHIPPED M D Y: 12/11/81

## TRANSPORTER SECTION

| 18. COMPANY NAME | 19. EPA IDENTIFICATION NO. |
|---|---|
| Mr. Frank Inc. | ILD069506160 |
| 20. P.O. BOX OR STREET ADDRESS: 201 West 155th Street | |
| 21. CITY, STATE, ZIP CODE: South Holland, Illinois | 22. TELEPHONE NUMBER: (312) 596-3377 |

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 |
|---|---|---|
| | | |

I hereby certify that the above named materials and indicated quantity(ies) has (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 Company | IND016360265 |
| 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

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 |
|---|---|---|
| | DUNFEE | 12/11/81 |

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 53707

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 K T-50
GRM 12/11/81

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 9-80

MANIFEST NUMBER
A 49376

000837

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank Inc. to:
American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4/900 | Waste Resin Mixture Flammable Liquid | Flammable | UN1866 | 1. Solid 3. Mixture 2. Liquid [2] | D003 D005 | 43 [illegible] |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): Howard L. Tinian
17. DATE SHIPPED M D Y: 12/15

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD060596160
20. P.O. BOX OR STREET ADDRESS: 201 West 155th Street
21. CITY, STATE, ZIP CODE: South ~~Hol~~ Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
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): [illegible]
26. Date Accepted M 12 D 15 Y 81

I hereby certify that the above named materials and indicated quantity(ies) has (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: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Indiana 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 12 D 17 Y 81

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 53707

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 12/15/81

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 9-80

MANIFEST NUMBER
A 49377

## GENERATOR (SHIPPER) SECTION

| 1. COMPANY NAME | 2. EPA IDENTIFICATION NO. | 3. COMMENTS/SPECIAL INSTRUCTIONS |
|---|---|---|
| PPG INDUSTRIES | WIR059972935 | Transported by Mr. Frank to: |
| 4. P.O. BOX OR STREET ADDRESS | | American Chemical Service - on our P.O.#19001 |
| 10800 South 13th Street | | |
| 5. CITY, STATE, ZIP CODE | 6. TELEPHONE NUMBER | |
| Oak Creek, WI 53154 | (414) 764-6000 | |

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 1100 | Waste Resin Mixture Flammable Liquid | Flammable | UN1866 | 1. Solid 3. Mixture 2. Liquid [2] | R003 R005 | 42240 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: Howard L. Timian
16. NAME (Print): Howard L. Timian
17. DATE SHIPPED: M 12 D 1 Y 81

## TRANSPORTER SECTION

| 18. COMPANY NAME | 19. EPA IDENTIFICATION NO. |
|---|---|
| Mr. Frank Inc. | ILD069506160 |
| 20. P.O. BOX OR STREET ADDRESS | |
| 201 West 155th Street | |
| 21. CITY, STATE, ZIP CODE | 22. TELEPHONE NUMBER |
| South Holland, Illinois | (312) 596-3377 |
| 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 |
|---|---|---|
| Howard L. Timian | | |

I hereby certify that the above named materials and indicated quantity(ies) has (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 Service | IND016360265 |
| 34. P.O. BOX OR STREET ADDRESS | |
| P.O. Box 190 | |
| 35. CITY, STATE, ZIP CODE | 36. TELEPHONE NUMBER |
| Griffith, Indiana 46319 | 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 12 D 18 Y 81 |
|---|---|---|
| F D Mueller | F D MUELLER | |

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 53707

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 K T-50
GRM 12/15/81

000839

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 9-80

MANIFEST NUMBER
A 49385

000833

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059772935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by MR. Frank to: American Chemical Service - on our P.O. # 19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414)-764-6100

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4750 | Flammable Liquid Waste Paint | Flammable | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 D006 | 40510 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D007 D008 D009 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): Daniel F. Scudder
17. DATE SHIPPED: M D Y 12 / 1 / 81

## TRANSPORTER SECTION

18. COMPANY NAME: MR Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 155th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312)-596-3377
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): Rich Antis
26. Date Accepted: M D Y 12 / 1 / 81

I hereby certify that the above named materials and indicated quantity(ies) has (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: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Indiana 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): E DUNFEE
40. Date Accepted: M D Y 12 / 1 / 81

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 53707

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
GRM 12/1/81

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 9-80

MANIFEST NUMBER
A 49386

000836

## GENERATOR (SHIPPER) SECTION

| 1. COMPANY NAME | 2. EPA IDENTIFICATION NO. | 3. COMMENTS/SPECIAL INSTRUCTIONS |
|---|---|---|
| CPC International | WID 0079 2235 | Transport by Mid. Atl. to: Material Chemical Service - Edison P.O. # 1701 |
| 4. P.O. BOX OR STREET ADDRESS: 16500 South 13th Street | | |
| 5. CITY, STATE, ZIP CODE: Oak Creek WI 53154 | 6. TELEPHONE NUMBER: (414) 764-6100 | |

| 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) |
|---|---|---|---|---|---|---|---|
| T/T | 4400 | Flammable Liquid n.o.s. | Flammable | UN1993 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 51,217 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 WI. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): Dwight F Snyder
17. DATE SHIPPED: M 12 D 1 Y 81

## TRANSPORTER SECTION

| 18. COMPANY NAME | 19. EPA IDENTIFICATION NO. |
|---|---|
| Mid Trans Inc | TID 054 746 160 |
| 20. P.O. BOX OR STREET ADDRESS: 201 W 170th Street | |
| 21. CITY, STATE, ZIP CODE: South Holland Illinois | 22. TELEPHONE NUMBER: (312) 596-1277 |
| 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 |
|---|---|---|
| [signature] | Dave Voss | M 12 D 8 Y 81 |

I hereby certify that the above named materials and indicated quantity(ies) has (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. |
|---|---|
| Material Chemical Service | [illegible] |
| 34. P.O. BOX OR STREET ADDRESS: P.O. Box 190 | |
| 35. CITY, STATE, ZIP CODE: Edison Township NJ 08817 | 36. TELEPHONE NUMBER: (201) 494-1700 |
| 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] | FOWLER | M 12 D 8 Y 81 |

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 53707

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 6RM
12/8/81

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 9-80

MANIFEST NUMBER
A 49902

000753

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID05997293 5
3. COMMENTS/SPECIAL INSTRUCTIONS: TRANSPORTED BY MR FRANK TO AMERICAN CHEMICAL SERVICE IN OUR PUB 190001
4. P.O. BOX OR STREET ADDRESS: 10800 So 13th St
5. CITY, STATE, ZIP CODE: OAK CREEK WIS 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | #600 | WASTE RESIN MIXTURE | FLAMMABLE | UN1866 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 37500 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: Howard L. Timian
16. NAME (Print): HOWARD L. TIMIAN
17. DATE SHIPPED M D Y: 3/27/81

## TRANSPORTER SECTION

18. COMPANY NAME: MR FRANK INC ~~WASTE MANAGEMENT~~ O
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th ST
21. CITY, STATE, ZIP CODE: SOUTH HOLLAND ILL 60473
22. TELEPHONE NUMBER: (312) 596-3377
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): M. GARCIA
26. Date Accepted M D Y: 3/27/81

I hereby certify that the above named materials and indicated quantity(ies) has (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.: WID011360265
34. P.O. BOX OR STREET ADDRESS: PO Box 190
35. CITY, STATE, ZIP CODE: GRIFFITH INDIANA 46319
36. TELEPHONE NUMBER: (219) 924-9370
37. COMMENTS: TO EAST AGIT T-50 3/27/81 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): FDUNFEE
40. Date Accepted M D Y: 3/27/81

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 53707

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 9-80

MANIFEST NUMBER
A 49906

## GENERATOR (SHIPPER) SECTION

| 1. COMPANY NAME | 2. EPA IDENTIFICATION NO. | 3. COMMENTS/SPECIAL INSTRUCTIONS |
|---|---|---|
| PPG INDUSTRIES | WID 049777935 | TRANSPORTED BY MR. FRANK ON OUR PCB 19001 |
| 4. P.O. BOX OR STREET ADDRESS: 11800 So 13TH ST | | |
| 5. CITY, STATE, ZIP CODE: OAK CREEK WIS 53154 | 6. TELEPHONE NUMBER: 414 764-1000 | |

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4550 | WASTE RESIN MIXTURE FLAMMABLE N.O.S. | FLAMMABLE | UN1993 | 1. Solid 3. Mixture 2. Liquid [7] | D001 | 46100 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: Howard L. Frank
16. NAME (Print): Howard L. Frank
17. DATE SHIPPED M D Y: 3 31 81

## TRANSPORTER SECTION

| 18. COMPANY NAME | 19. EPA IDENTIFICATION NO. |
|---|---|
| MR FRANK INC | ILD 049506160 |
| 20. P.O. BOX OR STREET ADDRESS: 201 E 150th ST | |
| 21. CITY, STATE, ZIP CODE: SOUTH HOLLAND ILL | 22. TELEPHONE NUMBER: (312) 596 3377 |
| 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 |
|---|---|---|
| M. Garcia | M. GARCIA | 3 31 81 |

I hereby certify that the above named materials and indicated quantity(ies) has (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 Service | IND 000 511 915 |
| 34. P.O. BOX OR STREET ADDRESS: PO Box 140 | |
| 35. CITY, STATE, ZIP CODE: Griffith IND 46319 | 36. TELEPHONE NUMBER: 219 924-7550 |
| 37. COMMENTS: TO EAST AGENT T-50 3/31/81 Jim Myers | |

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 |
|---|---|---|
| H. L. Frank | H. L. Frank | 3 31 81 |

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 53707

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

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

000754

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 9-80

MANIFEST NUMBER: A 49910

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: IPPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID [illegible]
3. COMMENTS/SPECIAL INSTRUCTIONS: TRANSPORTED BY MP FRANK TO AMERICAN CHEMICAL SERVICE ON OUR PO #19001
4. P.O. BOX OR STREET ADDRESS: 10800 SO 13th St
5. CITY, STATE, ZIP CODE: OAK CREEK WIS 53154
6. TELEPHONE NUMBER: 414-764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/LU | | WASHERTON MIXTURE | FLAMMABLE | UN1866 | 1. Solid 3. Mixture 2. Liquid [2] | [illegible] | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: Howard L. Timm
16. NAME (Print): Howard L. Timm
17. DATE SHIPPED M D Y: [illegible]

## TRANSPORTER SECTION

18. COMPANY NAME: MP FRANK INC
19. EPA IDENTIFICATION NO.: IL D[illegible]
20. P.O. BOX OR STREET ADDRESS: 201 W 155th St
21. CITY, STATE, ZIP CODE: SOUTH HOLLAND ILL
22. TELEPHONE NUMBER: (312) 596-3377
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: Michael [illegible]
25. NAME (Print): MICHAEL MORT[illegible]
26. Date Accepted M D Y: 4/6/81

I hereby certify that the above named materials and indicated quantity(ies) has (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.: ND [illegible]
34. P.O. BOX OR STREET ADDRESS: PO Box [illegible]
35. CITY, STATE, ZIP CODE: GRIFFITH INDIANA 46319
36. TELEPHONE NUMBER: (219) [illegible]
37. COMMENTS: TO WEST AGIT X 4/6/81 T-50 JM

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): F DUNFEE
40. Date Accepted M/D/Y: 4/6/81

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 53707

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

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

000762

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 9-80

MANIFEST NUMBER: A 49913

000766

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID0599-7293
3. COMMENTS/SPECIAL INSTRUCTIONS: TRANSPORTED BY MR FRANK TO AMERICAN CHEMICAL SERVICE ON OUR PO # 19001
4. P.O. BOX OR STREET ADDRESS: 10800 SO 13th ST
5. CITY, STATE, ZIP CODE: OAK CREEK WIS 53154
6. TELEPHONE NUMBER: 414-764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4550 | WASTE RESIN MIXTURE FLAMMABLE NOS | FLAMMABLE | UN1866 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: Howard L. Timian
16. NAME (Print): HOWARD L. TIMIAN
17. DATE SHIPPED M D Y: 9 [illegible] 81

## TRANSPORTER SECTION

18. COMPANY NAME: MR FRANK INC
19. EPA IDENTIFICATION NO.: ILD069506460
20. P.O. BOX OR STREET ADDRESS: 201 W 155th ST
21. CITY, STATE, ZIP CODE: SOUTH HOLLAND ILL 60473
22. TELEPHONE NUMBER: (312) 596-3377
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): Dave Voss
26. Date Accepted M D Y: 4 10 81

I hereby certify that the above named materials and indicated quantity(ies) has (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: PO BOX 190 GRIFFITH IND.
35. CITY, STATE, ZIP CODE: GRIFFITH IND 46319
36. TELEPHONE NUMBER: 219 924 4370
37. COMMENTS: TO EAST AGIT R 4/10/81 T-50 JTM

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): IDUNFEE
40. Date Accepted M D Y: 4 10 81

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 53707

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

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# HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER: A 49915

000765

## GENERATOR (SHIPPER) SECTION

| 1. COMPANY NAME | 2. EPA IDENTIFICATION NO. | 3. COMMENTS/SPECIAL INSTRUCTIONS |
|---|---|---|
| PPG INDUSTRIES | WIDO 049729 31 | TRANSPORTED BY MR FRANK TO AMERICAN CHEMICAL SERVICE ON OUR PUR 1900 |
| 4. P.O. BOX OR STREET ADDRESS: 10800 S. 13TH ST | | |
| 5. CITY, STATE, ZIP CODE: OAK CREEK WIS 53154 | 6. TELEPHONE NUMBER: (414) 769-6000 | |

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4,550 | WASTE RESIN MIXTURE FLAMMABLE NOS | FLAMMABLE | UN1866 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: Howard L. Tilman
16. NAME (Print): HOWARD L. TILMAN
17. DATE SHIPPED M D Y: 4 11 81

## TRANSPORTER SECTION

| 18. COMPANY NAME | 19. EPA IDENTIFICATION NO. |
|---|---|
| MR FRANK INC | ILD069506160 |
| 20. P.O. BOX OR STREET ADDRESS: 201 W 155th St | |
| 21. CITY, STATE, ZIP CODE: SOUTH HOLLAND ILL 60473 | 22. TELEPHONE NUMBER: (312)-596-3377 |
| 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 |
|---|---|---|
| Robert Perkins | Robert Perkins | 4 13 81 |

I hereby certify that the above named materials and indicated quantity(ies) has (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 SERVICE | IND016360265 |
| 34. P.O. BOX OR STREET ADDRESS: Box 190 | |
| 35. CITY, STATE, ZIP CODE: GRIFFITH INDIANA 46319 | 36. TELEPHONE NUMBER: (219)924-4570 |
| 37. COMMENTS: TO EAST AGIT 4/13/81 T-50 JMM | |

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] | EDUNFEE | 4/13/81 |

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 53707

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

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# HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 49917

000767

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: TRANSPORTED BY MR FRANK TO AMERICAN CHEMICAL SERVICE ON OUR PO # 19001
4. P.O. BOX OR STREET ADDRESS: 10800 So 13th ST
5. CITY, STATE, ZIP CODE: OAK CREEK WIS. 53154.
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4,550 | WASTE RESIN MIXTURE FLAMMABLE | FLAMMABLE | UN1866 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: Howard L Timian
16. NAME (Print): HOWARD L. TIMIAN
17. DATE SHIPPED M D Y: 4 16 81

## TRANSPORTER SECTION

18. COMPANY NAME: MR FRANK
19. EPA IDENTIFICATION NO.: ILD069504660
20. P.O. BOX OR STREET ADDRESS: 201 W 155th ST
21. CITY, STATE, ZIP CODE: SOUTH HOLLAND ILL 60473
22. TELEPHONE NUMBER: (312) 596-3377
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: Robert [illegible]
25. NAME (Print): Robert Perkins
26. Date Accepted M D Y: 4 16 81

I hereby certify that the above named materials and indicated quantity(ies) has (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: PO BOX 190
35. CITY, STATE, ZIP CODE: GRIFFITH IND 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS: TO WEST 4GIT T-50 4/16/81 JTM

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: 4 16 81

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 53707

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

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HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 9-80

A 49921

000768

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID 0 5997293
3. COMMENTS/SPECIAL INSTRUCTIONS: TRANSPORTED BY MR FRANK TO AMERICAN CHEMICAL SERVICE ON OUR PO 119001
4. P.O. BOX OR STREET ADDRESS: 10800 So 13th STREET
5. CITY, STATE, ZIP CODE: OAK CREEK WIS 53154
6. TELEPHONE NUMBER: 414 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4,700 | WASTE RESIN MIXTURE NOS ORMC | FLAMMABLE LIQUID | UN1866 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: Howard L. Timian
16. NAME (Print): HOWARD L. TIMIAN
17. DATE SHIPPED M D Y: 4 12 81

## TRANSPORTER SECTION

18. COMPANY NAME: MR FRANK INC
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 Wisick ST
21. CITY, STATE, ZIP CODE: South Holland Ill
22. TELEPHONE NUMBER: (312) 596-3377
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: Robert Perkins
25. NAME (Print): Robert PERKINS
26. Date Accepted M D Y: 4 12 81

I hereby certify that the above named materials and indicated quantity(ies) has (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.: [illegible]
34. P.O. BOX OR STREET ADDRESS: Box 190
35. CITY, STATE, ZIP CODE: GRIFFITH INDIANA 46319
36. TELEPHONE NUMBER: 419 924-9370
37. COMMENTS: TO EAST AGT 4/21/81 T-50 JPM

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: F Dunfee
44. NAME (Print): F DUNFEE
45. Date Accepted M D Y: 4 12 81

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

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 9-80

MANIFEST NUMBER
A 49923

000769

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972931
3. COMMENTS/SPECIAL INSTRUCTIONS: TRANSPORTED BY MR FRANK TO AMERICAN CHEMICAL SERVICE ON OUR PO # 19001
4. P.O. BOX OR STREET ADDRESS: 10800 SO 13th ST
5. CITY, STATE, ZIP CODE: OAK CREEK WIS 53159
6. TELEPHONE NUMBER: (414)-769-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4700 | WASTE RESIN MIXTURE | FLAMMABLE LIQUID | UN1866 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | [illegible] |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: Howard L Timian
16. NAME (Print): HOWARD L. TIMIAN
17. DATE SHIPPED: M D Y 1 28 81

## TRANSPORTER SECTION

18. COMPANY NAME: MR FRANK INC
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W 155th ST
21. CITY, STATE, ZIP CODE: SOUTH HOLLAND, ILL 60473
22. TELEPHONE NUMBER: (312)-596-3377
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: [illegible]
25. NAME (Print): M. GARCIA
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

## HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: AMERICAN CHEMICAL SERVICE
33. EPA IDENTIFICATION NO.: IND016360265
34. P.O. BOX OR STREET ADDRESS: PO BOX 190
35. CITY, STATE, ZIP CODE: GRIFFITH INDIANA 46319
36. TELEPHONE NUMBER: (219)924-4370
37. COMMENTS: TO EAST AGIT 4/28/81 T-50 [illegible]

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): FD [illegible]
40. Date Accepted: M 1 28 81

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 53707

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 9-80

MANIFEST NUMBER
A 49925

000758

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059977931
3. COMMENTS/SPECIAL INSTRUCTIONS: TRANSPORTED BY MCFRANK FOR AMERICAN CHEMICAL SERVICE ON AUR PO# 19001
4. P.O. BOX OR STREET ADDRESS: 1900 S 13
5. CITY, STATE, ZIP CODE: OAK CREEK [illegible]
6. TELEPHONE NUMBER: [illegible]

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | [illegible] | WASTE RESIN MIXTURE | [illegible] | [illegible] | 1. Solid 3. Mixture 2. Liquid [2] | [illegible] | [illegible] |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

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15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): H. WARD L. TIMIAN
17. DATE SHIPPED M D Y: 1 13 81

## TRANSPORTER SECTION

18. COMPANY NAME: MCFRANK INC
19. EPA IDENTIFICATION NO.: TLD069506160
20. P.O. BOX OR STREET ADDRESS: 2[illegible] W 15th ST
21. CITY, STATE, ZIP CODE: SOUTH HOLLAND IL 60473
22. TELEPHONE NUMBER: (312) [illegible]-3377
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): [illegible]
26. Date Accepted M D Y: 1 [illegible] 81

I hereby certify that the above named materials and indicated quantity(ies) has (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.: [illegible]
34. P.O. BOX OR STREET ADDRESS: P. Box 190
35. CITY, STATE, ZIP CODE: GRIFFITH INDIANA 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS: TO WEST AGIT 5/1/81 T-50 [illegible]

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: 5 11 81

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: [signature]
44. NAME (Print): FDU NEE
45. Date Accepted: 5 / 1 / 81

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

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.

B/L 5240 5-5-81

# HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER: A 49926

000759

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID 0 [illegible]
3. COMMENTS/SPECIAL INSTRUCTIONS: TRANSPORTED BY MR FRANK TO AMERICAN CHEMICAL SERVICE ON [illegible] PO 119001
4. P.O. BOX OR STREET ADDRESS: 10800 S 13th STREET
5. CITY, STATE, ZIP CODE: OAK CREEK WIS [illegible]
6. TELEPHONE NUMBER: [illegible]

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | [illegible] | WASTE LESIN MIXTURES FLAMMABLE LIQUID | FLAMMABLE | UN1866 | 1. Solid 3. Mixture 2. Liquid [x] | [illegible] | 40400 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: Howard L. Timian
16. NAME (Print): Howard L. Timian
17. DATE SHIPPED M D Y: 5 15 81

## TRANSPORTER SECTION

18. COMPANY NAME: MR FRANK INC
19. EPA IDENTIFICATION NO.: [illegible]
20. P.O. BOX OR STREET ADDRESS: 201 W 155th ST
21. CITY, STATE, ZIP CODE: SO HOLLAND ILL 60473
22. TELEPHONE NUMBER: 312 1596-3377
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: [illegible]
25. NAME (Print): [illegible]
26. Date Accepted M D Y: [illegible]

I hereby certify that the above named materials and indicated quantity(ies) has (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.: [illegible]
34. P.O. BOX OR STREET ADDRESS: PO BOX 190
35. CITY, STATE, ZIP CODE: GRIFFITH INDIANA 46319
36. TELEPHONE NUMBER: 219 1924-7370
37. COMMENTS: TO WEST AGTT 5/5/81 T-50 [illegible]

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: 5 15 81

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: F Dunfee
44. NAME (Print): F DUNFEE
45. Date Accepted M D Y: 5 15 81

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

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 9-80

MANIFEST NUMBER
A 49927

## GENERATOR (SHIPPER) SECTION

| 1. COMPANY NAME | 2. EPA IDENTIFICATION NO. | 3. COMMENTS/SPECIAL INSTRUCTIONS |
|---|---|---|
| PPG Industries | WID 990723935 | Transported by MI Trans to American Chemical Service Inc. PO # 19001 |
| 4. P.O. BOX OR STREET ADDRESS: 1000 South 17th Ave | | |
| 5. CITY, STATE, ZIP CODE: Oak Creek Wis 53154 | 6. TELEPHONE NUMBER: (414) 766-1000 | |

| 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) |
|---|---|---|---|---|---|---|---|
| T/DW | | Waste Resin Mixture Flammable Liquid | Flammable Liquid | UN1993 | 1. Solid 3. Mixture 2. Liquid [2] | F005 | 27750 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

| 15. AUTHORIZED SIGNATURE | 16. NAME (Print) | 17. DATE SHIPPED M D Y |
|---|---|---|
| [signature] | [illegible] | 5 17 81 |

## TRANSPORTER SECTION

| 18. COMPANY NAME | 19. EPA IDENTIFICATION NO. |
|---|---|
| MI Trans Inc | [illegible] |
| 20. P.O. BOX OR STREET ADDRESS: 2 [illegible] Wisconsin St | |
| 21. CITY, STATE, ZIP CODE: South Holland Ill 60473 | 22. TELEPHONE NUMBER: (312) [illegible] |
| 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 |
|---|---|---|
| [signature] | GARY DRUEA | 5 17 81 |

I hereby certify that the above named materials and indicated quantity(ies) has (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 Service | [illegible] |
| 34. P.O. BOX OR STREET ADDRESS: PO Box 190 | |
| 35. CITY, STATE, ZIP CODE: Griffith Indiana 46319 | 36. TELEPHONE NUMBER: (219) 924-1570 |
| 37. COMMENTS: To East Acit 5/7/81 T-50 gm. | |

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 |
|---|---|---|
| X [signature] | X FDUNFEE | 5 17 81 |

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 53707

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

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

000761

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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# HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 49929

000760

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WI 0 599 7295
3. COMMENTS/SPECIAL INSTRUCTIONS: TRANSPORTED BY MR FRANK TO AMERICAN CHEMICAL SERVICE ON DUP PO 19001
4. P.O. BOX OR STREET ADDRESS: 10800 S 13th ST
5. CITY, STATE, ZIP CODE: OAK CREEK WIS 53154
6. TELEPHONE NUMBER: (414) 769-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 3675 | WASTE RESIN MIXTURE FLAMMABLE LIQUID | FLAMMABLE LIQUID | UN 1866 | 1. Solid 3. Mixture 2. Liquid [2] | F005 F005 | [illegible] |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: Howard L. Timian
16. NAME (Print): HOWARD L. TIMIAN
17. DATE SHIPPED: M D Y 5/11/81

## TRANSPORTER SECTION

18. COMPANY NAME: MR FRANK INC
19. EPA IDENTIFICATION NO.: TL 0069 5[illegible]
20. P.O. BOX OR STREET ADDRESS: 201 W 155th ST
21. CITY, STATE, ZIP CODE: SOUTH HOLLAND ILL 60475
22. TELEPHONE NUMBER: (312) 596-3577
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: [illegible]
25. NAME (Print): M. CARROLL
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

## HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: AMERICAN CHEMICAL SERVICE
33. EPA IDENTIFICATION NO.: IND 0[illegible]
34. P.O. BOX OR STREET ADDRESS: PO Box # 1481
35. CITY, STATE, ZIP CODE: GRIFFITH INDIANA 46319
36. TELEPHONE NUMBER: [illegible] 924-4370
37. COMMENTS: TO EAST AGIT 5/11/81 T-50 gm

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): F DUNFEE
40. Date Accepted: 5/19/81

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 53707

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

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HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 49931

000763

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: TRANSPORTED BY MR FRANK TO AMERICAN CHEMICAL SERVICE ON OUR PO. 19001
4. P.O. BOX OR STREET ADDRESS: 10800 S 013th ST
5. CITY, STATE, ZIP CODE: OAK CREEK WIS 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4,600 | WASTE RESIN MIXTURE | FLAMMABLE LIQUID | UN1866 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 10480 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): Howard L. Timian
17. DATE SHIPPED M D Y: 5 14 81

## TRANSPORTER SECTION

18. COMPANY NAME: MR FRANK INC
19. EPA IDENTIFICATION NO.: LL0069506160
20. P.O. BOX OR STREET ADDRESS: 201 W 155th ST
21. CITY, STATE, ZIP CODE: SOUTH HOLLAND ILL
22. TELEPHONE NUMBER: (312) 596-3377
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: Robert Perkins
25. NAME (Print): Robert Perkins
26. Date Accepted M / D / Y: 5 14 81

I hereby certify that the above named materials and indicated quantity(ies) has (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.: IND016366765
34. P.O. BOX OR STREET ADDRESS: PO Box 190
35. CITY, STATE, ZIP CODE: GRIFFITH INDIANA 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS: TO EAST AGST 5/14/81 T-50 JTM

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 M / D / Y: 5 14 81

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 53707

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 9-80

MANIFEST NUMBER: A 49932

000764

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID 4997793
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported By ~~American~~ Mr Frank Inc To American Chemical Service [illegible] Our PO # 19001
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St
5. CITY, STATE, ZIP CODE: Oak Creek Wis 53154
6. TELEPHONE NUMBER: (414) [illegible]

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4200 | Waste Resin Mixture | [illegible] | [illegible] | 1. Solid 3. Mixture 2. Liquid ☐ | [illegible] | |
| | | | | | 1. Solid 3. Mixture 2. Liquid ☐ | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid ☐ | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [illegible]
16. NAME (Print): [illegible]
17. DATE SHIPPED M D Y: 5/19/81

## TRANSPORTER SECTION

18. COMPANY NAME: Mr Frank Inc
19. EPA IDENTIFICATION NO.: [illegible]
20. P.O. BOX OR STREET ADDRESS: [illegible] 17th St
21. CITY, STATE, ZIP CODE: South Holland Ill 60473
22. TELEPHONE NUMBER: [illegible]
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: [illegible]
25. NAME (Print): Donald H Bult
26. Date Accepted M D Y: 5/19/81

I hereby certify that the above named materials and indicated quantity(ies) has (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.: [illegible]
34. P.O. BOX OR STREET ADDRESS: PO Box 190
35. CITY, STATE, ZIP CODE: Griffith Indiana 46319
36. TELEPHONE NUMBER: (414) [illegible]
37. COMMENTS: To West Agit - T-50 5/19/81 [illegible]

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): PDUNFEE
40. Date Accepted M D Y: 5 19 81

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 53707

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 9-80

MANIFEST NUMBER
A 49933

## GENERATOR (SHIPPER) SECTION

| 1. COMPANY NAME | 2. EPA IDENTIFICATION NO. | 3. COMMENTS/SPECIAL INSTRUCTIONS |
|---|---|---|
| PPG INDUSTRIES | WID059972935 | TRANSPORTED BY: MR. FRANK TO: AMERICAN CHEMICAL SERVICE IN GRIFFITH |
| 4. P.O. BOX OR STREET ADDRESS: 10900 S. 13TH ST | | |
| 5. CITY, STATE, ZIP CODE: OAK CREEK WIS 53154 | 6. TELEPHONE NUMBER: (414)-761-6300 | |

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4550 | WASTE RESIN MIXTURE FLAMMABLE LIQUID | FLAMMABLE LIQUID | | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 33700 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: Howard L. Simms
16. NAME (Print): H. LOUIS STAMM
17. DATE SHIPPED M D Y: 5 22 81

## TRANSPORTER SECTION

| 18. COMPANY NAME | 19. EPA IDENTIFICATION NO. |
|---|---|
| MR FRANK INC. | ILD984904113 |
| 20. P.O. BOX OR STREET ADDRESS: 2401 W 15th ST | |
| 21. CITY, STATE, ZIP CODE: SOUTH HOLLAND ILLINOIS | 22. TELEPHONE NUMBER: (312)-596-3377 |

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 |
|---|---|---|
| | | |

I hereby certify that the above named materials and indicated quantity(ies) has (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 SERVICE | IND 980 614 157 |
| 34. P.O. BOX OR STREET ADDRESS: Box 190 | |
| 35. CITY, STATE, ZIP CODE: GRIFFITH INDIANA 46319 | 36. TELEPHONE NUMBER: (219) 924-1570 |

37. COMMENTS: TO 203R T-50 5/22/81 JJM

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 |
|---|---|---|
| | EDWARD | 5 22 81 |

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 53707

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

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

000757

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 9-80

MANIFEST NUMBER
312 53930
A 49935

000770

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank To American Chemical Service On our PO #19001 (Blanket Order)
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) - 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4550 | Waste Resin Mixture Flammable | Flammable | UN1866 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 38130 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): [illegible]
17. DATE SHIPPED M D Y: 6 12 81

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W 155th St.
21. CITY, STATE, ZIP CODE: South Holland, IL 60473
22. TELEPHONE NUMBER: (312) - 596-3377
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): [illegible]
26. Date Accepted M / D / Y: 6 12 81

I hereby certify that the above named materials and indicated quantity(ies) has (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: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, IND. 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS: TO WEST AGIT T-50 6/2/81 JM

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: 6 12 81

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 53707

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 9-80

MANIFEST NUMBER
A 49936

## GENERATOR (SHIPPER) SECTION

| 1. COMPANY NAME | 2. EPA IDENTIFICATION NO. | 3. COMMENTS/SPECIAL INSTRUCTIONS |
|---|---|---|
| PPG Industries | WID059972935 | Transported by Mr. Frank<br>To American Chemical Service<br>On our P.O. #19001 (Blanket Order) |
| 4. P.O. BOX OR STREET ADDRESS<br>10800 S. 13th St. | | |
| 5. CITY, STATE, ZIP CODE<br>Oak Creek, WI 53154 | 6. TELEPHONE NUMBER<br>414 ) 764-6000 | |

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 1100 | Waste Resin Mixture Flammable | Flammable | UN1866 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 41120 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: Howard L Frank

16. NAME (Print): HOWARD L FRANK

17. DATE SHIPPED M D Y: 6 5 81

## TRANSPORTER SECTION

| 18. COMPANY NAME | 19. EPA IDENTIFICATION NO. |
|---|---|
| Mr. Frank, Inc. | ILD069506160 |
| 20. P.O. BOX OR STREET ADDRESS<br>201 W. 155th St. | |
| 21. CITY, STATE, ZIP CODE<br>South Holland, IL 60473 | 22. TELEPHONE NUMBER<br>(312 ) 596-3377 |
| 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 |
|---|---|---|
| | | |

I hereby certify that the above named materials and indicated quantity(ies) has (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 Service | IND016360265 |
| 34. P.O. BOX OR STREET ADDRESS<br>P.O. Box 190 | |
| 35. CITY, STATE, ZIP CODE<br>Griffith, IND 46319 | 36. TELEPHONE NUMBER<br>219 ) 924-4370 |
| 37. COMMENTS<br>TO EAST ACRT T-50 6/5/81 | |

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] | I-DUN FEE | 6 5 81 |

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 53707

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

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

000771

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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# HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 49937

000772

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank 69177 To American Chemical Service On Our P.O. #19001 (Blanket Order)
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) - 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4500 | Waste Resin Mixture of Flammable | Flammable | UN1866 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 3 3 + 0 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: Marlin H Scheerbaum
16. NAME (Print): M. H. Scheerbaum
17. DATE SHIPPED: M 6 D 17 Y 81

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, IL 60473
22. TELEPHONE NUMBER: (312) - 596-3377
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: Donald H Bult
25. NAME (Print): Donald H Bult
26. Date Accepted: M 6 D 19 Y 81

I hereby certify that the above named materials and indicated quantity(ies) has (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: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, IND 46319
36. TELEPHONE NUMBER: 219 - 924-4370
37. COMMENTS: TO EAST AGIT T-50 6/9/81 jm

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 6 D 19 Y 81

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 53707

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

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# HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 49938

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank To American Chemical Service On Our P.O. #19001 (Blanket Order)
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: 414 ) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4 5 5 0 | Waste Resin Mixture Flammable | Flammable | UN1866 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 40720 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: Paul Siebenaller
16. NAME (Print): Paul Siebenaller
17. DATE SHIPPED M D Y: 6 12 81

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, IL 60473
22. TELEPHONE NUMBER: (312 ) 596-3377
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

I hereby certify that the above named materials and indicated quantity(ies) has (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: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, IND 46319
36. TELEPHONE NUMBER: 219 ) 924-4370
37. COMMENTS: TO EAST ACIT T-50 6/12/81 JPM

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): P DUNLEE
45. Date Accepted M D Y: 6 12 81

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

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

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

000773

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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# HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 49939

000774

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank To American Chemical Service On OUr P.O. #19001 (Blanket Order)
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, WI 51354
6. TELEPHONE NUMBER: (414) - 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4550 | Waste Resin Mixture Flammable | Flammable | UN1866 | 1. Solid 3. Mixture 2. Liquid ☐ | F003 ~~F005~~ | 39620 |
| | | | | | 1. Solid 3. Mixture 2. Liquid ☐ | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid ☐ | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: Paul Siebenaller
16. NAME (Print): Paul Siebenaller
17. DATE SHIPPED: M D Y 6 16 /81

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, IL 60473
22. TELEPHONE NUMBER: (312) - 596-3377
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: Rich Antis
25. NAME (Print): Rich Antis
26. Date Accepted: M D Y 6 16 /81

I hereby certify that the above named materials and indicated quantity(ies) has (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: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, IND 46319
36. TELEPHONE NUMBER: (219) - 924-4370
37. COMMENTS: TO EAST AGIT T-50 6/16/81 JPM

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: [signature]
44. NAME (Print): A DUNFEE
45. Date Accepted: 6 16 81

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

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 9-80

MANIFEST NUMBER: A 49949

## GENERATOR (SHIPPER) SECTION

| 1. COMPANY NAME | 2. EPA IDENTIFICATION NO. | 3. COMMENTS/SPECIAL INSTRUCTIONS |
|---|---|---|
| PPG Industries | | |
| 4. P.O. BOX OR STREET ADDRESS | | |
| [illegible] | | |
| 5. CITY, STATE, ZIP CODE | 6. TELEPHONE NUMBER | |
| [illegible] | [illegible] | |

| 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) |
|---|---|---|---|---|---|---|---|
| 1/10 | 5,250 | [illegible] | [illegible] | [illegible] | 1. Solid 3. Mixture 2. Liquid | [illegible] | 46,000 |
| | | | | | 1. Solid 3. Mixture 2. Liquid | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): [illegible]
17. DATE SHIPPED M D Y: 7 24 81

## TRANSPORTER SECTION

| 18. COMPANY NAME | 19. EPA IDENTIFICATION NO. |
|---|---|
| [illegible] | [illegible] |
| 20. P.O. BOX OR STREET ADDRESS | |
| [illegible] | |
| 21. CITY, STATE, ZIP CODE | 22. TELEPHONE NUMBER |
| [illegible] | [illegible] |

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 |
|---|---|---|
| [signature] | CE MILBURN | 7 24 81 |

I hereby certify that the above named materials and indicated quantity(ies) has (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. |
|---|---|
| [illegible] | [illegible] |
| 34. P.O. BOX OR STREET ADDRESS | |
| [illegible] | |
| 35. CITY, STATE, ZIP CODE | 36. TELEPHONE NUMBER |
| [illegible] | [illegible] |

37. COMMENTS: TO EAST AGIT T-50 7/24/81 JJM.

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 |
|---|---|---|
| | F. DUNFEE | 7 24 81 |

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 |
|---|---|---|
| [signature] | F DUNFEE | 7 24 81 |

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

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

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

000786

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 9-80

000775

MANIFEST NUMBER
[illegible]
A 49950

000775

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank To American Chemical Service On Our P.O. #19001 (Blanket Order
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4600 | Waste Resin Mixture - Flammable | Flammable | UN1866 | 1. Solid 2. Liquid 3. Mixture ☐ | F003 F005 | 32,900 |
| | | | | | 1. Solid 2. Liquid 3. Mixture ☐ | | |
| | | | | | 1. Solid 2. Liquid 3. Mixture ☐ | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: H Schaubaum
16. NAME (Print): M. H. Schaubaum
17. DATE SHIPPED M D Y: 6 / 1 / 81

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, IL 60473
22. TELEPHONE NUMBER: (312) 596-3377
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: Robert Perkins
25. NAME (Print): Robert PERKINS
26. Date Accepted: 6 19 81

I hereby certify that the above named materials and indicated quantity(ies) has (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: P. O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS: TO WEST AGIT R T-50 6/19/81 [illegible]

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: F Dunfee
44. NAME (Print): F DUNFEE
45. Date Accepted: 6 19 81

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

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 9-80

MANIFEST NUMBER: A 49951

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank To American Chemical Service On Our P.O. #19001 (Blanket Order
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414 )764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 460 | Waste Resin Mixture - Flammable | Flammable | UN1866 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 39070 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: M Schaumann
16. NAME (Print): M. H. Schaumann
17. DATE SHIPPED M D Y: 6 22 81

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, IL 60473
22. TELEPHONE NUMBER: 312 )596-3377
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: Robert Perkins
25. NAME (Print): Robert Perkins
26. Date Accepted M D Y: 6 22 81

I hereby certify that the above named materials and indicated quantity(ies) has (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: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: (219 )924-4370
37. COMMENTS: TO WEST AGIT T-50 6/23/81 JJM

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 23 81

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 53707

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

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

000776

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 9-80

MANIFEST NUMBER
A 49956

0007871

## GENERATOR (SHIPPER) SECTION

| 1. COMPANY NAME | 2. EPA IDENTIFICATION NO. | 3. COMMENTS/SPECIAL INSTRUCTIONS |
|---|---|---|
| PPG Industries | WID059972935 | Transported by Mr. Frank |
| 4. P.O. BOX OR STREET ADDRESS | | To American Chemical Service |
| 10800 S. 13th St. | | |
| 5. CITY, STATE, ZIP CODE | 6. TELEPHONE NUMBER | On our P.O. #19001 (blanket Order |
| Oak Creek, WI 53154 | (414) 764-6000 | |

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 5,250 | Waste Resin Mixture - Flammable | Flammable | UN1866 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): [illegible]
17. DATE SHIPPED M D Y: [illegible]

## TRANSPORTER SECTION

| 18. COMPANY NAME | 19. EPA IDENTIFICATION NO. |
|---|---|
| Mr. Frank, Inc. | ILD069506160 |
| 20. P.O. BOX OR STREET ADDRESS | |
| 201 W. 155th St. | |
| 21. CITY, STATE, ZIP CODE | 22. TELEPHONE NUMBER |
| South Holland, IL 60473 | (312) 596-3377 |

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 |
|---|---|---|
| [signature] | CE MILBURN | 7 29 81 |

I hereby certify that the above named materials and indicated quantity(ies) has (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 Service | IND016360265 |
| 34. P.O. BOX OR STREET ADDRESS | |
| P.O. Box 190 | |
| 35. CITY, STATE, ZIP CODE | 36. TELEPHONE NUMBER |
| Griffith, IN 46319 | (219) 924-4370 |

37. COMMENTS

TO EAST ACT T-50 7/29/81 gpm.

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 |
|---|---|---|
| [signature] | H.F. Schmidt | 7 29 81 |

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

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 9-80

MANIFEST NUMBER: A 49957

000788

## GENERATOR (SHIPPER) SECTION

| 1. COMPANY NAME | 2. EPA IDENTIFICATION NO. | 3. COMMENTS/SPECIAL INSTRUCTIONS |
|---|---|---|
| PPG Industries | WID059972935 | Transported by Mr. Frank |
| 4. P.O. BOX OR STREET ADDRESS | | To American Chemical Service |
| 10800 S. 13th St. | | |
| 5. CITY, STATE, ZIP CODE | 6. TELEPHONE NUMBER | On Our P.O. #19001 (Blanket Order |
| Oak Creek, WI 53154 | (414) 764-6000 | |

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 1/11/6 | Waste Resin Mixture - Flammable | Flammable | UN1866 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | [illegible] |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): [illegible]
17. DATE SHIPPED M D Y: [illegible]

## TRANSPORTER SECTION

| 18. COMPANY NAME | 19. EPA IDENTIFICATION NO. |
|---|---|
| Mr. Frank, Inc. | ILD069506160 |
| 20. P.O. BOX OR STREET ADDRESS | |
| 201 W. 155th St. | |
| 21. CITY, STATE, ZIP CODE | 22. TELEPHONE NUMBER |
| South Holland, IL 60473 | (312) 596-3377 |

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 |
|---|---|---|
| [signature] | [illegible] | |

I hereby certify that the above named materials and indicated quantity(ies) has (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 Service | IHD016360265 |
| 34. P.O. BOX OR STREET ADDRESS | |
| P.O. Box 190 | |
| 35. CITY, STATE, ZIP CODE | 36. TELEPHONE NUMBER |
| Griffith, IN 46319 | (219) 924-4370 |

37. COMMENTS

TO EAST AREA T-50 7/31/81 [illegible]

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 | 7/31/81 |

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 53707

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 9-80

MANIFEST NUMBER
A 49958

000789

## GENERATOR (SHIPPER) SECTION

| | |
|---|---|
| 1. COMPANY NAME | PPG Industries |
| 2. EPA IDENTIFICATION NO. | W1D059972935 |
| 3. COMMENTS/SPECIAL INSTRUCTIONS | Transported by Mr. Frank To American Chemical Service On Our P.O. #19001 - Blanket Order |
| 4. P.O. BOX OR STREET ADDRESS | 10800 S. 13th St. |
| 5. CITY, STATE, ZIP CODE | Oak Creek, WI 53154 |
| 6. TELEPHONE NUMBER | (414) 764-6000 |

| 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) |
|---|---|---|---|---|---|---|---|
| 2 T/W | 4,500 | Waste Resin Mixture - Flammable | Flammable | UN1866 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): [illegible]
17. DATE SHIPPED M D Y: [illegible]

## TRANSPORTER SECTION

| | |
|---|---|
| 18. COMPANY NAME | Mr. Frank, Inc. |
| 19. EPA IDENTIFICATION NO. | ILD069506160 |
| 20. P.O. BOX OR STREET ADDRESS | 201 W. 155th St. |
| 21. CITY, STATE, ZIP CODE | South Holland, IL 60473 |
| 22. TELEPHONE NUMBER | (312) 596-3377 |
| 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: Robert Perkins
25. NAME (Print): Robert Perkins
26. Date Accepted M / D / Y: 8 4 81

I hereby certify that the above named materials and indicated quantity(ies) has (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 | P.O. Box 190 |
| 35. CITY, STATE, ZIP CODE | Griffith, IN 46319 |
| 36. TELEPHONE NUMBER | (219) 924-4370 |
| 37. COMMENTS | To 204R T-50 8/21/81 gm. |

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 4 81

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 53707

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 9-80

MANIFEST NUMBER
A 49959

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank To American Chemical Service On Our P.O. #19001 (Blanket Order
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4,500 | Waste Resin Mixture - Flammable | Flammable | UN1866 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 37[illegible] |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): [illegible]
17. DATE SHIPPED M D Y: 8 5 81

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, IL 60473
22. TELEPHONE NUMBER: (312) 596-3377
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): C.E. MILBURN
26. Date Accepted M D Y: 8 6 81

I hereby certify that the above named materials and indicated quantity(ies) has (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: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, IN 46319
36. TELEPHONE NUMBER: 219) 924-4370
37. COMMENTS: TO WEST AGIT T-50 8/4/81 JPM

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 6 81

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 53707

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

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

067000

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 9-80

MANIFEST NUMBER: A 49960

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: [illegible]
3. COMMENTS/SPECIAL INSTRUCTIONS: TRANSPORTED BY [illegible] TO AMERICAN CHEMICAL [illegible]
4. P.O. BOX OR STREET ADDRESS: [illegible]
5. CITY, STATE, ZIP CODE: [illegible] CREEK WIS 53151
6. TELEPHONE NUMBER: [illegible]

| 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) |
|---|---|---|---|---|---|---|---|
| T/10 | 5,200 | WASTE RESIN MIXTURE [illegible] | [illegible] | [illegible] | 1. Solid 3. Mixture 2. Liquid ☐ | [illegible] | [illegible] |
| | | | | | 1. Solid 3. Mixture 2. Liquid ☐ | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid ☐ | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): [illegible]
17. DATE SHIPPED M D Y: [illegible]

## TRANSPORTER SECTION

18. COMPANY NAME: [illegible]
19. EPA IDENTIFICATION NO.: [illegible]
20. P.O. BOX OR STREET ADDRESS: [illegible]
21. CITY, STATE, ZIP CODE: SOUTH [illegible] IL [illegible]
22. TELEPHONE NUMBER: [illegible]
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): CE MILBURN
26. Date Accepted M / D / Y: 8/7/81

I hereby certify that the above named materials and indicated quantity(ies) has (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.: [illegible]
34. P.O. BOX OR STREET ADDRESS: [illegible]
35. CITY, STATE, ZIP CODE: GRIFFITH INDIANA [illegible]
36. TELEPHONE NUMBER: [illegible]
37. COMMENTS: TO EAST AGIT T-50 [illegible]

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): FDUNEES
40. Date Accepted M / D / Y: 8/7/81

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 53707

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

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

000791

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 9-80

MANIFEST NUMBER
A 49961

000793

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: [illegible]
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by McFrank to American Chemical Service on our PO# 19001
4. P.O. BOX OR STREET ADDRESS: [illegible]
5. CITY, STATE, ZIP CODE: [illegible]
6. TELEPHONE NUMBER: [illegible]

| 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) |
|---|---|---|---|---|---|---|---|
| T/LU | | Waste Resin Mixture Flammable | [illegible] | [illegible] | 1. Solid 3. Mixture 2. Liquid ☐ | [illegible] | 37750 |
| | | | | | 1. Solid 3. Mixture 2. Liquid ☐ | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid ☐ | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): [illegible]
17. DATE SHIPPED M D Y: [illegible]

## TRANSPORTER SECTION

18. COMPANY NAME: McFrank [illegible]
19. EPA IDENTIFICATION NO.: [illegible]
20. P.O. BOX OR STREET ADDRESS: [illegible]
21. CITY, STATE, ZIP CODE: [illegible]
22. TELEPHONE NUMBER: [illegible]
23. COMMENTS: [illegible]

I hereby certify that the above named materials and indicated quantity(ies) has (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): Dave Voss
26. Date Accepted M / D / Y: 8/11/81

I hereby certify that the above named materials and indicated quantity(ies) has (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.:
34. P.O. BOX OR STREET ADDRESS: Robin 190
35. CITY, STATE, ZIP CODE: Griffith Indiana [illegible]
36. TELEPHONE NUMBER: [illegible]
37. COMMENTS: To 211K T-50 8/11/81 JM

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: 8/11/81

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 53707

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

FOR DNR USE ONLY

...S 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 9-80

MANIFEST NUMBER
A 49962

000792

## GENERATOR (SHIPPER) SECTION

| 1. COMPANY NAME | 2. EPA IDENTIFICATION NO. | 3. COMMENTS/SPECIAL INSTRUCTIONS |
|---|---|---|
| PPG Industries | [illegible] | Transported by McFrank to American Chemical Service on Dup P #19001 |
| 4. P.O. BOX OR STREET ADDRESS: [illegible] | | |
| 5. CITY, STATE, ZIP CODE: Oak Creek WI [illegible] | 6. TELEPHONE NUMBER: (414)-[illegible] | |

| 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/W | 4,500 | Waste Resin Mixture Flammable | Flammable | [illegible] | 1. Solid 3. Mixture 2. Liquid [7] | [illegible] | [illegible] |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

| 15. AUTHORIZED SIGNATURE | 16. NAME (Print) | 17. DATE SHIPPED M D Y |
|---|---|---|
| [illegible] | [illegible] | 12 [illegible] |

## TRANSPORTER SECTION

| 18. COMPANY NAME | 19. EPA IDENTIFICATION NO. |
|---|---|
| McFrank Inc | [illegible] |
| 20. P.O. BOX OR STREET ADDRESS: [illegible] | |
| 21. CITY, STATE, ZIP CODE: [illegible] | 22. TELEPHONE NUMBER: (312)-[illegible]-3377 |
| 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 |
|---|---|---|
| Robert Perkins | Robert Perkins | 8/12/81 |

I hereby certify that the above named materials and indicated quantity(ies) has (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 Service | [illegible] |
| 34. P.O. BOX OR STREET ADDRESS: PO Box 190 | |
| 35. CITY, STATE, ZIP CODE: Griffith Ind 46319 | 36. TELEPHONE NUMBER: (219)-[illegible] |
| 37. COMMENTS: TO 210R T-50 8/12/81 [illegible] | |

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 |
|---|---|---|
| [illegible] | [illegible] | 8/12/81 |

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 53707

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 9-80

MANIFEST NUMBER
A 49963

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: [illegible]
3. COMMENTS/SPECIAL INSTRUCTIONS: Transporter [illegible] American Chemical [illegible]
4. P.O. BOX OR STREET ADDRESS: [illegible]
5. CITY, STATE, ZIP CODE: [illegible]
6. TELEPHONE NUMBER: [illegible]

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | [illegible] | [illegible] | [illegible] | [illegible] | 1. Solid 3. Mixture 2. Liquid [2] | [illegible] | [illegible] |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [illegible]
16. NAME (Print): [illegible]
17. DATE SHIPPED M D Y: [illegible]

## TRANSPORTER SECTION

18. COMPANY NAME: McFrank, Inc
19. EPA IDENTIFICATION NO.: [illegible]
20. P.O. BOX OR STREET ADDRESS: [illegible]
21. CITY, STATE, ZIP CODE: [illegible]
22. TELEPHONE NUMBER: [illegible]
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: [illegible]
25. NAME (Print): [illegible]
26. Date Accepted M / D / Y: [illegible]

I hereby certify that the above named materials and indicated quantity(ies) has (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 [illegible]
33. EPA IDENTIFICATION NO.: [illegible]
34. P.O. BOX OR STREET ADDRESS: [illegible]
35. CITY, STATE, ZIP CODE: [illegible]
36. TELEPHONE NUMBER: [illegible]
37. COMMENTS: To 210X T-50 8/14/81 JFM

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): P DUNFEE
40. Date Accepted M / D / Y: 8/14/81

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 53707

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

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

000794

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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# HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER: A 49964

000795

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: [illegible]
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by [illegible] to American Chemical [illegible] on [illegible]
4. P.O. BOX OR STREET ADDRESS: [illegible]
5. CITY, STATE, ZIP CODE: [illegible]
6. TELEPHONE NUMBER: [illegible]

| 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) |
|---|---|---|---|---|---|---|---|
| T/CO | | [illegible] | [illegible] | [illegible] | 1. Solid 3. Mixture 2. Liquid ☐ | [illegible] | [illegible] |
| | | | | | 1. Solid 3. Mixture 2. Liquid ☐ | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid ☐ | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): [illegible]
17. DATE SHIPPED M D Y: / /

## TRANSPORTER SECTION

18. COMPANY NAME: [illegible]
19. EPA IDENTIFICATION NO.: [illegible]
20. P.O. BOX OR STREET ADDRESS: [illegible]
21. CITY, STATE, ZIP CODE: [illegible]
22. TELEPHONE NUMBER: [illegible]
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

I hereby certify that the above named materials and indicated quantity(ies) has (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: [illegible]
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 [illegible]
33. EPA IDENTIFICATION NO.: [illegible]
34. P.O. BOX OR STREET ADDRESS: [illegible]
35. CITY, STATE, ZIP CODE: Griffith Indiana [illegible]
36. TELEPHONE NUMBER: [illegible]
37. COMMENTS: To 211 X T-50 8/18/81 JM

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): FAUNEE
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 53707

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 9-80

MANIFEST
A 499[illegible]

000796

## GENERATOR (SHIPPER) SECTION

| 1. COMPANY NAME | 2. EPA IDENTIFICATION NO. | 3. COMMENTS/SPECIAL INSTRUCTIONS |
|---|---|---|
| PPG Industries | [illegible] | Transported by [illegible] to American Chemical Service [illegible] |
| 4. P.O. BOX OR STREET ADDRESS | | |
| [illegible] 13th St | | |
| 5. CITY, STATE, ZIP CODE | 6. TELEPHONE NUMBER | |
| [illegible] | [illegible] | |

| 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/[illegible] | 4725 | Waste Resin Mixture Flammable Liquid | Flammable | [illegible] | 1. Solid 3. Mixture 2. Liquid ☐ | [illegible] | 42560 |
| | | | | | 1. Solid 3. Mixture 2. Liquid ☐ | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid ☐ | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

| 15. AUTHORIZED SIGNATURE | 16. NAME (Print) | 17. DATE SHIPPED M D Y |
|---|---|---|
| [illegible] | [illegible] | [illegible] |

## TRANSPORTER SECTION

| 18. COMPANY NAME | 19. EPA IDENTIFICATION NO. |
|---|---|
| Mr. Frank Inc | [illegible] |
| 20. P.O. BOX OR STREET ADDRESS | |
| [illegible] | |
| 21. CITY, STATE, ZIP CODE | 22. TELEPHONE NUMBER |
| South Holland Ill | [illegible] |
| 23. COMMENTS | |
| 60473 | |

I hereby certify that the above named materials and indicated quantity(ies) has (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 |
|---|---|---|
| [illegible] | Rich Antis | 8 25 81 |

I hereby certify that the above named materials and indicated quantity(ies) has (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 Service | [illegible] |
| 34. P.O. BOX OR STREET ADDRESS | |
| [illegible] Box 190 | |
| 35. CITY, STATE, ZIP CODE | 36. TELEPHONE NUMBER |
| Griffith Indiana [illegible] | [illegible] |
| 37. COMMENTS | |
| To 211R T-50 8/25/81 JM | |

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 |
|---|---|---|
| [illegible] | FRONTEE | 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 53707

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 9-80

MANIFEST NUMBER
A 49965

## GENERATOR (SHIPPER) SECTION

| 1. COMPANY NAME | 2. EPA IDENTIFICATION NO. | 3. COMMENTS/SPECIAL INSTRUCTIONS |
|---|---|---|
| PPG Industries | WID 099 124 | TRANSPORTED BY MC FRANE TO AMERICAN CHEMICAL SERVICE FOR DISPOSAL |
| 4. P.O. BOX OR STREET ADDRESS: 1600 So 13th St | | |
| 5. CITY, STATE, ZIP CODE: Oil City [illegible] 53579 | 6. TELEPHONE NUMBER: (715) 21[illegible] | |

| 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) |
|---|---|---|---|---|---|---|---|
| TW | 11210 | Waste Paint Related Material | Flammable Combustible | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | [illegible] | [illegible] |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

| 15. AUTHORIZED SIGNATURE | 16. NAME (Print) | 17. DATE SHIPPED M D Y |
|---|---|---|
| [signature] | [illegible] | 2/1 |

## TRANSPORTER SECTION

| 18. COMPANY NAME | 19. EPA IDENTIFICATION NO. |
|---|---|
| MC Frane Inc | WID 990[illegible] |
| 20. P.O. BOX OR STREET ADDRESS: 2010 Fifield St | |
| 21. CITY, STATE, ZIP CODE: [illegible] Wood Wisconsin [illegible] | 22. TELEPHONE NUMBER: 715 421-3577 |

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 |
|---|---|---|
| [signature] | [illegible] | 2/19/81 |

I hereby certify that the above named materials and indicated quantity(ies) has (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 Service | [illegible] |
| 34. P.O. BOX OR STREET ADDRESS: P.O. Box 1[illegible] | |
| 35. CITY, STATE, ZIP CODE: Griffith Indiana [illegible] | 36. TELEPHONE NUMBER: (219) [illegible] |

37. COMMENTS
To 210K T-50 2/21/81 gtm

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] | [illegible] | 2/21/81 |

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 53707

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

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

0007697

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 9-80

MANIFEST NUMBER
A 49967

000798

## GENERATOR (SHIPPER) SECTION

| 1. COMPANY NAME | 2. EPA IDENTIFICATION NO. | 3. COMMENTS/SPECIAL INSTRUCTIONS |
|---|---|---|
| PDI Industries | WID [illegible] | [illegible] |
| 4. P.O. BOX OR STREET ADDRESS | | |
| [illegible] | | |
| 5. CITY, STATE, ZIP CODE | 6. TELEPHONE NUMBER | |
| [illegible] | [illegible] | |

| 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) |
|---|---|---|---|---|---|---|---|
| T/CO | 4550 | [illegible] | [illegible] | UN1866 | 1. Solid 3. Mixture 2. Liquid [2] | [illegible] | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): [illegible]
17. DATE SHIPPED M D Y: [illegible]

## TRANSPORTER SECTION

| 18. COMPANY NAME | 19. EPA IDENTIFICATION NO. |
|---|---|
| [illegible] | [illegible] |
| 20. P.O. BOX OR STREET ADDRESS | |
| [illegible] | |
| 21. CITY, STATE, ZIP CODE | 22. TELEPHONE NUMBER |
| [illegible] | [illegible] |

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 |
|---|---|---|
| [signature] | Rich Antis | 8 28 81 |

I hereby certify that the above named materials and indicated quantity(ies) has (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. |
|---|---|
| [illegible] | [illegible] |
| 34. P.O. BOX OR STREET ADDRESS | |
| [illegible] | |
| 35. CITY, STATE, ZIP CODE | 36. TELEPHONE NUMBER |
| [illegible] | [illegible] |

37. COMMENTS

To 2102 T-50 8/28/81 jrm

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] | POWERS | 8 28 81 |

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 53707

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 9-80

MANIFEST NUMBER
A 49968

## GENERATOR (SHIPPER) SECTION

| 1. COMPANY NAME | 2. EPA IDENTIFICATION NO. | 3. COMMENTS/SPECIAL INSTRUCTIONS |
|---|---|---|
| [illegible] | [illegible] | [illegible] |
| 4. P.O. BOX OR STREET ADDRESS | | |
| [illegible] | | |
| 5. CITY, STATE, ZIP CODE | 6. TELEPHONE NUMBER | |
| [illegible] | [illegible] | |

| 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) |
|---|---|---|---|---|---|---|---|
| T/C | | [illegible] | [illegible] | [illegible] | 1. Solid 3. Mixture 2. Liquid | [illegible] | [illegible] |
| | | | | | 1. Solid 3. Mixture 2. Liquid | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [illegible]
16. NAME (Print): [illegible]
17. DATE SHIPPED M D Y: [illegible]

## TRANSPORTER SECTION

| 18. COMPANY NAME | 19. EPA IDENTIFICATION NO. |
|---|---|
| MF FLOOR INC | [illegible] |
| 20. P.O. BOX OR STREET ADDRESS | |
| [illegible] | |
| 21. CITY, STATE, ZIP CODE | 22. TELEPHONE NUMBER |
| [illegible] | [illegible] |

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 |
|---|---|---|
| [illegible] | [illegible] | [illegible] |

I hereby certify that the above named materials and indicated quantity(ies) has (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. |
|---|---|
| [illegible] | [illegible] |
| 34. P.O. BOX OR STREET ADDRESS | |
| [illegible] | |
| 35. CITY, STATE, ZIP CODE | 36. TELEPHONE NUMBER |
| [illegible] | [illegible] |

37. COMMENTS
TO 210 X T-50 9/1/81 gm

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 |
|---|---|---|
| [illegible] | [illegible] | [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 53707

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

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

008000

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 9-80

MANIFEST NUMBER
A 49969

000801

## GENERATOR (SHIPPER) SECTION

| 1. COMPANY NAME | 2. EPA IDENTIFICATION NO. | 3. COMMENTS/SPECIAL INSTRUCTIONS |
|---|---|---|
| | | |
| 4. P.O. BOX OR STREET ADDRESS | | |
| | | |
| 5. CITY, STATE, ZIP CODE | 6. TELEPHONE NUMBER | |
| | | |

| 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) |
|---|---|---|---|---|---|---|---|
| T/D | | | | UN/NA | 1. Solid 3. Mixture 2. Liquid ☐ | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid ☐ | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid ☐ | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

| 15. AUTHORIZED SIGNATURE | 16. NAME (Print) | 17. DATE SHIPPED M D Y |
|---|---|---|
| | | |

## TRANSPORTER SECTION

| 18. COMPANY NAME | 19. EPA IDENTIFICATION NO. |
|---|---|
| | |
| 20. P.O. BOX OR STREET ADDRESS | |
| | |
| 21. CITY, STATE, ZIP CODE | 22. TELEPHONE NUMBER |
| | |

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 |
|---|---|---|
| | | |

I hereby certify that the above named materials and indicated quantity(ies) has (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. |
|---|---|
| | |
| 34. P.O. BOX OR STREET ADDRESS | |
| | |
| 35. CITY, STATE, ZIP CODE | 36. TELEPHONE NUMBER |
| | |

37. COMMENTS

To 210R T-50 9/4/81 JTM

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 53707

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 9-80

MANIFEST NUMBER
A 49970

000802

## GENERATOR (SHIPPER) SECTION

| 1. COMPANY NAME | 2. EPA IDENTIFICATION NO. | 3. COMMENTS/SPECIAL INSTRUCTIONS |
|---|---|---|
| [illegible] | [illegible] | [illegible] |
| 4. P.O. BOX OR STREET ADDRESS | | |
| [illegible] | | |
| 5. CITY, STATE, ZIP CODE | 6. TELEPHONE NUMBER | |
| [illegible] | [illegible] | |

| 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) |
|---|---|---|---|---|---|---|---|
| [illegible] | 5000 | [illegible] | [illegible] | [illegible] | 1. Solid 3. Mixture 2. Liquid ☐ | [illegible] | 41010 |
| | | | | | 1. Solid 3. Mixture 2. Liquid ☐ | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid ☐ | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [illegible]
16. NAME (Print): [illegible]
17. DATE SHIPPED M D Y: [illegible]

## TRANSPORTER SECTION

| 18. COMPANY NAME | 19. EPA IDENTIFICATION NO. |
|---|---|
| MC Transport Inc | [illegible] |
| 20. P.O. BOX OR STREET ADDRESS | |
| [illegible] | |
| 21. CITY, STATE, ZIP CODE | 22. TELEPHONE NUMBER |
| [illegible] | [illegible] |

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 |
|---|---|---|
| [illegible] | [illegible] | [illegible] |

I hereby certify that the above named materials and indicated quantity(ies) has (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. |
|---|---|
| [illegible] | [illegible] |
| 34. P.O. BOX OR STREET ADDRESS | |
| [illegible] | |
| 35. CITY, STATE, ZIP CODE | 36. TELEPHONE NUMBER |
| [illegible] | [illegible] |

37. COMMENTS

To 210R T-50 9/8/81 gpm

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 |
|---|---|---|
| [illegible] | FDUNFEE | 9 18 81 |

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 53707

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.
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# HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 49971

000803

## GENERATOR (SHIPPER) SECTION

| 1. COMPANY NAME | 2. EPA IDENTIFICATION NO. | 3. COMMENTS/SPECIAL INSTRUCTIONS |
|---|---|---|
| | | |
| 4. P.O. BOX OR STREET ADDRESS | | |
| | | |
| 5. CITY, STATE, ZIP CODE | 6. TELEPHONE NUMBER | |
| | | |

| 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. Solid 3. Mixture 2. Liquid | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

| 15. AUTHORIZED SIGNATURE | 16. NAME (Print) | 17. DATE SHIPPED M D Y |
|---|---|---|
| | | / / |

## TRANSPORTER SECTION

| 18. COMPANY NAME | 19. EPA IDENTIFICATION NO. |
|---|---|
| | |
| 20. P.O. BOX OR STREET ADDRESS | |
| | |
| 21. CITY, STATE, ZIP CODE | 22. TELEPHONE NUMBER |
| | |

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 |
|---|---|---|
| | | |

I hereby certify that the above named materials and indicated quantity(ies) has (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. |
|---|---|
| | |
| 34. P.O. BOX OR STREET ADDRESS | |
| | |
| 35. CITY, STATE, ZIP CODE | 36. TELEPHONE NUMBER |
| | |

37. COMMENTS

To 20x T-50 9/11/81 JRM

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 Mueller | F DUNTEE | 9/11/81 |

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 53707

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 9-80

MANIFEST NUMBER
A 49974

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: [illegible]
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr Frank to American Chemical Service on [illegible]
4. P.O. BOX OR STREET ADDRESS: [illegible] 53 13th St
5. CITY, STATE, ZIP CODE: Oak Creek Wis [illegible]
6. TELEPHONE NUMBER: [illegible]

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4900 | Waste Resin Mixture | Flammable | 10N1866 | 1. Solid 3. Mixture 2. Liquid ☐ | [illegible] | [illegible] |
| | | | | | 1. Solid 3. Mixture 2. Liquid ☐ | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid ☐ | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): [illegible]
17. DATE SHIPPED M D Y: [illegible]

## TRANSPORTER SECTION

18. COMPANY NAME: Mr Frank Inc
19. EPA IDENTIFICATION NO.: [illegible]
20. P.O. BOX OR STREET ADDRESS: [illegible] 13th St
21. CITY, STATE, ZIP CODE: South Alcland Ill [illegible]
22. TELEPHONE NUMBER: (312) [illegible] 3377
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): [illegible]
26. Date Accepted M / D / Y: [illegible]

I hereby certify that the above named materials and indicated quantity(ies) has (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.: [illegible]
34. P.O. BOX OR STREET ADDRESS: P. Box 190
35. CITY, STATE, ZIP CODE: Griffith Indiana [illegible]
36. TELEPHONE NUMBER: [illegible]
37. COMMENTS: To 211R T-50 9/15/81 [illegible]

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: 9/15/81

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 53707

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

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

000804

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 9-80

MANIFEST NUMBER
A 49975

000808

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID [illegible]
3. COMMENTS/SPECIAL INSTRUCTIONS: TRANSPORTED BY MR FRANK TO AMERICAN CHEMICAL SERVICE ON OUR POH 1900
4. P.O. BOX OR STREET ADDRESS: 10300 S. 13th ST
5. CITY, STATE, ZIP CODE: OAK CREEK WIS 53[illegible]
6. TELEPHONE NUMBER: 414-764-[illegible]

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | | WASTE RESIN MIXTURE FLAMMABLE | FLAMMABLE | UN1866 | 1. Solid 3. Mixture 2. Liquid ☐ | [illegible] | 8350 |
| | | | | | 1. Solid 3. Mixture 2. Liquid ☐ | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid ☐ | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): H. WARD L. TIMMAN
17. DATE SHIPPED M D Y: 1 1 81

## TRANSPORTER SECTION

18. COMPANY NAME: MR FRANK INC
19. EPA IDENTIFICATION NO.: [illegible]
20. P.O. BOX OR STREET ADDRESS: [illegible] W 15th ST
21. CITY, STATE, ZIP CODE: South Holland Ill 60473
22. TELEPHONE NUMBER: (312)-[illegible]-3377
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): MIKE MARTIN
26. Date Accepted: 9 1 81

I hereby certify that the above named materials and indicated quantity(ies) has (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[illegible]
34. P.O. BOX OR STREET ADDRESS: PO Box 190
35. CITY, STATE, ZIP CODE: [illegible] IND ANA 46319
36. TELEPHONE NUMBER: (219)-924-[illegible]
37. COMMENTS: TO 210I T-50 9/28/81

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 81

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 53707

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 9-80

MANIFEST NUMBER
A 49976

000806

## GENERATOR (SHIPPER) SECTION

| 1. COMPANY NAME | 2. EPA IDENTIFICATION NO. | 3. COMMENTS/SPECIAL INSTRUCTIONS |
|---|---|---|
| PPG INDUSTRIES | | TRANSPORTED BY |
| 4. P.O. BOX OR STREET ADDRESS | | |
| | | |
| 5. CITY, STATE, ZIP CODE | 6. TELEPHONE NUMBER | |
| | | |

| 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/DM | 4725 | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | 4/200 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

| 15. AUTHORIZED SIGNATURE | 16. NAME (Print) | 17. DATE SHIPPED M D Y |
|---|---|---|
| | | 9 22 81 |

## TRANSPORTER SECTION

| 18. COMPANY NAME | 19. EPA IDENTIFICATION NO. |
|---|---|
| | |
| 20. P.O. BOX OR STREET ADDRESS | |
| | |
| 21. CITY, STATE, ZIP CODE | 22. TELEPHONE NUMBER |
| | |

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 |
|---|---|---|
| | | 9 22 81 |

I hereby certify that the above named materials and indicated quantity(ies) has (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. |
|---|---|
| | |
| 34. P.O. BOX OR STREET ADDRESS | |
| | |
| 35. CITY, STATE, ZIP CODE | 36. TELEPHONE NUMBER |
| | |

37. COMMENTS

TO 211R T-50 9/22/81 JJH.

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 |
|---|---|---|
| | EDWARDS | 9 22 81 |

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 53707

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 9-80

MANIFEST NUMBER
A 49977

000805

## GENERATOR (SHIPPER) SECTION

| 1. COMPANY NAME | 2. EPA IDENTIFICATION NO. | 3. COMMENTS/SPECIAL INSTRUCTIONS |
|---|---|---|
| PPG Industries | WID 990729937 | TRANSPORTED BY MF Transport Co. |
| 4. P.O. BOX OR STREET ADDRESS | | |
| 1 S 210 Summit St | | |
| 5. CITY, STATE, ZIP CODE | 6. TELEPHONE NUMBER | |
| Oak Creek WI 53154 | (414) 761-1611 | |

| 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 DM | 110 | Waste Resin Material Flammable Liquid | Flammable Liquid | NA1993 | 1. Solid 3. Mixture 2. Liquid [ ] | D001 | 2120 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

| 15. AUTHORIZED SIGNATURE | 16. NAME (Print) | 17. DATE SHIPPED M D Y |
|---|---|---|
| Howard L. Finke | Howard L. Finke | 1 15 81 |

## TRANSPORTER SECTION

| 18. COMPANY NAME | 19. EPA IDENTIFICATION NO. |
|---|---|
| MF Transport Inc | ILD000818609 |
| 20. P.O. BOX OR STREET ADDRESS | |
| 2211 E 119th St | |
| 21. CITY, STATE, ZIP CODE | 22. TELEPHONE NUMBER |
| South Holland IL | (312) 596-3317 |

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 |
|---|---|---|
| [signature] | [illegible] | |

I hereby certify that the above named materials and indicated quantity(ies) has (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 Service | [illegible] |
| 34. P.O. BOX OR STREET ADDRESS | |
| P.O. Box 198 | |
| 35. CITY, STATE, ZIP CODE | 36. TELEPHONE NUMBER |
| Griffith Indiana | (219) 838-8777 |

37. COMMENTS

TO 2112 T-50 1/24/81 JMM

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] | PWMEE | 1/28/81 |

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 53707

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 9-80

MANIFEST NUMBER
A 49981

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID 599129 35
3. COMMENTS/SPECIAL INSTRUCTIONS: TRANSPORTED BY MR FRANK TO AMERICAN CHEMICAL SERVICE ON OUR PO # 19101
4. P.O. BOX OR STREET ADDRESS: 10800 13th ST
5. CITY, STATE, ZIP CODE: OAK CREEK WIS 53154
6. TELEPHONE NUMBER: (414)-764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4500 | WASTE RESIN MIXTURE FLAMABLE LIQUID | FLAMMABLE LIQUID | UN1866 | 1. Solid 3. Mixture 2. Liquid [X] | [illegible] | [illegible] |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): [illegible]
17. DATE SHIPPED M D Y: 9 [illegible]

## TRANSPORTER SECTION

18. COMPANY NAME: MR FRANK INC
19. EPA IDENTIFICATION NO.: ILD069504160
20. P.O. BOX OR STREET ADDRESS: 2010 13th ST
21. CITY, STATE, ZIP CODE: SOUTH HOLLAND ILL 60473
22. TELEPHONE NUMBER: (312)-596-3377
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): MICHAEL MARTIN
26. Date Accepted M D Y: 9 29 81

I hereby certify that the above named materials and indicated quantity(ies) has (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.: [illegible]
34. P.O. BOX OR STREET ADDRESS: PO BOX 190
35. CITY, STATE, ZIP CODE: GRIFFITH IND 46319
36. TELEPHONE NUMBER: (219)-924-1370
37. COMMENTS: TO 210R T-50 9/29/81 JM.

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: 9 29 81

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 53707

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

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

000817

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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# HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER: A 49988

000816

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059977935
3. COMMENTS/SPECIAL INSTRUCTIONS: TRANSPORTED BY MR FRANK IN AMERICAN CHEMICAL SERVICE IN OUR PO #19001
4. P.O. BOX OR STREET ADDRESS: 1080 S. 13th ST
5. CITY, STATE, ZIP CODE: OAK CREEK WIS 53154
6. TELEPHONE NUMBER: 414 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| 1/10 | 4850 | WASTE RESIN MIXTURE FLAMMABLE UN1866 | FLAMMABLE | UN1866 | 1. Solid 3. Mixture 2. Liquid | [illegible] | 4/1[illegible] |
| | | | | | 1. Solid 3. Mixture 2. Liquid | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: Howard L Timian
16. NAME (Print): HOWARD L TIMIAN
17. DATE SHIPPED: M D Y 10/2/81

## TRANSPORTER SECTION

18. COMPANY NAME: MR FRANK INC
19. EPA IDENTIFICATION NO.: FL0069506160
20. P.O. BOX OR STREET ADDRESS: 201 W 155th ST
21. CITY, STATE, ZIP CODE: SOUTH HOLLAND ILL 60473
22. TELEPHONE NUMBER: (312) 596 3377
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): Dave Voss
26. Date Accepted: M D Y 10/2/81

I hereby certify that the above named materials and indicated quantity(ies) has (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.: [illegible]
34. P.O. BOX OR STREET ADDRESS: Box 190
35. CITY, STATE, ZIP CODE: GRIFFITH INDIANA 46319
36. TELEPHONE NUMBER: (219) 924 4370
37. COMMENTS: To 2102 T-50 10/2/81 gm

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: M D Y 10/2/81

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 53707

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.
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# HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 49989

000814

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059977935
3. COMMENTS/SPECIAL INSTRUCTIONS: TRANSPORTED BY MR FRANK TO AMERICAN CHEMICAL SERVICE ON OUR PO #19001
4. P.O. BOX OR STREET ADDRESS: 10800 S 13th ST
5. CITY, STATE, ZIP CODE: OAK CREEK WIS 53154
6. TELEPHONE NUMBER: 414-764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4550 | WASTE RESIN MIXTURE UN 1866 | FLAMMABLE | UN1866 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | [illegible] |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: Howard L Timian
16. NAME (Print): HOWARD L. TIMIAN
17. DATE SHIPPED M D Y: 10 16 81

## TRANSPORTER SECTION

18. COMPANY NAME: MR FRANK INC
19. EPA IDENTIFICATION NO.: FLD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W 155th ST
21. CITY, STATE, ZIP CODE: SOUTH HOLLAND ILL 60473
22. TELEPHONE NUMBER: (312) 596-3377
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: Michael Martin
25. NAME (Print): MICHAEL MARTIN
26. Date Accepted M D Y: 10 16 81

I hereby certify that the above named materials and indicated quantity(ies) has (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.: [redacted]
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.: [illegible]
34. P.O. BOX OR STREET ADDRESS: PO Box 190
35. CITY, STATE, ZIP CODE: GRIFFITH IND 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS: TO 210 T T-50 10/6/81 [illegible]

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: 10 16 81

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 53707

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 9-80

MANIFEST NUMBER
A 49990

000807

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: NID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: TRANSPORTED BY MR FRANK TO AMERICAN CHEMICAL SERVICE ON OUR PO# 19001
4. P.O. BOX OR STREET ADDRESS: 10800 S 13th ST
5. CITY, STATE, ZIP CODE: OAK CREEK WIS 53154
6. TELEPHONE NUMBER: 414-764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 7 | WASTE RESIN MIXTURE UN1866 | FLAMMABLE LIQUID | UN1866 | 1. Solid 3. Mixture 2. Liquid [2] | F002 F005 | 41030 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): H. WARD LITMAN
17. DATE SHIPPED M D Y: 10 19 81

## TRANSPORTER SECTION

18. COMPANY NAME: HR FRANK INC
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W 155th ST
21. CITY, STATE, ZIP CODE: SOUTH HOLLAND ILL 60473
22. TELEPHONE NUMBER: (312) 596-3377
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): [illegible]
26. Date Accepted M / D / Y: 10 19 81

I hereby certify that the above named materials and indicated quantity(ies) has (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: PO BOX 190
35. CITY, STATE, ZIP CODE: GRIFFITH INDIANA
36. TELEPHONE NUMBER: (219) 924-6370
37. COMMENTS: TO 211 X T-~~53~~ 50 10/9/81 [illegible]

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: 10 19 81

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 53707

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 8400-66 9-80

MANIFEST NUMBER: A 49992

000815

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: [illegible]
3. COMMENTS/SPECIAL INSTRUCTIONS: TRANSPORTED BY MR FRANK TO AMERICAN CHEMICAL SERVICE [illegible] NUR [illegible]
4. P.O. BOX OR STREET ADDRESS: [illegible] 53154
5. CITY, STATE, ZIP CODE: [illegible]
6. TELEPHONE NUMBER: [illegible]

| 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) |
|---|---|---|---|---|---|---|---|
| 1/10 | 4550 | [illegible] | [illegible] | UN1866 | 1. Solid 3. Mixture 2. Liquid ☒ | [illegible] | [illegible] |
| | | | | UN1866 | 1. Solid 3. Mixture 2. Liquid ☐ | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid ☐ | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): [illegible]
17. DATE SHIPPED M D Y: [illegible]

## TRANSPORTER SECTION

18. COMPANY NAME: MR FRANK INC
19. EPA IDENTIFICATION NO.: [illegible]
20. P.O. BOX OR STREET ADDRESS: [illegible]
21. CITY, STATE, ZIP CODE: SOUTH HOLLAND ILL [illegible]
22. TELEPHONE NUMBER: (312) [illegible]
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): MICHAEL MARTIN
26. Date Accepted M D Y: 10 15 81

I hereby certify that the above named materials and indicated quantity(ies) has (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.: [illegible]
34. P.O. BOX OR STREET ADDRESS: [illegible]
35. CITY, STATE, ZIP CODE: GRIFFITH INDIANA [illegible]
36. TELEPHONE NUMBER: [illegible]
37. COMMENTS: TO 203E - T-50 10/5/81 JM.

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: 10 15 81

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 53707

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.
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# HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 49998

608000

## GENERATOR (SHIPPER) SECTION

| 1. COMPANY NAME | 2. EPA IDENTIFICATION NO. | 3. COMMENTS/SPECIAL INSTRUCTIONS |
|---|---|---|
| PPG INDUSTRIES | WID [illegible] | TRANSPORTED BY MR FRANK TO AMERICAN CHEMICAL SERVICE GRIFFITH IN P.O.# 19001 |
| 4. P.O. BOX OR STREET ADDRESS: 10700 SOUTHWEST | | |
| 5. CITY, STATE, ZIP CODE: CALUMET CITY WIS | 6. TELEPHONE NUMBER: [illegible] | |

| 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) |
|---|---|---|---|---|---|---|---|
| T/CO | 4875 | WASTE RESIN MIXTURE | FLAMMABLE | NA1866 | 1. Solid 3. Mixture [2] 2. Liquid | F003 F005 | |
| | | | | | 1. Solid 3. Mixture [ ] 2. Liquid | | |
| | | | | | 1. Solid 3. Mixture [ ] 2. Liquid | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

| 15. AUTHORIZED SIGNATURE | 16. NAME (Print) | 17. DATE SHIPPED M D Y |
|---|---|---|
| [signature] | H. [illegible] TIMAN | 10 13 81 |

## TRANSPORTER SECTION

| 18. COMPANY NAME | 19. EPA IDENTIFICATION NO. |
|---|---|
| MR FRANK INC | ILD 095066 |
| 20. P.O. BOX OR STREET ADDRESS: 201 W 155TH | |
| 21. CITY, STATE, ZIP CODE: SOUTH HOLLAND ILL 60473 | 22. TELEPHONE NUMBER: (312) 596-3379 |

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 |
|---|---|---|
| [signature] | D. VOS | 10/13/81 |

I hereby certify that the above named materials and indicated quantity(ies) has (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 SERVICE | IND [illegible] |
| 34. P.O. BOX OR STREET ADDRESS: P.O. BOX 190 | |
| 35. CITY, STATE, ZIP CODE: GRIFFITH INDIANA 46319 | 36. TELEPHONE NUMBER: 219 [illegible] |

37. COMMENTS
TO 220 R T-50 10/13/81 JTM

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] | EDWEEB | 10/13/81 |

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 53707

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.
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# HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
[illegible]
A 49999

000810

## GENERATOR (SHIPPER) SECTION

| | |
|---|---|
| 1. COMPANY NAME | PPG INDUSTRIES |
| 2. EPA IDENTIFICATION NO. | [illegible] |
| 3. COMMENTS/SPECIAL INSTRUCTIONS | TRANSPORTED BY MR FRANK TO AMERICAN CHEMICAL SERVICE [illegible] |
| 4. P.O. BOX OR STREET ADDRESS | [illegible] |
| 5. CITY, STATE, ZIP CODE | [illegible] |
| 6. TELEPHONE NUMBER | [illegible] |

| 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) |
|---|---|---|---|---|---|---|---|
| 1/10 | 5000 | WASTE RESIN MIXTURE FLAMMABLE LIQUID | FLAMMABLE | UNIDENT | 1. Solid 3. Mixture 2. Liquid ☐ | [illegible] | 39520 |
| | | | | | 1. Solid 3. Mixture 2. Liquid ☐ | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid ☐ | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

| 15. AUTHORIZED SIGNATURE | 16. NAME (Print) | 17. DATE SHIPPED M D Y |
|---|---|---|
| [illegible] | [illegible] | [illegible] |

## TRANSPORTER SECTION

| | |
|---|---|
| 18. COMPANY NAME | MR FRANK INC |
| 19. EPA IDENTIFICATION NO. | FL0009506160 |
| 20. P.O. BOX OR STREET ADDRESS | 2[illegible] WISSCH ST |
| 21. CITY, STATE, ZIP CODE | SOUTH HOLLAND ILL |
| 22. TELEPHONE NUMBER | (312) 596 3377 |
| 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 |
|---|---|---|
| [illegible] | [illegible] | 10 14 81 |

I hereby certify that the above named materials and indicated quantity(ies) has (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. | [illegible] |
| 34. P.O. BOX OR STREET ADDRESS | P.O. BOX 190 |
| 35. CITY, STATE, ZIP CODE | GRIFFITH INDIANA AL 319 |
| 36. TELEPHONE NUMBER | [illegible] |
| 37. COMMENTS | TO 210 X T-50 10/14/81 JM |

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 |
|---|---|---|
| [illegible] | FDJNFEE | 10 14 81 |

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 53707

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

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# HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER: A 50000

000811

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 1111 | Waste Resin Mixture Flammable Liquid | Flammable | UN1866 | 1. Solid 3. Mixture 2. Liquid [2] | D003 D005 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE:
16. NAME (Print): Howard L. Timian
17. DATE SHIPPED M D Y: / /

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
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:

I hereby certify that the above named materials and indicated quantity(ies) has (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: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Indiana 46319
36. TELEPHONE NUMBER: (219) 924-4370
37. COMMENTS: To 210 x T-50 10/16/81 jpm.

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 / D / Y: 10/16/81

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 53707

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

...e reverse side, Copy 6, for instructions.
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# HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 48108

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: ( 414 ) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 490 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 4700 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 2 1/16 82

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 115th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: ( 312 ) 596-3377
23. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and 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 1/16 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 Service
33. EPA IDENTIFICATION NO.: IND01630265
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:

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): BOB MAUCK
40. Date Accepted M D Y: 2 1/6 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 53707

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
CCM

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
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# HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 48109

003432

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4/55 G. | Waste Paint | Flammable Liquid | Un1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 4100 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: D.F. Scudder
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 2 18 82

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 115th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
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:

I hereby certify that the above named materials and indicated quantity(ies) has (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:

T0210 R T-50
GKM 2/18/82

HAZARDOUS WASTE FACILITY

## HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND01630265
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:

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

38. AUTHORIZED SIGNATURE: Bob Mack
39. NAME (Print): BOB MACK
40. Date Accepted M / D / Y: 2 18 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 53707

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 9-80

MANIFEST NUMBER: A 48110

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Services - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: ( 414 ) - 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4,800 Gals. | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 40,000 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 2 / 22 / 82

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 115th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: ( 312 ) - 596-3377
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): Robert PERKINS
26. Date Accepted M / D / Y: 2 / 22 / 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: [signature]
30. NAME (Print):
31. Date Accepted M / D / Y:

To 210 RT-50
GRM 2/22/82

HAZARDOUS WASTE FACILITY

## HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND01630265
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:

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): MICHAEL O. PRICE
40. Date Accepted M / D / Y: 2 / 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 53707

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

FOR DNR USE ONLY

0034-31

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 9-80

MANIFEST NUMBER
A 48111

Q03440

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) - 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4 7/10 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 5620 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

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15. AUTHORIZED SIGNATURE
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 2 19 82

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 115th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) - 596-3377
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: 2 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 Service
33. EPA IDENTIFICATION NO.: IND01630265
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

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

38. AUTHORIZED SIGNATURE
39. NAME (Print): FOWLER
40. Date Accepted M D Y: 2 19 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 53707

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 R T-50
GEM 2/24/82

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 9-80

MANIFEST NUMBER: A 48112

003437

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service – on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4900 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 41500 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

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15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED: M D Y 2 17 82

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 115th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
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 2 D 17 Y 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 Service
33. EPA IDENTIFICATION NO.: IND01630265
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:

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): EDWARD
40. Date Accepted: M 2 D 26 Y 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 53707

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 2/26/82

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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# HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER: A 48113

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 11721 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture [2] 2. Liquid | F003 F005 | 46560 |
| | | | | | 1. Solid 3. Mixture [ ] 2. Liquid | D006 D007 | |
| | | | | | 1. Solid 3. Mixture [ ] 2. Liquid | D008 D009 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED: M D Y 3 1 82

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 115th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
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): ALAN CARLIA
26. Date Accepted: M 3 D 1 Y 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 Service
33. EPA IDENTIFICATION NO.: IND01630265
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:

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): FOWLER
40. Date Accepted: M 3 D 1 Y 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 53707

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 KT-50
GRM 3/1/82

0034 33

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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# HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 48114

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4300 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture [2] 2. Liquid | F003 F005 | 38960 |
| | | | | | 1. Solid 3. Mixture [ ] 2. Liquid | D006 D007 | |
| | | | | | 1. Solid 3. Mixture [ ] 2. Liquid | D008 D009 | |

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15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 3 / 3 / 82

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 115th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
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): [illegible]
26. Date Accepted M D Y: 3 3 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 Service
33. EPA IDENTIFICATION NO.: IND016302655
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:

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 53707

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 R T-50
GRM 3/3/82

003437

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 9-80

MANIFEST NUMBER: A 48115

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 1175 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture [2] 2. Liquid | F003 F005 | 24000 |
| | | | | | 1. Solid 3. Mixture [ ] 2. Liquid | D006 D007 | |
| | | | | | 1. Solid 3. Mixture [ ] 2. Liquid | D008 D009 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED: M D Y 3 15 82

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 115th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
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): [illegible]
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 210 K T-50
GKM 3/5/82

## HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND01630265
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:

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 3 D 8 Y 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 53707

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

FOR DNR USE ONLY

TS WASTE FACILITY

0034 30

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 9-80

MANIFEST NUMBER
A 48116

003442

## GENERATOR (SHIPPER) SECTION

| 1. COMPANY NAME | 2. EPA IDENTIFICATION NO. | 3. COMMENTS/SPECIAL INSTRUCTIONS |
|---|---|---|
| PPG INDUSTRIES | WID059972935 | Transported by Mr. Frank to |
| 4. P.O. BOX OR STREET ADDRESS | | American Chemical Service - on our P.O.#19001 |
| 10800 South 13th Street | | |
| 5. CITY, STATE, ZIP CODE | 6. TELEPHONE NUMBER | |
| Oak Creek, WI 53154 | ( 414 ) 764-6000 | |

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 11 900 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE

16. NAME (Print): D.F. Scudder

17. DATE SHIPPED M D Y: 3/8/82

## TRANSPORTER SECTION

| 18. COMPANY NAME | 19. EPA IDENTIFICATION NO. |
|---|---|
| Mr. Frank Inc. | ILD069506160 |
| 20. P.O. BOX OR STREET ADDRESS | |
| 201 West ~~115~~ 155th Street | |
| 21. CITY, STATE, ZIP CODE | 22. TELEPHONE NUMBER |
| South Holland, Illinois | ( 312 ) 596-3377 |

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 |
|---|---|---|
| | | |

I hereby certify that the above named materials and indicated quantity(ies) has (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 Service | IND01630265 |
| 34. P.O. BOX OR STREET ADDRESS | |
| P.O. Box 190 | |
| 35. CITY, STATE, ZIP CODE | 36. TELEPHONE NUMBER |
| Griffith, Indiana 46319 | ( 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 |
|---|---|---|
| | | 3/8/82 |

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 53707

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 3/8/82

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 9-80

MANIFEST NUMBER: A 48117

003441

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WIB059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 3950 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | [illegible] |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: D.F. Scudder
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 3/10/82

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 155th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
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): [illegible]
26. Date Accepted M / D / Y: 3/10/82

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 Service
33. EPA IDENTIFICATION NO.: IND016302655
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:

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: 3/10/82

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 53707

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 GRAY

HAZARDOUS WASTE FACILITY 3/10/82

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 9-80

MANIFEST NUMBER
A 48118

0034444

## GENERATOR (SHIPPER) SECTION

| 1. COMPANY NAME | 2. EPA IDENTIFICATION NO. | 3. COMMENTS/SPECIAL INSTRUCTIONS |
|---|---|---|
| PPG INDUSTRIES | WID059972935 | Transported by Mr. Frank To American Chemical Service - on our P.O.#19001 |
| 4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street | | |
| 5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154 | 6. TELEPHONE NUMBER: (414) 764-6000 | |

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 1750 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 3[illegible] |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 3/12/82

## TRANSPORTER SECTION

| 18. COMPANY NAME | 19. EPA IDENTIFICATION NO. |
|---|---|
| Mr. Frank Inc. | ILD069506160 |
| 20. P.O. BOX OR STREET ADDRESS: 201 West 115th Street | |
| 21. CITY, STATE, ZIP CODE: South Holland, Illinois | 22. TELEPHONE NUMBER: (312) 596-3377 |
| 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 |
|---|---|---|
| [signature] | [illegible] | 3 / 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 |
|---|---|---|
| | | |

To 210 RT-50
GRM 3/12/82

HAZARDOUS WASTE FACILITY

## HAZARDOUS WASTE FACILITY SECTION

| 32. FACILITY NAME | 33. EPA IDENTIFICATION NO. |
|---|---|
| American Chemical Service | IND01630265 |
| 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 | |

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 | 3 / 12 / 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 53707

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 9-80

MANIFEST NUMBER
A 48119

003443

## GENERATOR (SHIPPER) SECTION

| 1. COMPANY NAME | 2. EPA IDENTIFICATION NO. | 3. COMMENTS/SPECIAL INSTRUCTIONS |
|---|---|---|
| PPG INDUSTRIES | WID059972935 | Transported by Mr. Frank to American Chemical Service - on our P.O.#19001 |
| 4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street | | |
| 5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154 | 6. TELEPHONE NUMBER: (414) 764-6000 | |

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 1550 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 37920 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 3/15/82

## TRANSPORTER SECTION

| 18. COMPANY NAME | 19. EPA IDENTIFICATION NO. |
|---|---|
| Mr. Frank Inc. | ILD069506160 |
| 20. P.O. BOX OR STREET ADDRESS: 201 West 115th Street | |
| 21. CITY, STATE, ZIP CODE: South Holland, Illinois | 22. TELEPHONE NUMBER: (312) 596-3377 |
| 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 |
|---|---|---|
| [signature] | [illegible] | |

I hereby certify that the above named materials and indicated quantity(ies) has (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 Service | IND01630265 |
| 34. P.O. BOX OR STREET ADDRESS: P.O. Box 190 | |
| 35. CITY, STATE, ZIP CODE: Griffith, Indiana | 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] | EDUN FEE | 3/15/82 |

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 53707

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 3/15/82

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 9-80

MANIFEST NUMBER: A 48120

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10600 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 1750 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 37440 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 3 17 82

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 115th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
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): [illegible]
26. Date Accepted M D Y: 3 17 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 Service
33. EPA IDENTIFICATION NO.: IND01630265
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:

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: 3 17 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 53707

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 3/18/82

003443

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

Wisconsin Statutes 144
FORM 4400-66 9-80

A 48121

## GENERATOR (SHIPPER) SECTION

| 1. COMPANY NAME | 2. EPA IDENTIFICATION NO. | 3. COMMENTS/SPECIAL INSTRUCTIONS |
|---|---|---|
| PPG INDUSTRIES | WID059972935 | Transported by Mr. Frank to American Chemical Service - on our P.O.#19001 |
| 4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street | | |
| 5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154 | 6. TELEPHONE NUMBER: (414) 764-6000 | |

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4600 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 37,165 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED: M 3 D 17 Y 82

## TRANSPORTER SECTION

| 18. COMPANY NAME | 19. EPA IDENTIFICATION NO. |
|---|---|
| Mr. Frank Inc. | ILD069506160 |
| 20. P.O. BOX OR STREET ADDRESS: 201 West 115th Street | |
| 21. CITY, STATE, ZIP CODE: South Holland, Illinois | 22. TELEPHONE NUMBER: (312) 596-3377 |
| 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 |
|---|---|---|
| [signature] | CARRIER | M 1 D 17 Y 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 | 33. EPA IDENTIFICATION NO. |
|---|---|
| American Chemical Service | ILD01630265 |
| 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 | |

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] | DUNCE | M 3 D 19 Y 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 53707

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 21/KT-50
GEM 3/22/82

0034477

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 9-80

MANIFEST NUMBER
B/F67336
A 48122

003449

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4,800 | Waste Paint | Flammable Liquid | UN1263 ~~NA1263~~ | 1. Solid 3. Mixture [2] 2. Liquid | F003 F005 | 37980 |
| | | | | | 1. Solid 3. Mixture [ ] 2. Liquid | D006 D007 | |
| | | | | | 1. Solid 3. Mixture [ ] 2. Liquid | D008 ~~D009~~ | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: D.F. Scudder
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED: M 3 D 22 Y 82

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 115th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
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): C E MILBURN
26. Date Accepted: M 3 D 22 Y 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 Service
33. EPA IDENTIFICATION NO.: IND01630265
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:

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: 3 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 53707

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 K T-50
GRM 3/22/82

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 9-80

MANIFEST NUMBER
A 48123

003445

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) - 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4000 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | [illegible] |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 3/24/82

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West ~~115~~ 133th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) - 596-3377
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): [illegible]
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

## HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND01630265
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

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 DUNKEE
40. Date Accepted M / D / Y: 3/24/82

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 53707

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 K T-50
GRM 3/24/82

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 9-80

MANIFEST NUMBER
A 48124

## GENERATOR (SHIPPER) SECTION

| 1. COMPANY NAME | 2. EPA IDENTIFICATION NO. | 3. COMMENTS/SPECIAL INSTRUCTIONS |
|---|---|---|
| PPG INDUSTRIES | WID059972935 | Transported by Mr. Frank to |
| 4. P.O. BOX OR STREET ADDRESS | | american Chemical Service - on our P.O.#19001 |
| 10800 South 13th Street | | |
| 5. CITY, STATE, ZIP CODE | 6. TELEPHONE NUMBER | |
| Oak Creek, WI 53154 | (414) 764-6000 | |

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 1100 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture [2] 2. Liquid | F003 F005 | 41 |
| | | | | | 1. Solid 3. Mixture [ ] 2. Liquid | D006 D007 | |
| | | | | | 1. Solid 3. Mixture [ ] 2. Liquid | D008 D009 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: D.F. Scudder
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED: M 3 D 26 Y 82

## TRANSPORTER SECTION

| 18. COMPANY NAME | 19. EPA IDENTIFICATION NO. |
|---|---|
| Mr. Frank Inc. | ILD069506160 |
| 20. P.O. BOX OR STREET ADDRESS | |
| 201 West 115th Street | |
| 21. CITY, STATE, ZIP CODE | 22. TELEPHONE NUMBER |
| South Holland, Illinois | (312) 596-3377 |

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 |
|---|---|---|
| | | |

I hereby certify that the above named materials and indicated quantity(ies) has (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 Service | IND01630265 |
| 34. P.O. BOX OR STREET ADDRESS | |
| P.O. Box 190 | |
| 35. CITY, STATE, ZIP CODE | 36. TELEPHONE NUMBER |
| Griffith, Indiana 46319 | (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 3 D 26 Y 82 |
|---|---|---|
| D.F. Scudder | FOR DNR | |

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 53707

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 3/26/82

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 9-80

MANIFEST NUMBER
A 48125

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4900 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 40[illegible] |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 3/30/82

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West ~~115~~ 155th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
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): M. [illegible] MASTIN
26. Date Accepted: 3/30/81

I hereby certify that the above named materials and indicated quantity(ies) has (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.: IND01630265
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

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: 3/30/82

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 53707

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

FOR DNR USE ONLY

TO 210 R T-50
GRM 3.30.82

HAZARDOUS WASTE FACILITY

003447

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 9-80

MANIFEST NUMBER: A 43126

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4,500 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 45120 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED: M 4 D 1 Y 82

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West ~~115~~ 155th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
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): K.L. Antis
26. Date Accepted: M 4 D 1 Y 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 service
33. EPA IDENTIFICATION NO.: IND01630265
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:

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 4 D 1 Y 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 53707

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 GKN
7.1.82

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.
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# HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 48127

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4550 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | [illegible] |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 4/5/82

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West ~~115th~~ 155 Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
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): Rich Antis
26. Date Accepted M D Y: 4/5/82

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 Service
33. EPA IDENTIFICATION NO.: IND01630265
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

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: 4/5/82

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 53707

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 4.5.82

HAZARDOUS WASTE FACILITY

003451

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 9-80

MANIFEST NUMBER: A 48128

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 5,000 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 47,000 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: D.F. Scudder
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 4 17 82

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 155th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
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

I hereby certify that the above named materials and indicated quantity(ies) has (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: 4 19 82

## HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND01630265
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:

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

38. AUTHORIZED SIGNATURE
39. NAME (Print): PDVNFEE
40. Date Accepted: 4 19 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 53707

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 4.7.82

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 9-80

MANIFEST NUMBER: A 48129

003433

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 5,000 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 4 13 82

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 115th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
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: Robert Perkins
25. NAME (Print): Robert PERKINS
26. Date Accepted M D Y: 4/13/82

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 Service
33. EPA IDENTIFICATION NO.: IND01630265
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

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

38. AUTHORIZED SIGNATURE: Richard Kuhns
39. NAME (Print): Richard PERKINS
40. Date Accepted M / D / Y: 4/13/82

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 53707

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 GLM 4.13.82

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 9-80

MANIFEST NUMBER
A 48134

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4500 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 4/29/82

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West ~~115th~~ 155 Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
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): [signature]
26. Date Accepted M D Y: 4/29/82

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 Service
33. EPA IDENTIFICATION NO.: IND01630265
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

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 M D Y: 4/29/82

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 53707

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

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

203 KT-50
CRM 4-29-82

003461

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

Wisconsin Statutes 144
FORM 4400-66 9-80

A 48135

## GENERATOR (SHIPPER) SECTION

| 1. COMPANY NAME | 2. EPA IDENTIFICATION NO. | 3. COMMENTS/SPECIAL INSTRUCTIONS |
|---|---|---|
| PPG INDUSTRIES | WID059972935 | Transported by Mr. Frank to |
| 4. P.O. BOX OR STREET ADDRESS | | American Chemical Services - on our P.O.#19001 |
| 10800 South 13th Street | | |
| 5. CITY, STATE, ZIP CODE | 6. TELEPHONE NUMBER | |
| Oak Creek, WI 53154 | 414 ) 764-6000 | |

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 11910 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 4 Tons |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 5 14 82

## TRANSPORTER SECTION

| 18. COMPANY NAME | 19. EPA IDENTIFICATION NO. |
|---|---|
| Mr. Frank Inc. | ILD069306160 |
| 20. P.O. BOX OR STREET ADDRESS | |
| 201 West 23 115th Street | |
| 21. CITY, STATE, ZIP CODE | 22. TELEPHONE NUMBER |
| South Holland, Illinois | (312 ) 596-3377 |

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 |
|---|---|---|
| [signature] | M. LE COMPTE | 5 14 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 | 33. EPA IDENTIFICATION NO. |
|---|---|
| American Chemical Service | IND01630265 |
| 34. P.O. BOX OR STREET ADDRESS | |
| P.O. Box 190 | |
| 35. CITY, STATE, ZIP CODE | 36. TELEPHONE NUMBER |
| Griffith, Indiana 46319 | 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] | FOUNFEE | 5 14 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 53707

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

FOR DNR USE ONLY

To 210 R T-50
GPM 5.5.82

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 9-80

MANIFEST NUMBER
A 48136

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4900 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 41300 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED: M D Y 5 16 82

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West ~~115th~~ 155 Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
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): [signature]
26. Date Accepted: M D Y 5 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 Service
33. EPA IDENTIFICATION NO.: IND01630265
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

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): FDUNEEE
40. Date Accepted: M D Y 5 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 53707

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 TK T-50 GRM 5.6.82

003459

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 9-80

MANIFEST NUMBER: A 48137

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Services - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 520 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 4540 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: D.F. Scudder
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED: M D Y 5 11 82

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West ~~115~~ 153th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
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 5 / 11 / 82 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 Service
33. EPA IDENTIFICATION NO.: IND01630265
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

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

38. AUTHORIZED SIGNATURE: X [signature]
39. NAME (Print): [signature]
40. Date Accepted: M 5 / 11 / 82 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 53707

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
GRM 5.11.82

003462

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 9-80

MANIFEST NUMBER
B1 R7 2 6 3 4
A 48138

003463

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4900 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 43 + 20 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 5/13/82

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West ~~115th~~ 155 Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
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): Rich Antis
26. Date Accepted M D Y: 5/13/82

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 Service
33. EPA IDENTIFICATION NO.: IND01630265
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

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: 5/13/82

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 53707

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 RT-50
6 RM 5.13.82

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 9-80

MANIFEST NUMBER: A 48139

0034 65

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Services - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 5000 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 42,000 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED: 5/19/82

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 155th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
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): CARPENTER
26. Date Accepted: 5/19/82

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 Service
33. EPA IDENTIFICATION NO.: IND01630265
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

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. DUTEE
40. Date Accepted: 5/19/82

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 53707

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 211KT-50
GRM 5-18-82

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 9-80

MANIFEST NUMBER
A 48140

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972035
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4550 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 384 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 5 20 82

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West ~~115th~~ 155 Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
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): Rich Antis
26. Date Accepted M D Y: 5 20 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 Service
33. EPA IDENTIFICATION NO.: IND01630265
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

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: 5 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 53707

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 211R T-50
GRM 5.20.82

003464

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 9-80

MANIFEST NUMBER: A 48141

003467

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: ( 414 ) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 490 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture [2] 2. Liquid | F003 F005 | 4000 |
| | | | | | 1. Solid 3. Mixture [ ] 2. Liquid | D006 D007 | |
| | | | | | 1. Solid 3. Mixture [ ] 2. Liquid | D008 D009 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 5 17 82

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 115th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: ( 312 ) 596-3377
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): [illegible]
26. Date Accepted M 5 D 17 Y 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 Service
33. EPA IDENTIFICATION NO.: IND01630265
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:

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): EDUNTEE
40. Date Accepted M 5 D 27 Y 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 53707

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 205K T-50
6PM 5-27-82

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 9-80

MANIFEST NUMBER: A 48142

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service - onour P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: 414 ) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4550 | Waste Paint | Flammable Liquid | UN2163 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 37520 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 5-25-82

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 115th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
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): Mike Garcia
26. Date Accepted M D Y: 5 25 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:

To 210 RT-50 6PM 5.25.82

HAZARDOUS WASTE FACILITY

## HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND01630265
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:

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): EDWARD E
40. Date Accepted M D Y: 5 25 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 53707

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

FOR DNR USE ONLY

003460

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 9-80

MANIFEST NUMBER: A 48156

003463

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059972925
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service
4. P.O. BOX OR STREET ADDRESS: 10500 South 13th St
5. CITY, STATE, ZIP CODE: Oak Creek, Wis 53154
6. TELEPHONE NUMBER: (414)-764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4800 | Waste Paint | Flammable Liquid | UN 1263 | 1. Solid 3. Mixture 2. Liquid [x] | F003 F005 | 39000 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 D008 D009 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 6 / 1 / 82

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 155 Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312)-596-3377
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): C.E. Milburn
26. Date Accepted M / D / Y: 6 / 1 / 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 Service
33. EPA IDENTIFICATION NO.: IND016302651
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:

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: 6 / 1 / 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 53707

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

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

T0204KT-50
GRM 6.1.82

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 9-80

MANIFEST NUMBER: A 48158

003469

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059972975
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service
4. P.O. BOX OR STREET ADDRESS: 10800 S 17th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis 53154
6. TELEPHONE NUMBER: (414)-764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4,900 | Waste Print | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 4072 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D003 D009 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED: M D Y 6 13 82

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069536160
20. P.O. BOX OR STREET ADDRESS: 201 West 135 Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312)-596-3377
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: Robert Perkins
25. NAME (Print): Robert Perkins
26. Date Accepted: M D Y 6 13 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 Service
33. EPA IDENTIFICATION NO.: IND016302165
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:

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 3 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 53707

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 GPM 6.3.82

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 9-80

MANIFEST NUMBER
BIX 714 55
A 48160

0034 10

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: UPG Industries
2. EPA IDENTIFICATION NO.: [illegible]
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by IWR Link Inc - American Chemical Service
4. P.O. BOX OR STREET ADDRESS: 4500 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis 53154
6. TELEPHONE NUMBER: (414) 761-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/M | 0060 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture [2] 2. Liquid | F003 F005 | 3960 |
| | | | | | 1. Solid 3. Mixture [ ] 2. Liquid | D006 D007 | |
| | | | | | 1. Solid 3. Mixture [ ] 2. Liquid | D008 D009 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Schilder
17. DATE SHIPPED M D Y: 6 17 82

## TRANSPORTER SECTION

18. COMPANY NAME: IWR Link Inc
19. EPA IDENTIFICATION NO.: ILD[illegible]
20. P.O. BOX OR STREET ADDRESS: 701 West 127th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3577
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): [illegible]
26. Date Accepted M / D / Y: 6 / 17 / 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 Service
33. EPA IDENTIFICATION NO.: ILD[illegible]
34. P.O. BOX OR STREET ADDRESS: P.O. Box 119
35. CITY, STATE, ZIP CODE: W. Hartford, Indiana 46519
36. TELEPHONE NUMBER: (219) 771-4226
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): FOUNTAIN
40. Date Accepted M / D / Y: 6 / 19 / 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 53707

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 FT-50
GRM 6-23-82

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 9-80

MANIFEST NUMBER
A 48161

003471

## GENERATOR (SHIPPER) SECTION

| 1. COMPANY NAME | 2. EPA IDENTIFICATION NO. | 3. COMMENTS/SPECIAL INSTRUCTIONS |
|---|---|---|
| PPG Industries | WID054911935 | |
| 4. P.O. BOX OR STREET ADDRESS: 10900 S. 13th. St. - CT | | |
| 5. CITY, STATE, ZIP CODE: Oak Creek, Wis 53154 | 6. TELEPHONE NUMBER: (414) 764-6000 | |

| 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) |
|---|---|---|---|---|---|---|---|
| T/U | 4906 | WASTE PAINT | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 4154 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Schaller
17. DATE SHIPPED M D Y: 6 19 82

## TRANSPORTER SECTION

| 18. COMPANY NAME | 19. EPA IDENTIFICATION NO. |
|---|---|
| MR. Frank INC. | ILD065506160 |
| 20. P.O. BOX OR STREET ADDRESS: 201 West 155 St. | |
| 21. CITY, STATE, ZIP CODE: South Holland, Ill. | 22. TELEPHONE NUMBER: (312) 596-3777 |
| 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 I D I Y |
|---|---|---|
| [signature] | Michael Garcia | 6 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 I D I Y |
|---|---|---|
| | | |

## HAZARDOUS WASTE FACILITY SECTION

| 32. FACILITY NAME | 33. EPA IDENTIFICATION NO. |
|---|---|
| American Chemical Service | IND043015465 |
| 34. P.O. BOX OR STREET ADDRESS: P.O. Box 190 | |
| 35. CITY, STATE, ZIP CODE: Griffith, Ind. 46319 | 36. TELEPHONE NUMBER: (219) 931-4372 |
| 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 I D I Y |
|---|---|---|
| [signature] | [illegible] | 6 19 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 I D I Y |
|---|---|---|
| | | |

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

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 FT-50
GRM 6-9-82

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 9-80

MANIFEST NUMBER
B1 * 74365
A 48162

003474

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059977135
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10500 S. 13th ST.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414)-764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4,500 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 42900 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D. F. Scudder
17. DATE SHIPPED M D Y: 6/11/82

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank, Inc.
19. EPA IDENTIFICATION NO.: TID069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 135 St.
21. CITY, STATE, ZIP CODE: South Holland, Ill.
22. TELEPHONE NUMBER: (312)-596-3377
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: Robert Perkins
25. NAME (Print): Robert Perkins
26. Date Accepted M / D / Y: 6/11/82

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 Service
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Ind. 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 Wees
40. Date Accepted M / D / Y: 6/11/82

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 53707

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

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

T0211KT-50
GRM 6-11-82

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 9-80

MANIFEST NUMBER
A 48163

003419

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414)-761-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 5200 | WASTE PAINT | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 451 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 6/15/82

## TRANSPORTER SECTION

18. COMPANY NAME: MR. Frank, Inc.
19. EPA IDENTIFICATION NO.: TLD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 155 St.
21. CITY, STATE, ZIP CODE: South Holland, Ill.
22. TELEPHONE NUMBER: (312)-596-3372
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: 6/15/82

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 Service
33. EPA IDENTIFICATION NO.: TND016300165
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Ind. 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: 6/15/82

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 53707

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
GRM 6.15.82

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 9-80

MANIFEST NUMBER: A 48164

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries Inc.
2. EPA IDENTIFICATION NO.: WID 059177935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis.
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 5000 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 42420 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 6/17/82

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: TLD 095061 60
20. P.O. BOX OR STREET ADDRESS: 201 West 155 St
21. CITY, STATE, ZIP CODE: South Holland, Ill
22. TELEPHONE NUMBER: (312) 596-5377
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): M. Pfeifer
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

## HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND 043026 ST
34. P.O. BOX OR STREET ADDRESS: PO Box 190
35. CITY, STATE, ZIP CODE: Griffith, Ind. 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: 6/17/82

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 53707

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 FT-63 GRM
6-17-82

003472

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 9-80

MANIFEST NUMBER
A 48165

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059977935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414)-764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4C00 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | Fen 3 Tod 5 | 27806 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 6/21/82

## TRANSPORTER SECTION

18. COMPANY NAME: MR Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 155 St.
21. CITY, STATE, ZIP CODE: South Holland, Ill.
22. TELEPHONE NUMBER: (312)-596-3371
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): [illegible]
26. Date Accepted M D Y: 6/21/82

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 Service
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Ind. 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: 6/21/82

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 53707

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

FOR DNR USE ONLY

TO210RT-50 GRM
6.21.82

HAZARDOUS WASTE FACILITY

003413

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 9-80

MANIFEST NUMBER: A 48166

## GENERATOR (SHIPPER) SECTION

| 1. COMPANY NAME | 2. EPA IDENTIFICATION NO. | 3. COMMENTS/SPECIAL INSTRUCTIONS |
|---|---|---|
| W.C. Tomkins | WID 986 [illegible] 35 | |
| 4. P.O. BOX OR STREET ADDRESS | | |
| 1500 S. 13th St. | | |
| 5. CITY, STATE, ZIP CODE | 6. TELEPHONE NUMBER | |
| Milwaukee, Wis. | 414 384-4100 | |

| 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) |
|---|---|---|---|---|---|---|---|
| TW | 4000 | WASTE PAINT | Flammable Liquid | NA1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | [illegible] |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D001 D007 D008 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D007 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature] | 16. NAME (Print): D.F. Schultz | 17. DATE SHIPPED: M 6 D 23 Y 82

## TRANSPORTER SECTION

| 18. COMPANY NAME | 19. EPA IDENTIFICATION NO. |
|---|---|
| Mr Trans Inc | WID 095 [illegible] 115 |
| 20. P.O. BOX OR STREET ADDRESS | |
| 201 West 155 St | |
| 21. CITY, STATE, ZIP CODE | 22. TELEPHONE NUMBER |
| South Holland, Ill. | (312) 596-2377 |
| 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 |
|---|---|---|
| [signature] | [illegible] | / / |

I hereby certify that the above named materials and indicated quantity(ies) has (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 Service | IND 980 [illegible] 263 |
| 34. P.O. BOX OR STREET ADDRESS | |
| P.O. Box 190 | |
| 35. CITY, STATE, ZIP CODE | 36. TELEPHONE NUMBER |
| Griffith, Ind. 46319 | (219) 924-4500 |
| 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 6 D 23 Y 82 |
|---|---|---|
| [signature] | F. DUNFEE | |

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 53707

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

FOR DNR USE ONLY [ ]

[illegible]OUS WASTE FACILITY

To 211 RT-50
6 Rail 6-23-82

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 9-80

MANIFEST NUMBER
A 48167

## GENERATOR (SHIPPER) SECTION

| 1. COMPANY NAME | 2. EPA IDENTIFICATION NO. | 3. COMMENTS/SPECIAL INSTRUCTIONS |
|---|---|---|
| PIK Industries, Inc | WID 052 999 135 | |
| 4. P.O. BOX OR STREET ADDRESS: 10800 S 13th St | | |
| 5. CITY, STATE, ZIP CODE: Oak Creek, WIS 53154 | 6. TELEPHONE NUMBER: (414)-764-1600 | |

| 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) |
|---|---|---|---|---|---|---|---|
| T/U | 4000 | WASTE PAINT | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 40,200 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D005 D009 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Stenger
17. DATE SHIPPED M D Y: 6/15/82

## TRANSPORTER SECTION

| 18. COMPANY NAME | 19. EPA IDENTIFICATION NO. |
|---|---|
| Mid Link Trucking | ILD 054 561 140 |
| 20. P.O. BOX OR STREET ADDRESS: 201 West 155th St | |
| 21. CITY, STATE, ZIP CODE: South Holland, Ill. | 22. TELEPHONE NUMBER: (312)-596-3338 |
| 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 |
|---|---|---|
| [signature] | [illegible] | |

I hereby certify that the above named materials and indicated quantity(ies) has (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. |
|---|---|
| Wisconsin Chemical Service | WID 048 306 465 |
| 34. P.O. BOX OR STREET ADDRESS: P.O. Box 190 | |
| 35. CITY, STATE, ZIP CODE: Griffith, Ind. 46319 | 36. TELEPHONE NUMBER: (219)-924-1370 |
| 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] | 1-DUN FEE | 6/25/82 |

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 53707

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

FOR DNR USE ONLY

T0211 RT-50
GRM 6-25-82

WASTE FACILITY

003415

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 9-80

MANIFEST NUMBER: A 48168

003410

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID058977935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4900 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 40120 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 6/28/82

## TRANSPORTER SECTION

18. COMPANY NAME: MR. FRANK, INC.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 WEST 155 ST
21. CITY, STATE, ZIP CODE: South Holland, Ill.
22. TELEPHONE NUMBER: (312) 596-3377
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): CE MILBURN
26. Date Accepted M D Y: 6/28/82

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 Service
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. BOX 190
35. CITY, STATE, ZIP CODE: Griffith, IND. 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: 6/28/82

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 53707

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
6-28-82

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 9-80

MANIFEST NUMBER: A 48169

## GENERATOR (SHIPPER) SECTION

| 1. COMPANY NAME | 2. EPA IDENTIFICATION NO. | 3. COMMENTS/SPECIAL INSTRUCTIONS |
|---|---|---|
| [illegible] | [illegible] | |
| 4. P.O. BOX OR STREET ADDRESS: [illegible] | | |
| 5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154 | 6. TELEPHONE NUMBER: (414) 764-6400 | |

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4,900 | WASTE PAINT | Flammable Liquid | UN1263 | 1. Solid 3. Mixture [2] 2. Liquid | D003 F005 | [illegible] |
| | | | | | 1. Solid 3. Mixture [ ] 2. Liquid | D006 D007 | |
| | | | | | 1. Solid 3. Mixture [ ] 2. Liquid | D008 D009 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED: M 6 D 30 Y 82

## TRANSPORTER SECTION

| 18. COMPANY NAME | 19. EPA IDENTIFICATION NO. |
|---|---|
| MR. FRANK, INC. | ILD069016160 |
| 20. P.O. BOX OR STREET ADDRESS: 201 W. 155 St. | |
| 21. CITY, STATE, ZIP CODE: South Holland, Ill. | 22. TELEPHONE NUMBER: (312) 596-3377 |
| 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 |
|---|---|---|
| Robert Perkins | Robert Perkins | M 6 D 30 Y 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 | 33. EPA IDENTIFICATION NO. |
|---|---|
| American Chemical Service | ILD016325265 |
| 34. P.O. BOX OR STREET ADDRESS: P.O. Box 190 | |
| 35. CITY, STATE, ZIP CODE: Griffith, Ind. 46319 | 36. TELEPHONE NUMBER: (219) 924-1550 |
| 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] | EVANS | M 6 D 30 Y 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 53707

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 6-30-82

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 9-80

MANIFEST NUMBER
A 48170

0034 15

## GENERATOR (SHIPPER) SECTION

| 1. COMPANY NAME | 2. EPA IDENTIFICATION NO. | 3. COMMENTS/SPECIAL INSTRUCTIONS |
|---|---|---|
| PPG Industries | WID 000 729 927 | |
| 4. P.O. BOX OR STREET ADDRESS | | |
| 10800 S 13th St. | | |
| 5. CITY, STATE, ZIP CODE | 6. TELEPHONE NUMBER | |
| Oak Creek, Wis. | (414) 764-6000 | |

| 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) |
|---|---|---|---|---|---|---|---|
| T/N | 1100 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture [2] 2. Liquid | F003 F005 | 4/1760 |
| | | | | | 1. Solid 3. Mixture [ ] 2. Liquid | D006 D007 | |
| | | | | | 1. Solid 3. Mixture [ ] 2. Liquid | D008 D009 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Schilder
17. DATE SHIPPED: M 7 D 2 Y 82

## TRANSPORTER SECTION

| 18. COMPANY NAME | 19. EPA IDENTIFICATION NO. |
|---|---|
| WK Trans, Inc. | TIDO 95261 60 |
| 20. P.O. BOX OR STREET ADDRESS | |
| 201 W 155 St. | |
| 21. CITY, STATE, ZIP CODE | 22. TELEPHONE NUMBER |
| South Holland, Ill. | (312) 596-3377 |
| 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 |
|---|---|---|
| [signature] | [illegible] | 7 1 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 | 33. EPA IDENTIFICATION NO. |
|---|---|
| American Chemical Service | ILD 063 206 45 |
| 34. P.O. BOX OR STREET ADDRESS | |
| P.O. Box 190 | |
| 35. CITY, STATE, ZIP CODE | 36. TELEPHONE NUMBER |
| Griffith, Ind. 46319 | (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] | FD/NFEE | 7 2 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 53707

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 7-2-82

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 9-80

MANIFEST NUMBER: A 48171

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th street
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4,200 | Waste Paint | flammable liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D. F. Scudder
17. DATE SHIPPED M D Y: 7 /6 82

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155 st.
21. CITY, STATE, ZIP CODE: South Holland, Ill.
22. TELEPHONE NUMBER: (312) 596-3377
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): C.E. MILBURN
26. Date Accepted: 7/6/82

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 Service
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Ind. 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: 7/6/82

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 53707

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 ET-50
GRM 7-6-82

003370

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 9-80

MANIFEST NUMBER
A 48172

003482

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th street
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4,700 | Waste Paint | flammable liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | Foo3 Foo5 | 3 P/ |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | Doo6 Doo7 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | Doo8 Doo9 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D. F. Scudder
17. DATE SHIPPED M D Y: 7 / 9 / 82

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th st.
21. CITY, STATE, ZIP CODE: South Holland, Ill.
22. TELEPHONE NUMBER: (312) 596-3377
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): C E MILBURN
26. Date Accepted: 7 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 Service
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Ind. 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: 7 9 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 53707

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

FOR DNR USE ONLY

To 211 R T-50 GRM
7.9.82

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 9-80

MANIFEST NUMBER: A 48173

## GENERATOR (SHIPPER) SECTION

| 1. COMPANY NAME | 2. EPA IDENTIFICATION NO. | 3. COMMENTS/SPECIAL INSTRUCTIONS |
|---|---|---|
| PPG Industries | WID059972935 | |
| 4. P.O. BOX OR STREET ADDRESS | | |
| 10800 S. 13th street | | |
| 5. CITY, STATE, ZIP CODE | 6. TELEPHONE NUMBER | |
| Oak Creek, Wis. 53154 | ( 414 ) 764-6000 | |

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 450 | Waste Paint | flammable liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 4500 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D. F. Scudder
17. DATE SHIPPED: M D Y — 7 14 82

## TRANSPORTER SECTION

| 18. COMPANY NAME | 19. EPA IDENTIFICATION NO. |
|---|---|
| Mr. Frank, Inc. | ILD069506160 |
| 20. P.O. BOX OR STREET ADDRESS | |
| 201 W. 155th street | |
| 21. CITY, STATE, ZIP CODE | 22. TELEPHONE NUMBER |
| South Holland, Ill. | ( 312 ) 596-3377 |
| 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 |
|---|---|---|
| [signature] | [illegible] | 7 14 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 | 33. EPA IDENTIFICATION NO. |
|---|---|
| American Chemical Services | IND01630265 |
| 34. P.O. BOX OR STREET ADDRESS | |
| P.O. Box 190 | |
| 35. CITY, STATE, ZIP CODE | 36. TELEPHONE NUMBER |
| Griffith, Ind. 46319 | (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] | EDUNFEE | 7 14 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 53707

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 K T-50
GEM 7.14.82

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 9-80

MANIFEST NUMBER
A 48175

003372

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4900 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 42600 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: D.F. Scudder
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 7 21 82

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069586160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill.
22. TELEPHONE NUMBER: (312) 596-3377
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: Dave Voss
25. NAME (Print): Dave Voss
26. Date Accepted: 7 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 Service
33. EPA IDENTIFICATION NO.: IND016302265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Ind. 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 21 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 53707

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 GRM 7-21-82

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 9-80

07-2381

A 48176

003481

## GENERATOR (SHIPPER) SECTION

| 1. COMPANY NAME | 2. EPA IDENTIFICATION NO. | 3. COMMENTS/SPECIAL INSTRUCTIONS |
|---|---|---|
| PPG Industries | WID005999935 | |
| 4. P.O. BOX OR STREET ADDRESS | | |
| 10800 S. 13th St. | | |
| 5. CITY, STATE, ZIP CODE | 6. TELEPHONE NUMBER | |
| Oak Creek, Wis. | (414) 764-6000 | |

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4200 | WASTE PAINT | Flammable Liquid | UN1263 | 1. Solid 3. Mixture [2] 2. Liquid | F003 F005 | 39800 |
| | | | | | 1. Solid 3. Mixture [ ] 2. Liquid | D006 D007 | |
| | | | | | 1. Solid 3. Mixture [ ] 2. Liquid | D008 D009 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: D.F. Scudder

16. NAME (Print): D.F. Scudder

17. DATE SHIPPED M D Y: 7 12 82

## TRANSPORTER SECTION

| 18. COMPANY NAME | 19. EPA IDENTIFICATION NO. |
|---|---|
| Mr. Frank, Inc. | ILD069506160 |
| 20. P.O. BOX OR STREET ADDRESS | |
| 221 W. 153rd St. | |
| 21. CITY, STATE, ZIP CODE | 22. TELEPHONE NUMBER |
| South Holland, Ill | (312) 596-3377 |
| 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 |
|---|---|---|
| Donald N Bult | Donald N Bult | 7 23 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 | 33. EPA IDENTIFICATION NO. |
|---|---|
| American Chemical Service | IND063022645 |
| 34. P.O. BOX OR STREET ADDRESS | |
| P.O. Box 190 | |
| 35. CITY, STATE, ZIP CODE | 36. TELEPHONE NUMBER |
| Griffith, IND 46319 | 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 53707

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

FOR DNR USE ONLY

GENERATOR

PPG INDUSTRIES

PPG INDUSTRIES, INC./10800 SO. 13TH STREET/OAK CREEK, WISCONSIN 53154/AREA 414/764-6000

July 27, 1982

Dept. of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, WI 53707

re: Exception Report - Wis. Manifest A48176

Please be advised that on Wisconsin Manifest number A48176, dated 7/23/82, the Transporter EPA identification number was inadvertently left off.

This manifest listed PPG Industries as the Generator (of Waste Paint), Mr. Frank Inc. as the Transporter, and American Chemical Service as the Hazardous Waste Facility. The Transporter section should have listed the EPA identification number of Mr. Frank Inc. as ILD069506160. A corrected copy of the manifest is enclosed.

We regret this oversight, and hope it has not caused any inconvenience.

Sincerely,

D.F. Scudder
Environmental Engineer

cc: Mr. Frank Inc.
201 West 155th Street
South Holland, Illinois 60473

American Chemical Service
P.O. Box 190
Griffith, Indiana 46319

003394

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 9-80

MANIFEST NUMBER: A 48176

003515

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis.
6. TELEPHONE NUMBER: (414)-764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4200 | WASTE PAINT | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | [illegible] |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 7/23/82

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank, Inc.
19. EPA IDENTIFICATION NO.:
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill
22. TELEPHONE NUMBER: (312)-596-3377
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): Donald H. Bult
26. Date Accepted M D Y: 7/23/82

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 Service
33. EPA IDENTIFICATION NO.: IND016302665
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, IND 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: 7/23/82

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 53707

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 7-23-82

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 9-80

MANIFEST NUMBER
A 48177

003374

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID0[illegible]
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th
5. CITY, STATE, ZIP CODE: Oak Creek, Wis 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4.875 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 4[illegible] |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D. F. Scudder
17. DATE SHIPPED M D Y: / /

## TRANSPORTER SECTION

18. COMPANY NAME: MR. Frank Inc.
19. EPA IDENTIFICATION NO.: [redacted] ILD069586160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill
22. TELEPHONE NUMBER: (312) 596-3377
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): C E Milburn
26. Date Accepted: 7/26/82

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 Service
33. EPA IDENTIFICATION NO.: IND016302[illegible]5
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, IND. 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: 7/26/82

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 53707

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

FOR DNR USE ONLY

TO 210 R T-50.
GPM 7-26-82

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 9-80

MANIFEST NUMBER: A 48178

003373

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID 9972935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis
6. TELEPHONE NUMBER: (414) 764 6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4500 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 27 260 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Sudder
17. DATE SHIPPED M D Y: 7 28 82

## TRANSPORTER SECTION

18. COMPANY NAME: MR Frank, Inc.
19. EPA IDENTIFICATION NO.: TLD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312) 596-3377
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: 7 28 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 Service
33. EPA IDENTIFICATION NO.: IND016302265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, IND. 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 28 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 53707

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

FOR DNR USE ONLY

70211E T-50 GRAM
7 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 9-80

MANIFEST NUMBER
A 48179

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID 05997435
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis.
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4,800 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [1] | F003 F005 | [illegible] |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 7 30 82

## TRANSPORTER SECTION

18. COMPANY NAME: MR. Frank, INC.
19. EPA IDENTIFICATION NO.: TLD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th Street
21. CITY, STATE, ZIP CODE: South [illegible] Ill.
22. TELEPHONE NUMBER: (312) 596-3377
23. COMMENTS:

[illegible] indicated quantity(ies) has (have) been accepted [illegible]edge that delivery shall be made to the facility

[illegible] (Print): Milburn
26. Date Accepted M D Y: 7 30 82

[illegible] quantity(ies) has (have) been accepted [illegible] delivery shall be made to the facility

28. EPA IDENTIFICATION NO.:
31. Date Accepted M / D / Y

## HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND011130265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, IND. 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: 7 30 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 53707

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

FOR DNR USE ONLY

-50
30.82

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 9-80

MANIFEST NUMBER
A 48180

## GENERATOR (SHIPPER) SECTION

| 1. COMPANY NAME | 2. EPA IDENTIFICATION NO. | 3. COMMENTS/SPECIAL INSTRUCTIONS |
|---|---|---|
| PPG Industries | WIDO[illegible]7736 | |
| 4. P.O. BOX OR STREET ADDRESS | | |
| 1200 S 12th St. | | |
| 5. CITY, STATE, ZIP CODE | 6. TELEPHONE NUMBER | |
| Fox Cities, Wis. 54914 | 414-739-6600 | |

| 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) |
|---|---|---|---|---|---|---|---|
| TW | | WASTE PAINT | Flammable | [illegible] | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 4111 00 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D001 D035 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D001 D035 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Schilder
17. DATE SHIPPED M D Y: 5 13 82

## TRANSPORTER SECTION

| 18. COMPANY NAME | 19. EPA IDENTIFICATION NO. |
|---|---|
| MR Trucking Inc | TIDO[illegible]2416 |
| 20. P.O. BOX OR STREET ADDRESS | |
| 201 N. 105th. St. | |
| 21. CITY, STATE, ZIP CODE | 22. TELEPHONE NUMBER |
| South Holland, Ill. 60473 | 312-596-3377 |
| 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 12 D 14 Y |
|---|---|---|
| [signature] | [illegible] | |

I hereby certify that the above named materials and indicated quantity(ies) has (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. |
|---|---|
| Envirochem Chemical Service | |
| 34. P.O. BOX OR STREET ADDRESS | |
| P.O. Box 190 | |
| 35. CITY, STATE, ZIP CODE | 36. TELEPHONE NUMBER |
| Griffith, Ind. 46319 | 219-924-4275 |
| 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 12 D 82 Y |
|---|---|---|
| [signature] | F DUNFEE | |

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 53707

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

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TOLLE T-50
CIM 2282

00337

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 9-80

MANIFEST NUMBER
A 48181

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID05917935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414)-764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4,900 | Waste Paint | Flammable Liquid | UN 1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | [illegible] |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 8 14 82

## TRANSPORTER SECTION

18. COMPANY NAME: MR. FRANK INC.
19. EPA IDENTIFICATION NO.: ILD061506160
20. P.O. BOX OR STREET ADDRESS: 201 W 155th St
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312)-596-3377
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): C.E. Milborn
26. Date Accepted M D Y: 8 4 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 Service
33. EPA IDENTIFICATION NO.: IND016306165
34. P.O. BOX OR STREET ADDRESS: P.O. Box 110
35. CITY, STATE, ZIP CODE: Griffith, Ind 46319
36. TELEPHONE NUMBER: (219)-924-4310
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 M D Y: 8 4 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 53707

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
61 M 8.4.82

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 9-80

MANIFEST NUMBER: A 48186

## GENERATOR (SHIPPER) SECTION

| 1. COMPANY NAME | 2. EPA IDENTIFICATION NO. | 3. COMMENTS/SPECIAL INSTRUCTIONS |
|---|---|---|
| PPG Industries | WIDOC 000724625 | |
| 4. P.O. BOX OR STREET ADDRESS: 10800 S 13th St. | | |
| 5. CITY, STATE, ZIP CODE: Oak Creek, Wis 53154 | 6. TELEPHONE NUMBER: 414 764-1600 | |

| 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) |
|---|---|---|---|---|---|---|---|
| T/M | | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture [2] 2. Liquid | F003 F005 | 4000 |
| | | | | | 1. Solid 3. Mixture [ ] 2. Liquid | F003 F005 D001 | |
| | | | | | 1. Solid 3. Mixture [ ] 2. Liquid | F003 D001 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature] | 16. NAME (Print): D.F. Schuller | 17. DATE SHIPPED M D Y: 8 12 82

## TRANSPORTER SECTION

| 18. COMPANY NAME | 19. EPA IDENTIFICATION NO. |
|---|---|
| MR Trans Inc. | WIDOC 000616070 |
| 20. P.O. BOX OR STREET ADDRESS: 101 W. 153rd Street | |
| 21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473 | 22. TELEPHONE NUMBER: 312 596-3377 |
| 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 |
|---|---|---|
| [signature] | Don Voss | 8 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 | 33. EPA IDENTIFICATION NO. |
|---|---|
| Envirochemical Service | TNDOK 000[illegible] |
| 34. P.O. BOX OR STREET ADDRESS: P.O. Box 190 | |
| 35. CITY, STATE, ZIP CODE: [illegible], TND 116319 | 36. TELEPHONE NUMBER: 919 [illegible] |
| 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] | FD Wntee | 8 12 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 53707

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 2117 7-50
GPM 8.6.82

003579

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 9-80

MANIFEST NUMBER
B/K 7012
A 48188

## GENERATOR (SHIPPER) SECTION

| 1. COMPANY NAME | 2. EPA IDENTIFICATION NO. | 3. COMMENTS/SPECIAL INSTRUCTIONS |
|---|---|---|
| PPG Industries | WID059122983 | |
| 4. P.O. BOX OR STREET ADDRESS: 10500 S. 13th St. | | |
| 5. CITY, STATE, ZIP CODE: Oak Creek, WIS 53154 | 6. TELEPHONE NUMBER: (414) 764-1600 | |

| 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) |
|---|---|---|---|---|---|---|---|
| T/N | 4,100 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 3911 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: D.F. Scudder
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 8/12/82

## TRANSPORTER SECTION

| 18. COMPANY NAME | 19. EPA IDENTIFICATION NO. |
|---|---|
| MK Ferry TNC | TXD065061160 |
| 20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St. | |
| 21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473 | 22. TELEPHONE NUMBER: (312) 596-3377 |
| 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 |
|---|---|---|
| E.H. Mc Cann | C.E. Milburn | 8 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 |
|---|---|---|
| | | |

TO2032 T-50 61M
8-13-82

HAZARDOUS WASTE FACILITY

## HAZARDOUS WASTE FACILITY SECTION

| 32. FACILITY NAME | 33. EPA IDENTIFICATION NO. |
|---|---|
| Wisconsin Chemical Service | IND063007665 |
| 34. P.O. BOX OR STREET ADDRESS: P.O. Box 190 | |
| 35. CITY, STATE, ZIP CODE: Griffith, Ind. 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 |
|---|---|---|
| D.W. Lee | D.W. LEE | 8 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 53707

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

FOR DNR USE ONLY

0033582

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 9-80

MANIFEST NUMBER
A 48189

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID009972935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414) 764-1000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4,900 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | [illegible] |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 2 16 82

## TRANSPORTER SECTION

18. COMPANY NAME: MR. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W 155 St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312) 596-3377
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): C E Milburn
26. Date Accepted: 8/16/82

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 Service
33. EPA IDENTIFICATION NO.: IND[illegible]
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, IND 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): ED UNFEE
40. Date Accepted: 8/16/82

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 53707

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 K T-50
GPM 8.16.82

003381

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 48190

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S 13th St
5. CITY, STATE, ZIP CODE: Oak Creek, Wis 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 5,000 | WASTE SOLVENT NOS | Flammable Liquid | NA1993 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 36040 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 8/17/82

## TRANSPORTER SECTION

18. COMPANY NAME: MR. FRANK, INC.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312) 596-3377
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): Michael Martin
26. Date Accepted M D Y: 8/17/82

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 Service
33. EPA IDENTIFICATION NO.: IND063021
34. P.O. BOX OR STREET ADDRESS: P.O. BOX 190
35. CITY, STATE, ZIP CODE: Griffith, IND 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): FOUNFEZ
40. Date Accepted M D Y: 8/17/82

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 53707

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 211K T.50
GPM 8.17.82

003380

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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# HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER: A 48192

003584

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10500 S 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4,500 | WASTE PAINT | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 27720 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 8/20/82

## TRANSPORTER SECTION

18. COMPANY NAME: MR Frank Inc
19. EPA IDENTIFICATION NO.: ILD0695061 60
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312) 596-3377
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): Rich Antis
26. Date Accepted M D Y: 8/20/82

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 Service
33. EPA IDENTIFICATION NO.: IND0113[illegible]
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, IND. 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: 8/20/82

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 53707

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 R 7-50
GPM 8.20.82

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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# HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 48193

003383

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059172235
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 5000 | WASTE PAINT | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 40120 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 8 23 82

## TRANSPORTER SECTION

18. COMPANY NAME: MR. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD069506100
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill 60473
22. TELEPHONE NUMBER: (312) 596-3377
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): [illegible]
26. Date Accepted M D Y: 8 23 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 Service
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Ind. 46319
36. TELEPHONE NUMBER: (219) 924-4570
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: 8 23 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 53707

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 GRM
8.23.82

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 9-80

MANIFEST NUMBER
A 48194

## GENERATOR (SHIPPER) SECTION

| 1. COMPANY NAME | 2. EPA IDENTIFICATION NO. | 3. COMMENTS/SPECIAL INSTRUCTIONS |
|---|---|---|
| PPG Industries Co | WIDO [illegible] | |
| 4. P.O. BOX OR STREET ADDRESS: 16800 S 18th St | | |
| 5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154 | 6. TELEPHONE NUMBER: (414) 764-1660 | |

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 5,000 | WASTE Solvent mix | Flammable Liquid | NA1993 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | [illegible] |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE

16. NAME (Print): D.F. Schiltz

17. DATE SHIPPED M D Y: 8 24 82

## TRANSPORTER SECTION

| 18. COMPANY NAME | 19. EPA IDENTIFICATION NO. |
|---|---|
| MR Trucking Inc. | WID[illegible]6160 |
| 20. P.O. BOX OR STREET ADDRESS: 301 W. 155 N. St | |
| 21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473 | 22. TELEPHONE NUMBER: (312) 596-3377 |
| 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 |
|---|---|---|
| Michael Martin | Michael Martin | 8/24/82 |

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 | 33. EPA IDENTIFICATION NO. |
|---|---|
| Bruce Church Chemical Service | T-ND[illegible]0265 |
| 34. P.O. BOX OR STREET ADDRESS: P.O. Box 190 | |
| 35. CITY, STATE, ZIP CODE: Cavalier, ND 58219 | 36. TELEPHONE NUMBER: 701-265-4376 |
| 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 |
|---|---|---|
| Edwfee | EDWFEE | 8/24/82 |

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 53707

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 211K 7-50
CTM 8-24-82

11-9-84

003585

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 9-80

MANIFEST NUMBER
B1X79023
A 48196

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID0099779935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S 13th St
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4500 | WASTE PAINT | Flammable Liquid | UN 1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 37080 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 8/27/82

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank, Inc
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W 155th St
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312) 596-3377
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): Gary Druen
26. Date Accepted M D Y: 8/27/82

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 Service
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Ind. 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: 8/27/82

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 53707

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

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO204R T-50 6PM
8.30.82

003388

Wisconsin Statutes 144
FORM 4400-66 9-80

A 48197

Please type or print clearly using ball point pen — press hard.

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059972735
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 5000 | WASTE PAINT | Flammable Liquid | UN 1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 29000 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Sudder
17. DATE SHIPPED M D Y: 8 30 82

## TRANSPORTER SECTION

18. COMPANY NAME: MR. Frank, Inc.
19. EPA IDENTIFICATION NO.: IND069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312) 596-3377
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): [signature]
26. Date Accepted M D Y: 8 30 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 Service
33. EPA IDENTIFICATION NO.: IND016302265
34. P.O. BOX OR STREET ADDRESS: P.O. BOX 190
35. CITY, STATE, ZIP CODE: Griffith, Ind 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 30 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 53707

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 7-50
GPM 8-30-82

003587

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 9-80

MANIFEST NUMBER
A 48198

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: [illegible]
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4500 | WASTE SOLVENT NOS | Flammable Liquid | NA 1993 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | [illegible] |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D. F. Scudder
17. DATE SHIPPED M D Y: 8 31 82

## TRANSPORTER SECTION

18. COMPANY NAME: MR Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill 60473
22. TELEPHONE NUMBER: (312) 596-3377
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: 8 31 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 Service
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, IND. 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: 8 31 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 53707

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
SFM 8-31-82

HAZARDOUS WASTE FACILITY

003380

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 9-80

MANIFEST NUMBER: A 48200

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID[illegible]
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10900 S 13th St.
5. CITY, STATE, ZIP CODE: So. Milwaukee, Wis.
6. TELEPHONE NUMBER: (414) 764-1600

| 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) |
|---|---|---|---|---|---|---|---|
| T/V | 5000 | Waste Mint | Flammable Liquid | | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 41720 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE:
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED: M 9 D 3 Y 82

## TRANSPORTER SECTION

18. COMPANY NAME: MR Trk Inc
19. EPA IDENTIFICATION NO.: TND[illegible]
20. P.O. BOX OR STREET ADDRESS: 201 W 153rd St
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312) [illegible]
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

I hereby certify that the above named materials and indicated quantity(ies) has (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[illegible]
34. P.O. BOX OR STREET ADDRESS: P.O. Box 140
35. CITY, STATE, ZIP CODE: Griffith, Ind. 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 9 D 3 Y 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 53707

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 205 RT-50
GFM 9.3.82

003590

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 9-80

MANIFEST NUMBER
A 49360

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: transportation by Mr. Frank to: American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 5,200 | Waste Resin Mixture Flammable Liquid | Flammable | UN1866 | 1. Solid 3. Mixture 2. Liquid [2] | R003 R005 | 45,[illegible] |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): Howard L. Timian
17. DATE SHIPPED M D Y: [illegible]

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 155th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
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): Robert Perkins
26. Date Accepted M D Y: 12 22 81

I hereby certify that the above named materials and indicated quantity(ies) has (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: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Indiana 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: 12 22 81

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 53707

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 211R T-50
GPM 12/22/81

003435

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 9-80

MANIFEST NUMBER
A 49361

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to: American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4 (100) | Waste Resin Mixture Flammable Liquid | Flammable | UN1866 | 1. Solid 3. Mixture [2] 2. Liquid | R003 R005 | 11740 |
| | | | | | 1. Solid 3. Mixture [ ] 2. Liquid | | |
| | | | | | 1. Solid 3. Mixture [ ] 2. Liquid | | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: Howard L. Timian
16. NAME (Print): Howard L. Timian
17. DATE SHIPPED M D Y: 12/29/81

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 155th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
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): [illegible]
26. Date Accepted M D Y: 12/29/81

I hereby certify that the above named materials and indicated quantity(ies) has (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: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Indiana 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): EDUN FEE
40. Date Accepted M D Y: 12/29/81

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 53707

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

FOR DNR USE ONLY

To 210 R
T-50 GEM 12/29/81

HAZARDOUS WASTE FACILITY

0034-34

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 9-80

MANIFEST NUMBER: A 49387

003420

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4756 | Waste Paint | Flammable Liquid | UN1266 ~~UN1263~~ | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 42220 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 1 15 82

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 115th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
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): [illegible]
26. Date Accepted M D Y: 1 15 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 Service
33. EPA IDENTIFICATION NO.: IND01630265
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

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 D Y: 1 15 81

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 53707

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 1/5/82

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 9-80

MANIFEST NUMBER: A 49388

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4756 | Waste Paint | Flammable Liquid | UN1266 UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 42410 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 1/7/82

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 115th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
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): [signature]
26. Date Accepted M / D / Y: 1/7/82

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 Service
33. EPA IDENTIFICATION NO.: IND01630265
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

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 NEEE
40. Date Accepted M / D / Y: 1/7/82

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 53707

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 R T-50
CRM 1/7/82.

003483

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 9-80

MANIFEST NUMBER
A 49389

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972735
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4750 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture [2] 2. Liquid | F003 F005 | 4[illegible] |
| | | | | | 1. Solid 3. Mixture [ ] 2. Liquid | D006 D007 | |
| | | | | | 1. Solid 3. Mixture [ ] 2. Liquid | D008 D009 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: D.F. Scudder
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 1/14/82

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 115th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
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: 1/14/82

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 Service
33. EPA IDENTIFICATION NO.: IND01630265
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

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

38. AUTHORIZED SIGNATURE
39. NAME (Print): EDMEE
40. Date Accepted M / D / Y: 1/18/82

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 53707

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 1/14/82

003422

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 9-80

MANIFEST NUMBER: A 49390

003421

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 220 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [X] | F003 F005 | 26-220 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 1/12/82

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 115th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
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): [illegible]
26. Date Accepted M / D / Y: 1/12/82

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 Service
33. EPA IDENTIFICATION NO.: IND01630265
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:

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 D [illegible]
40. Date Accepted M / D / Y: 1/12/82

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 53707

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 K T-50 GRM 1/12/82

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 9-80

MANIFEST NUMBER
A 49391

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972735
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4.750 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 40170 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED: M D Y 1/19/82

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 115th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
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): C.E. MILBURN
26. Date Accepted: M 1/19/82

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 Service
33. EPA IDENTIFICATION NO.: IND01630265
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

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 DUNEEC
40. Date Accepted: 1/19/82

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 53707

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 1/29/82

HAZARDOUS WASTE FACILITY

003425

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 9-80

MANIFEST NUMBER: A 49392

0034 24

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: FPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4800 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 42[illegible] |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: D.F. Scudder
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED: M 1 D 21 Y 82

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 115th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
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: [illegible]
25. NAME (Print): Dave [illegible]
26. Date Accepted: M 1 D 21 Y 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 Service
33. EPA IDENTIFICATION NO.: IND01630265
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:

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

38. AUTHORIZED SIGNATURE: EDUNTEE
39. NAME (Print): EDUNTEE
40. Date Accepted: M 1 D 29 Y 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 53707

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 R T-50
GRM 1/21/82

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 9-80

MANIFEST NUMBER: A 49393

003423

## GENERATOR (SHIPPER) SECTION

| 1. COMPANY NAME | 2. EPA IDENTIFICATION NO. | 3. COMMENTS/SPECIAL INSTRUCTIONS |
|---|---|---|
| PPG INDUSTRIES | WIR059972935 | Transported by Mr. Frank to |
| 4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street | | |
| 5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154 | 6. TELEPHONE NUMBER: (414) 764-6000 | American Chemical Service - on our P.O.#19001 |

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4.125 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 4/1:4/2 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: D.F. Scudder
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 1 12 6 82

## TRANSPORTER SECTION

| 18. COMPANY NAME | 19. EPA IDENTIFICATION NO. |
|---|---|
| Mr. Frank Inc. | ILD069506160 |
| 20. P.O. BOX OR STREET ADDRESS: 201 West 115th Street | |
| 21. CITY, STATE, ZIP CODE: South Holland, Illinois | 22. TELEPHONE NUMBER: (312) 596-3377 |

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 |
|---|---|---|
| C E Mulhern | C E MULHERN | 1 26 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 | 33. EPA IDENTIFICATION NO. |
|---|---|
| American Chemical Service | IND01630265 |
| 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

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 |
|---|---|---|
| Bob Mauck | BOB MAUCK | 01 26 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 53707

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 K
T-50 GRM 1/26/82

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 9-80

MANIFEST NUMBER: A 49394

003420

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972735
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: ( 414 ) - 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4/550 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 2420 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: D.F. Scudder
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED: M 1 D 25 Y 82

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 115th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: ( 312 ) - 596-3377
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): [illegible]
26. Date Accepted: M 1 D 25 Y 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 Service
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Indiana 46319
36. TELEPHONE NUMBER: (219) - 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 1 D 28 Y 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 53707

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 1/29/82

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 9-80

A 49395

003427

## GENERATOR (SHIPPER) SECTION

| | |
|---|---|
| 1. COMPANY NAME | PPG INDUSTRIES |
| 2. EPA IDENTIFICATION NO. | WID059972735 |
| 3. COMMENTS/SPECIAL INSTRUCTIONS | Transported by Mr. Frank to American Chemical Service - on our P.O.#19001 |
| 4. P.O. BOX OR STREET ADDRESS | 10800 South 13th Street |
| 5. CITY, STATE, ZIP CODE | Oak Creek, WI 53154 |
| 6. TELEPHONE NUMBER | (414) 764-6000 |

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4725 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid ☐ | F003 F005 | 41[illegible] |
| | | | | | 1. Solid 3. Mixture 2. Liquid ☐ | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid ☐ | D008 D009 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

| 15. AUTHORIZED SIGNATURE | 16. NAME (Print) | 17. DATE SHIPPED M D Y |
|---|---|---|
| [signature] | D.F. Scudder | 2 12 82 |

## TRANSPORTER SECTION

| | |
|---|---|
| 18. COMPANY NAME | Mr. Frank Inc. |
| 19. EPA IDENTIFICATION NO. | ILD068506160 |
| 20. P.O. BOX OR STREET ADDRESS | 201 West 115th Street |
| 21. CITY, STATE, ZIP CODE | South Holland, Illinois |
| 22. TELEPHONE NUMBER | (312) 596-3377 |
| 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 |
|---|---|---|
| [signature] | Mike Garcia | 2/12/82 |

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 |
|---|---|---|
| | | 02 02 82 |

## HAZARDOUS WASTE FACILITY SECTION

| | |
|---|---|
| 32. FACILITY NAME | American chemical Service |
| 33. EPA IDENTIFICATION NO. | IND01630265 |
| 34. P.O. BOX OR STREET ADDRESS | P.O. Box 190 |
| 35. CITY, STATE, ZIP CODE | Griffith, Indiana |
| 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 |
|---|---|---|
| Bob Mauck | BOB MAUCK | 02 02 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 53707

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

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO211K -T-50
GRM 2/2/82

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 9-80

MANIFEST NUMBER: A 49396

003428

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4800 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture [2] 2. Liquid | F003 F 005 | 42 [illegible] |
| | | | | | 1. Solid 3. Mixture [ ] 2. Liquid | D006 D007 | |
| | | | | | 1. Solid 3. Mixture [ ] 2. Liquid | D008 D009 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: D. F. Scudder
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED: M 2 D 14 Y 82

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 115th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
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: [illegible]
25. NAME (Print): [illegible]
26. Date Accepted: M 2 D 14 Y 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 Service
33. EPA IDENTIFICATION NO.: IND01630265
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:

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 2 D 14 Y 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 53707

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

FOR DNR USE ONLY

WASTE FACILITY

TO 210 R T-50
GCM 2/4/82

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 9-80

MANIFEST NUMBER
A 49397

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Transported by Mr. Frank to American Chemical Service - on our P.O.#19001
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4900 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 40640 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

This is to certify that the information contained herein is true, accurate and complete and 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 Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

15. AUTHORIZED SIGNATURE: D.F. Scudder
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 2 19 82

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 115th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois
22. TELEPHONE NUMBER: (312) 596-3377
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

I hereby certify that the above named materials and indicated quantity(ies) has (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: M R Frank Inc
28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE: [signature]
30. NAME (Print)
31. Date Accepted M D Y: 2 19 82

## HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND01630265
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

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: 2 19 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
[illegible] 8094
[illegible] Wisconsin 53707

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

HAZARDOUS WASTE FACILITY

003429

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 149002

003389

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059979135
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414)-764-6100

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4,900 | Waste Solvent nos | Flammable Liquid | NA1993 | 1. Solid 3. Mixture 2. Liquid [X] | F003 F005 | 366 |
| | | | | | 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): D.F. Scudder
17. DATE SHIPPED M D Y: 9/8/82

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 N. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312)-596-3377
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): CE Milburn
26. Date Accepted: 9/8/82

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 Service
33. EPA IDENTIFICATION NO.: IND016307165
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Ind. 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: 9/8/82

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

T0210K T-50
GRM 9.8.82

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 149008

003391

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID009917935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 16 Sico S. 13th St
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414) 764-4600

| 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) |
|---|---|---|---|---|---|---|---|
| T/N | 4400 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [X] | F003 F005 | 261-0 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D007 D007 D008 D009 | |
| | | | | | 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): D.F. Snudder
17. DATE SHIPPED M D Y: 9/20/82

## TRANSPORTER SECTION

18. COMPANY NAME: MR. FRANK, INC
19. EPA IDENTIFICATION NO.: ILD049506160
20. P.O. BOX OR STREET ADDRESS: 201 W 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312) 596-3377
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): [signature]
26. Date Accepted M D Y: 9/20/82

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 Service
33. EPA IDENTIFICATION NO.: IND016302165
34. P.O. BOX OR STREET ADDRESS: P.O. Box 170
35. CITY, STATE, ZIP CODE: Griffith, Ind. 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: 9/20/82

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

To 211 ET-50
GPM 9.20.82

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

MANIFEST NUMBER
A 149010

## GENERATOR (SHIPPER) SECTION

| | |
|---|---|
| 1. COMPANY NAME: PPG Industries | 2. EPA IDENTIFICATION NO.: WID059970935 |
| 3. COMMENTS/SPECIAL INSTRUCTIONS | |
| 4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St. | |
| 5. CITY, STATE, ZIP CODE: Oak Creek, Wis 53154 | 6. TELEPHONE NUMBER: (414) 764-6000 |

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4600 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid ☑ | F003 F005 | 31140 |
| | | | | | 1. Solid 3. Mixture 2. Liquid ☐ | D006 D007 D008 D009 | |
| | | | | | 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] | D.F. Scudder | 9/24/82 |

## TRANSPORTER SECTION

| | |
|---|---|
| 18. COMPANY NAME: Mr. Frank, Inc. | 19. EPA IDENTIFICATION NO.: ILD069506160 |
| 20. P.O. BOX OR STREET ADDRESS: 201 W 155th St. | |
| 21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473 | 22. TELEPHONE NUMBER: (312) 596-3377 |
| 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 |
|---|---|---|
| [signature] | [signature] | 9/24/82 |

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 Service | 33. EPA IDENTIFICATION NO.: IND016307165 |
| 34. P.O. BOX OR STREET ADDRESS: P.O. Box 190 | |
| 35. CITY, STATE, ZIP CODE: Griffith, Ind. 46319 | 36. TELEPHONE NUMBER: (219) 924-4390 |
| 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 | 9/24/82 |

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 210 K 7-50
GKM 9.24.82

HAZARDOUS WASTE FACILITY

003532

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 149011

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID054972955
3. COMMENTS/SPECIAL INSTRUCTIONS
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414)-764-1000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4200 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | D003 D005 | [illegible] |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

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): D.F. Snyder
17. DATE SHIPPED M D Y: 9/27/82

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W 155th St
21. CITY, STATE, ZIP CODE: South Holland, Ill 60473
22. TELEPHONE NUMBER: (312)-596-3377
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): Gary Drueen
26. Date Accepted M D Y: 9/27/82

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 Service
33. EPA IDENTIFICATION NO.: IND016302165
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Ind. 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): FDW NFEE
40. Date Accepted M D Y: 9/27/82

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

HAZARDOUS WASTE FACILITY

TO 210 F T-50
GPM 9.27.82

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.

ON P/L 20144

# HAZARDOUS WASTE MANIFEST FORM

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

MANIFEST NUMBER
A 149014

003595

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059[illegible]
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414)-764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4500 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | [illegible] |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

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): D.F. Scudder
17. DATE SHIPPED M D Y: 10 14 82

## TRANSPORTER SECTION

18. COMPANY NAME: MR. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill 60473
22. TELEPHONE NUMBER: (312)-596-3377
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): [illegible]
26. Date Accepted: M/D 10/4/82

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 Service
33. EPA IDENTIFICATION NO.: IND 01630[illegible]65
34. P.O. BOX OR STREET ADDRESS: P.O. Box 170
35. CITY, STATE, ZIP CODE: Griffith, Ind. 46319
36. TELEPHONE NUMBER: (219)-924-4320
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: 10 4 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 210 Z 7-50 GRM
10.4.82

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 4400-60 REV. 6-81

MANIFEST NUMBER
A 149015

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: NC Industries
2. EPA IDENTIFICATION NO.: WID059979935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, WIS. 53154
6. TELEPHONE NUMBER: (414)-764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| ~~T/M~~ | 4,000 | ~~Waste Brine Solution~~ | ~~Flammable Liquid~~ | ~~UN1993~~ | 1. Solid 3. Mixture 2. Liquid [3] | ~~D001~~ D001 D003 | |
| T/M | | WASTE PAINT | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | D001 D003 D008 | 39490 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D001 D003 F003 F005 | |

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): D. F. Scudder
17. DATE SHIPPED M D Y: 10/14/82

## TRANSPORTER SECTION

18. COMPANY NAME: MR. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD065506160
20. P.O. BOX OR STREET ADDRESS: 2011 W. 15th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312)-596-3377
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): Nick Hutt
26. Date Accepted M / D / Y: 10/14/82

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 Service
33. EPA IDENTIFICATION NO.: IND021630465
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, IND. 46319
36. TELEPHONE NUMBER: (219)-924-4570
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: 10/15/82

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

TO210 RT-50
GRM 10.5.82

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 149017

003597

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PBC Industries
2. EPA IDENTIFICATION NO.: WID0[illegible]
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414) [illegible]

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4100 | WASTE PAINT | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [X] | [illegible] | [illegible] |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | [illegible] | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | [illegible] | |

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): D.F. [illegible]
17. DATE SHIPPED M D Y: 10 18 82

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD0[illegible]
20. P.O. BOX OR STREET ADDRESS: 201 W 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 6[illegible]
22. TELEPHONE NUMBER: (312) 5[illegible]-3377
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): [illegible]
26. Date Accepted M / D / Y: 10 / 18 / 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 Service
33. EPA IDENTIFICATION NO.: IND016-30765
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Ind. 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: 10 / 18 / 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 210 TC T-50
GRM - 10.8.82

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 149018

003593

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4,000 | WASTE PAINT | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | [illegible] |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

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): D.F. Scudder
17. DATE SHIPPED M D Y: 10/11/82

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois 60473
22. TELEPHONE NUMBER: (312) 596-3377
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): Rick Antis
26. Date Accepted M D Y: 10/19/82

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 Service
33. EPA IDENTIFICATION NO.: IND01630265
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:

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: 10/11/82

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 FT-50
GRM 10.11.82

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 149020

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059170735
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis.
6. TELEPHONE NUMBER: (414)-764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4550 | WASTE PAINT | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | [illegible] |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

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): D.F. Scudder
17. DATE SHIPPED (M D Y): 10/15/82

## TRANSPORTER SECTION

18. COMPANY NAME: MR. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th Street
21. CITY, STATE, ZIP CODE: South Holland, Ill 60473
22. TELEPHONE NUMBER: (312)-596-3377
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): [illegible]
26. Date Accepted: M D Y 10/15/82

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 Service
33. EPA IDENTIFICATION NO.: IND01630365
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, IND. 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 10/15/82

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 203 E T-50
GRM 10.15.82

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 149021

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059977935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4850 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [X] | F003 F005 | [illegible] |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D001 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

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): D.F. Sculler
17. DATE SHIPPED M D Y: 10 18 82

## TRANSPORTER SECTION

18. COMPANY NAME: MR. FRANK, INC.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Illinois 60473
22. TELEPHONE NUMBER: (312) 596-3377
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): Dave Vois
26. Date Accepted: 10 / 18 / 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 Service
33. EPA IDENTIFICATION NO.: IND016302165
34. P.O. BOX OR STREET ADDRESS: P.O. BOX 190
35. CITY, STATE, ZIP CODE: Griffith, IND. 46319
36. TELEPHONE NUMBER: (217) 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: 10 / 18 / 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 RT-50

003400

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 149023

003404

## GENERATOR (SHIPPER) SECTION

| 1. COMPANY NAME | 2. EPA IDENTIFICATION NO. | 3. COMMENTS/SPECIAL INSTRUCTIONS |
|---|---|---|
| PPG INDUSTRIES | WID059972935 | |
| 4. P.O. BOX OR STREET ADDRESS: 10600 South 13th Street. | | |
| 5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154 | 6. TELEPHONE NUMBER: (414) 764-6000 | |

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4800 | WASTE PAINT | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | =7140 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

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): D.F. Scudder
17. DATE SHIPPED M D Y: 10/20/82

## TRANSPORTER SECTION

| 18. COMPANY NAME | 19. EPA IDENTIFICATION NO. |
|---|---|
| Mr. Frank, Inc. | ILD069506160 |
| 20. P.O. BOX OR STREET ADDRESS: 201 W. 155th Street | |
| 21. CITY, STATE, ZIP CODE: South Holland, Illinois 60473 | 22. TELEPHONE NUMBER: (312) 596-3377 |
| 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 |
|---|---|---|
| [signature] | [illegible] | 10/22/82 |

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 | 33. EPA IDENTIFICATION NO. |
|---|---|
| American Chemical Service | IND01630265 |
| 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 | |

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 |
|---|---|---|
| Hawkee | EDUNHE | 10/22/82 |

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

TO 210 KT-50
EKM 10-22-82

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 149025

003453

## GENERATOR (SHIPPER) SECTION

| 1. COMPANY NAME | 2. EPA IDENTIFICATION NO. | 3. COMMENTS/SPECIAL INSTRUCTIONS |
|---|---|---|
| PPG INDUSTRIES | WID059972935 | |
| 4. P.O. BOX OR STREET ADDRESS | | |
| 10300 South 13th Street | | |
| 5. CITY, STATE, ZIP CODE | 6. TELEPHONE NUMBER | |
| Oak Creek, WI 53154 | (414) 764-6000 | |

| 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 T/W | 2 11 | WASTE PAINT | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | [illegible] |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

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): D.F. Scudder
17. DATE SHIPPED M D Y: 10 / 26 / 82

## TRANSPORTER SECTION

| 18. COMPANY NAME | 19. EPA IDENTIFICATION NO. |
|---|---|
| Mr. Frank, Inc. | ILD069506160 |
| 20. P.O. BOX OR STREET ADDRESS | |
| 201 W. 155th Street | |
| 21. CITY, STATE, ZIP CODE | 22. TELEPHONE NUMBER |
| South Holland, Illinois 60473 | (312) 596-3377 |

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 |
|---|---|---|
| [signature] | [illegible] | |

I hereby certify that the above named materials and indicated quantity(ies) has (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 Service | IND01630265 |
| 34. P.O. BOX OR STREET ADDRESS | |
| P.O. Box 190 | |
| 35. CITY, STATE, ZIP CODE | 36. TELEPHONE NUMBER |
| Griffith, Indiana 46319 | (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] | EDUNFEE | 10/26/82 |

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

T0210LT-50
GKM 10.26.82

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 149027

003402

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) - 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4800 | WASTE PAINT | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 46,440 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

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): D.F. Scudder
17. DATE SHIPPED M D Y: 11/2/82

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois 60473
22. TELEPHONE NUMBER: (312) - 596-3377
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): [signature]
26. Date Accepted M D Y: 11/2/82

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 Service
33. EPA IDENTIFICATION NO.: IND01630265
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:

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: 11/2/82

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

T0210 ET-50
ENVM 11.2.82

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 149029

003401

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059974935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, WIS 53154
6. TELEPHONE NUMBER: (414)-764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4850 | WASTE PAINT | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | [illegible] |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

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): D.F. Scudder
17. DATE SHIPPED M D Y: 11/8/82

## TRANSPORTER SECTION

18. COMPANY NAME: MR. FRANK, INC
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill 60473
22. TELEPHONE NUMBER: (312)-596-3377
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): [illegible]
26. Date Accepted: M 18 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 Service
33. EPA IDENTIFICATION NO.: IND016300265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Ind. 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 8 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 211RT-50 GRM
11.8.82

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 149031

003405

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID05997 1935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 1080 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414)-764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 5500 | Waste Solvent NOS | Flammable Liquid | NA1993 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 42400 |
| | | | | | 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): D.F. Scudder
17. DATE SHIPPED M D Y: 11/11/82

## TRANSPORTER SECTION

18. COMPANY NAME: MR. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312)-596-3377
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): [signature]
26. Date Accepted M D Y: 11/11/82

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 Service
33. EPA IDENTIFICATION NO.: IND016 3[illegible]
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, IND. 46319
36. TELEPHONE NUMBER: (219)-721-4370
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: 11/11/82

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 K
T-50 GPM 11/11/82

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 149032

003407

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: [illegible]
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis 53154
6. TELEPHONE NUMBER: (414) 762-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 54 G | Waste Paint | Flammable Liquid | ~~[illegible]~~ UN ~~[illegible]~~ 1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 4/4/ |
| | | | | ~~[illegible]~~ ~~[illegible]~~ | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | ~~[illegible]~~ ~~[illegible]~~ | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

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): D.F. Scudder
17. DATE SHIPPED M D Y: 11/13/82

## TRANSPORTER SECTION

18. COMPANY NAME: MR. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD069576160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill 60473
22. TELEPHONE NUMBER: (312) 596-3377
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: ~~11/13/82~~

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.: IND016302065
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, IND 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 12 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 211R 7-50
GRM 11.12.82

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 149033

0034U

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059999135
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10500 S. 13 Th. St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414)-764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/N | 6600 | WASTE PAINT | Poisonous Liquid | UN1163 | 1. Solid 3. Mixture [2] 2. Liquid | F003 F005 | 44 |
| | | | | | 1. Solid 3. Mixture [ ] 2. Liquid | D006 D007 D008 | |
| | | | | | 1. Solid 3. Mixture [ ] 2. Liquid | D009 | |

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): D.F. Schiller
17. DATE SHIPPED M D Y: 11 15 82

## TRANSPORTER SECTION

18. COMPANY NAME: MR. TANK, INC.
19. EPA IDENTIFICATION NO.: ILD064506460
20. P.O. BOX OR STREET ADDRESS: 201 N. 155th. St.
21. CITY, STATE, ZIP CODE: South Holland, Ill 60473
22. TELEPHONE NUMBER: (312)-596-3377
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): Miguel Cruz
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:

## HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND041430465
34. P.O. BOX OR STREET ADDRESS: PO Box 190
35. CITY, STATE, ZIP CODE: Griffith, IND 46319
36. TELEPHONE NUMBER: (219)-924-1370
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): FDUNFEE
40. Date Accepted M 11 D 15 Y 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 211K T-50 GPM
11-15-82

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 149035

003403

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WIDO99773155
3. COMMENTS/SPECIAL INSTRUCTIONS
4. P.O. BOX OR STREET ADDRESS: 10800 S 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, WI. 53154
6. TELEPHONE NUMBER: 414-764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/M | 4/100 | WASTE PAINT | Flammable Liquid | UN1263 | 1. Solid 3. Mixture [2] 2. Liquid | F003 F005 | [illegible] |
| | | | | | 1. Solid 3. Mixture [ ] 2. Liquid | D001 D007 | |
| | | | | | 1. Solid 3. Mixture [ ] 2. Liquid | D001 D009 | |

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): D.F. Scudder
17. DATE SHIPPED M D Y: 11/19/82

## TRANSPORTER SECTION

18. COMPANY NAME: MK Ferry, Inc.
19. EPA IDENTIFICATION NO.: ILD069506166
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, IL. 60473
22. TELEPHONE NUMBER: 312-596-3377
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): Nick Antis
26. Date Accepted M / D / Y: 11/19/82

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 Service
33. EPA IDENTIFICATION NO.: IND016307165
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, IND 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 DUNTEE
40. Date Accepted M / D / Y: 11/19/82

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

T0210KT-50
GRM 11-1982

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 149036

003407

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis.
6. TELEPHONE NUMBER: (414)-764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4600 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | [illegible] |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

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): D.F. Scudder
17. DATE SHIPPED M D Y: 11/22/82

## TRANSPORTER SECTION

18. COMPANY NAME: MR. FRANK, INC.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th ST.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312)-596-3377
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): [illegible]
26. Date Accepted M / D / Y: 12

I hereby certify that the above named materials and indicated quantity(ies) has (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.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. BOX 190
35. CITY, STATE, ZIP CODE: Griffith, IND. 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: 11/22/82

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 F T-50
GRM 11.22.82

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 149037

003411

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID0[illegible]
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S 13th St. Oak Creek
5. CITY, STATE, ZIP CODE: Oak Creek, Wis 53154
6. TELEPHONE NUMBER: (414) 764-1000

| 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) |
|---|---|---|---|---|---|---|---|
| T/N | 4,800 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | [illegible] |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D001 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D001 D009 | |

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): D. F. Scudder
17. DATE SHIPPED: M D Y: 11 17 82

## TRANSPORTER SECTION

18. COMPANY NAME: W. F. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD064506260
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312) 596-3377
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: Robert Perkins
25. NAME (Print): Robert Perkins
26. Date Accepted: M 11 D 24 Y 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 Service
33. EPA IDENTIFICATION NO.: IND044830265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 198
35. CITY, STATE, ZIP CODE: Griffith, Ind. 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 11 D 24 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 211K T-50
GRM 11.24.82

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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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 149038

003410

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059910935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10900 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis 53154
6. TELEPHONE NUMBER: (414)-764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4,000 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [X] | F003 F005 | [illegible] |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

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): D.F. Scudder
17. DATE SHIPPED M D Y: 11/30/82

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312)-596-3377
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): [illegible]
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

## HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND016302165
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Ind. 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: 11/30/82

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 211R T-50
GRM 11.30.82

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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# HAZARDOUS WASTE MANIFEST FORM

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

MANIFEST NUMBER
A 149039

003410

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID005977935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 5000 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 41470 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

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): D. F. Scudder
17. DATE SHIPPED M D Y: 12 13 82

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312) 596-3377
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: Michael Martin
25. NAME (Print): Mike Martin
26. Date Accepted: 12 2 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 Service
33. EPA IDENTIFICATION NO.: IND 1630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, IND. 46319
36. TELEPHONE NUMBER: (219) 924-4570
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: 12 3 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 2111 K T-50
GCM 12.3.82

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 149040

003415

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: P&C Industries
2. EPA IDENTIFICATION NO.: WIED057999935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 1500 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| TW | 4000 | WASTE PAINT | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | D001 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D001 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D001 D009 | |

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): D.F. Sandler
17. DATE SHIPPED M O Y: 12 16 82

## TRANSPORTER SECTION

18. COMPANY NAME: MR. Tank, Inc.
19. EPA IDENTIFICATION NO.: ILD065726160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312) 596-3377
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: 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 Service
33. EPA IDENTIFICATION NO.:
34. P.O. BOX OR STREET ADDRESS: P.O. Box 170
35. CITY, STATE, ZIP CODE: Griffith, Ind. 46319
36. TELEPHONE NUMBER: (219) 924-7540
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 / D / Y: 12/16/82

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 210 RT-50
GEM 12.6.82

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 149041

003414

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID009972932
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, WIS 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4400 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | [illegible] |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 D008 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D009 | |

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): D.F. Scudder
17. DATE SHIPPED M D Y: 12 18 82

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312) 596-3377
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): Dave Voss
26. Date Accepted M D Y: 12 18 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 Service
33. EPA IDENTIFICATION NO.: IND016300965
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, IND. 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: 12 08 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 R 7-50
GRM 12.8.82

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 149042

003413

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: ~~[illegible]~~ PPG Industries
2. EPA IDENTIFICATION NO.: [illegible]
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 5,000 | Waste Solvent [illegible] | Flammable Liquid | NA 1993 | 1. Solid 3. Mixture 2. Liquid [X] | [illegible] | [illegible] |
| | | | | | 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): D.F. Sudler
17. DATE SHIPPED M D Y: 12/7/82

## TRANSPORTER SECTION

18. COMPANY NAME: Air Frank, Inc.
19. EPA IDENTIFICATION NO.: [illegible]
20. P.O. BOX OR STREET ADDRESS: 201 N. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312) 596-3377
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): Rich Antis
26. Date Accepted M D Y: 12/7/82

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 Service
33. EPA IDENTIFICATION NO.: [illegible]
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, IND. 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: 12/9/82

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

TO205 KT-50
GRM 12.9.82

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 149043

0034 12

## GENERATOR (SHIPPER) SECTION

| 1. COMPANY NAME | 2. EPA IDENTIFICATION NO. | 3. COMMENTS/SPECIAL INSTRUCTIONS |
|---|---|---|
| PPG Industries | IND099779135 | |
| 4. P.O. BOX OR STREET ADDRESS | | |
| 1150 S. 13th St. | | |
| 5. CITY, STATE, ZIP CODE | 6. TELEPHONE NUMBER | |
| Oak Creek, Wis. 53154 | (414) 764-1100 | |

| 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) |
|---|---|---|---|---|---|---|---|
| T/D | 4/550 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [1] | F003 F005 | 240 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D001 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D001 | |

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: D. F. Sendlet
16. NAME (Print): D. F. Sendlet
17. DATE SHIPPED M D Y: 12/10/82

## TRANSPORTER SECTION

| 18. COMPANY NAME | 19. EPA IDENTIFICATION NO. |
|---|---|
| Hill Frank, Inc. | IND069506460 |
| 20. P.O. BOX OR STREET ADDRESS | |
| 201 W. 155th St. | |
| 21. CITY, STATE, ZIP CODE | 22. TELEPHONE NUMBER |
| South Holland, Ill. 60473 | (312)-596-3377 |

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 |
|---|---|---|
| | K. L. Martin | 12/10/82 |

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 | 33. EPA IDENTIFICATION NO. |
|---|---|
| American Chemical Service | IND021630965 |
| 34. P.O. BOX OR STREET ADDRESS | |
| P.O. Box 170 | |
| 35. CITY, STATE, ZIP CODE | 36. TELEPHONE NUMBER |
| Griffith, Ind. 46319 | (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 |
|---|---|---|
| | FDONTE | 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

T0205 T-50
GKM 12.10.82

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 149044

0034 17

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID006111135
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10700 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, WIS 53154
6. TELEPHONE NUMBER: (414)-764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| TM | 4/100 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture [2] 2. Liquid | F003 F005 | 1100 |
| | | | | | 1. Solid 3. Mixture [ ] 2. Liquid | D001 D007 | |
| | | | | | 1. Solid 3. Mixture [ ] 2. Liquid | D001 D007 | |

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): D.F. Scudder
17. DATE SHIPPED M D Y: 11/18/82

## TRANSPORTER SECTION

18. COMPANY NAME: MR. TRUCK, INC.
19. EPA IDENTIFICATION NO.: IID069566160
20. P.O. BOX OR STREET ADDRESS: 901 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312)-596-3377
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): Nick Antis
26. Date Accepted M / D / Y: 11/18/82

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 Service
33. EPA IDENTIFICATION NO.: IND016300365
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, IND. 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 / F Dunfee
39. NAME (Print):
40. Date Accepted: 12/3/82

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 211 RT-50
GRM 12.13.82

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 149045

003410

## GENERATOR (SHIPPER) SECTION

| 1. COMPANY NAME | 2. EPA IDENTIFICATION NO. | 3. COMMENTS/SPECIAL INSTRUCTIONS |
|---|---|---|
| PPG Industries | [illegible] | |
| 4. P.O. BOX OR STREET ADDRESS: 10800 S 13th Street | | |
| 5. CITY, STATE, ZIP CODE: Oak Creek, WIS 53154 | 6. TELEPHONE NUMBER: (414) 764-6000 | |

| 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) |
|---|---|---|---|---|---|---|---|
| T/N | 4575 | Waste Acid | Flammable Liquid | UN1263 | 1. Solid 3. Mixture **2** 2. Liquid | F003 F005 | [illegible] |
| | | | | | 1. Solid 3. Mixture ☐ 2. Liquid | D006 D007 D035 D009 | |
| | | | | | 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): D. F. Smith 17. DATE SHIPPED M D Y: 12/1/82

## TRANSPORTER SECTION

| 18. COMPANY NAME | 19. EPA IDENTIFICATION NO. |
|---|---|
| Mr. Fence, Inc. | ILD 095461160 |
| 20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St. | |
| 21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473 | 22. TELEPHONE NUMBER: (312) 596-3377 |
| 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 |
|---|---|---|
| [signature] | Rick Fintis | 12/1/82 |

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 | 33. EPA IDENTIFICATION NO. |
|---|---|
| American Chemical Service | IND 048306145 |
| 34. P.O. BOX OR STREET ADDRESS: P.O. Box 190 | |
| 35. CITY, STATE, ZIP CODE: Griffith, IND 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] | P DUNFEE | 12/5/82 |

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 206KT-50 GRM 12.15.82

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 149049

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID 0597 1735
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/N | 4550 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | [illegible] |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

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): D.F. Scalder
17. DATE SHIPPED M D Y: 12/17/82

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St
21. CITY, STATE, ZIP CODE: South Holland, Ill 60473
22. TELEPHONE NUMBER: (312) 596-3374
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): [illegible] Antis
26. Date Accepted M D Y: 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 Service
33. EPA IDENTIFICATION NO.: IND 01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Ind. 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): PDVNEEE
40. Date Accepted M D Y: 12 17 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 K T-50
GRM 12-17-82

003419

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 149061

## GENERATOR (SHIPPER) SECTION

| 1. COMPANY NAME | 2. EPA IDENTIFICATION NO. | 3. COMMENTS/SPECIAL INSTRUCTIONS |
|---|---|---|
| PPG Industries | IND 000777135 | |
| 4. P.O. BOX OR STREET ADDRESS | | |
| 1000 S. 13th St. | | |
| 5. CITY, STATE, ZIP CODE | 6. TELEPHONE NUMBER | |
| Oak Creek, Wis. 53154 | (414)-764-6000 | |

| 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) |
|---|---|---|---|---|---|---|---|
| T/D | 660 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | K003 F005 | 11 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D001 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D001 D009 | |

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): D. F. Sculati
17. DATE SHIPPED: M D Y 12 12 82

## TRANSPORTER SECTION

| 18. COMPANY NAME | 19. EPA IDENTIFICATION NO. |
|---|---|
| Mid. Fluid, Inc. | ILD 000 716 810 |
| 20. P.O. BOX OR STREET ADDRESS | |
| 261 W. 155th St. | |
| 21. CITY, STATE, ZIP CODE | 22. TELEPHONE NUMBER |
| South Holland, Ill. 60473 | (312)-596-3311 |
| 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 |
|---|---|---|
| [signature] | Michael Garcia | 12 / 13 / 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 | 33. EPA IDENTIFICATION NO. |
|---|---|
| American Chemical Service | IND 063 036 165 |
| 34. P.O. BOX OR STREET ADDRESS | |
| P.O. Box 190 | |
| 35. CITY, STATE, ZIP CODE | 36. TELEPHONE NUMBER |
| Griffith, IND 46319 | (219)-924-4330 |
| 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] | PDM FEE | 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 KT-50
GPM 12-22-82

005263

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 149068

005268

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID054772935
3. COMMENTS/SPECIAL INSTRUCTIONS
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: 414-764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4750 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 D006 D007 D008 D009 | |
| | | | | | 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: D. F. Sudder
16. NAME (Print): D. F. Sudder
17. DATE SHIPPED: M D Y 11 09 82

## TRANSPORTER SECTION

18. COMPANY NAME: MK Ferro, Inc.
19. EPA IDENTIFICATION NO.: IID069506160
20. P.O. BOX OR STREET ADDRESS: 701 W 15th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312) 596-3377
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: [illegible]
25. NAME (Print): [illegible]
26. Date Accepted: M 12 D 13 Y 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: Waste Chemical Service
33. EPA IDENTIFICATION NO.: IND016302165
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, IND. 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): P. DUNLEE
40. Date Accepted: M 12 D 13 Y 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 21KT-50 GRM
12-29-82

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 149069

## GENERATOR (SHIPPER) SECTION

| 1. COMPANY NAME | 2. EPA IDENTIFICATION NO. | 3. COMMENTS/SPECIAL INSTRUCTIONS |
|---|---|---|
| PPG Industries | WID0[illegible]35 | |
| 4. P.O. BOX OR STREET ADDRESS | | |
| 16800 S. 13th St. | | |
| 5. CITY, STATE, ZIP CODE | 6. TELEPHONE NUMBER | |
| Oak Creek, Wis. 53154 | (414)-764-1000 | |

| 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) |
|---|---|---|---|---|---|---|---|
| T/M | 560 | Waste Solvent NOS | Flammable Liquid | NA1993 | 1. Solid 3. Mixture [2] 2. Liquid | F003-1203 | [illegible] |
| | | | | | 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): D.T. Saulder
17. DATE SHIPPED M D Y: 1 13 85

## TRANSPORTER SECTION

| 18. COMPANY NAME | 19. EPA IDENTIFICATION NO. |
|---|---|
| M.R. Trucking, Inc. | IDD0[illegible]6160 |
| 20. P.O. BOX OR STREET ADDRESS | |
| 201 W. 155th St. | |
| 21. CITY, STATE, ZIP CODE | 22. TELEPHONE NUMBER |
| South Holland, Ill. 60423 | (312)-596-3317 |

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 |
|---|---|---|
| [signature] | Al [illegible] | [illegible] |

I hereby certify that the above named materials and indicated quantity(ies) has (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. |
|---|---|
| Hillcrest Chemical Service | IND0[illegible]30365 |
| 34. P.O. BOX OR STREET ADDRESS | |
| P.O. Box 190 | |
| 35. CITY, STATE, ZIP CODE | 36. TELEPHONE NUMBER |
| Griffith, IND. 46319 | (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] | T-DUNFEE | 1 13 85 |

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

T0211ET-EDGLN
1-3-82

0055-1923600

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 149071

005266

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID0[illegible]
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S 13th St
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 5000 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | [illegible] |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 D008 D001 | |
| | | | | | 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): D. E. Scott
17. DATE SHIPPED M D Y: 1 15 83

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD067506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill 60473
22. TELEPHONE NUMBER: (312) 596-3377
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: Michael Martin
25. NAME (Print): Michael Martin
26. Date Accepted M D Y: 1 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 Service
33. EPA IDENTIFICATION NO.: IND016300965
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, IND. 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): Michael Martin
40. Date Accepted: 1 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: Dunkee FDVNREE
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 210R-T-50
GRM 1.5.83

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
[illegible]
A 149072

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059971935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10500 S. 13th St
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414)-764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 660 | Waste ~~[illegible]~~ Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 4[illegible] |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

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): D.F. Scudder
17. DATE SHIPPED M D Y: 1 17 83

## TRANSPORTER SECTION

18. COMPANY NAME: MP Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312)-596-3377
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): [illegible]
26. Date Accepted M D Y: 1 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 Service
33. EPA IDENTIFICATION NO.: IND016302165
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Ind. 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: 1 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

T6210 ET-50 GPM
1.7.83

005265

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 149073

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059977935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414)-764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 5,000 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 40600 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 D008 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D009 | |

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): D.F. Scudder
17. DATE SHIPPED M D Y: 1/10/83

## TRANSPORTER SECTION

18. COMPANY NAME: MR. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD[illegible]26160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312)-596-3377
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): Rich Antis
26. Date Accepted: 1/18/83

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 Service
33. EPA IDENTIFICATION NO.: IND016S0265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 19Q
35. CITY, STATE, ZIP CODE: Griffith, Ind. 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: 1/18/83

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

HAZARDOUS WASTE FACILITY

To 21KT-50
GRM 1.10.83

005264

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 149075

005283

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059771935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 5000 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F005 F005 | [illegible] |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 D008 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D009 | |

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): D.A. Scudder
17. DATE SHIPPED M D Y: 1/12/82

## TRANSPORTER SECTION

18. COMPANY NAME: MR. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 N 155th St
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312) 596-3377
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): Rich Antis
26. Date Accepted: M 1/18 1982

I hereby certify that the above named materials and indicated quantity(ies) has (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.: IND016301065
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Ind. 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: M 1/2/83

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

TO 210E T-50
GRM 1.12.83

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 149076

005282

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059772935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414)-764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4600 | WASTE PAINT | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [X] | F003 F005 | 4/1 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

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): D.F. Scudder
17. DATE SHIPPED M D Y: 1/14/83

## TRANSPORTER SECTION

18. COMPANY NAME: MR. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312)-596-3377
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): Dave Voss
26. Date Accepted M D Y: 1/14/83

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 Service
33. EPA IDENTIFICATION NO.: IND016302165
34. P.O. BOX OR STREET ADDRESS: P.O. BOX 170
35. CITY, STATE, ZIP CODE: Griffith, IND. 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: 1/14/83

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 211KT-50
GRM 1.14.83

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 149077

005279

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: ] 10300 S. 13th street
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414 )-764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4,850 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

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): D. F. Scudder
17. DATE SHIPPED M D Y: 1 / 18 / 83

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th Street
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312 )-596-3377
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): C. C. MILBURN
26. Date Accepted M / D / Y: 1 / 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 Service
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Ind. 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): EDUTEE
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

HAZARDOUS WASTE FACILITY

To 211 ET - 50 GRM 1.18.83

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 149087

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059779935
3. COMMENTS/SPECIAL INSTRUCTIONS
4. P.O. BOX OR STREET ADDRESS: 10900 S 13th St
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4900 | WASTE PAINT | Flammable Liquid | UN1263 | 1. Solid 3. Mixture [2] 2. Liquid | F003 F005 | 4,410 |
| | | | | | 1. Solid 3. Mixture [ ] 2. Liquid | D006 D007 | |
| | | | | | 1. Solid 3. Mixture [ ] 2. Liquid | D008 D009 | |

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): D.F. Scudder
17. DATE SHIPPED M D Y: 1 04 83

## TRANSPORTER SECTION

18. COMPANY NAME: AIR FRANK, INC.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312) 596-3377
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): Darwin W Dilt
26. Date Accepted M / D / Y: 1 / 04 / 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 LT-50 GEM 1.24.83

## HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND016302465
34. P.O. BOX OR STREET ADDRESS: PO Box 190
35. CITY, STATE, ZIP CODE: Griffith, IND. 46319
36. TELEPHONE NUMBER: (219) 924-4570
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: 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

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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

MANIFEST NUMBER
A 149089

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059174935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414)-764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 5000 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 4 [illegible] |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

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: D.F. Scudder
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 1 27 83

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD061506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312)-596-3377
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): Donnell H Bull
26. Date Accepted M D Y: 1 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 Service
33. EPA IDENTIFICATION NO.: IND016302165
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Ind. 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 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

T0210 K T-50
GRM 1.27.83

HAZARDOUS WASTE FACILITY

005281

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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# HAZARDOUS WASTE MANIFEST FORM

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

MANIFEST NUMBER
A 149090

005214

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059999935
3. COMMENTS/SPECIAL INSTRUCTIONS
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| TM | 4000 | Waste Paint | Flammable Liquid | NA1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 2177 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D001 D035 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | F008 D009 | |

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): D.F. Snyder
17. DATE SHIPPED M D Y: 1 28 83

## TRANSPORTER SECTION

18. COMPANY NAME: A.R. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD064506160
20. P.O. BOX OR STREET ADDRESS: 701 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312) 596-3377
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: 1 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 Service
33. EPA IDENTIFICATION NO.: IND016302165
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, IND 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): PDUNFEE
40. Date Accepted M D Y: 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

HAZARDOUS WASTE FACILITY

TO210RT-50
GRAY 1-28-83

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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# HAZARDOUS WASTE MANIFEST FORM

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

MANIFEST NUMBER
A 149091

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059979935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414)-764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | [illegible] | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | [illegible] |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 D008 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D009 | |

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): D.F. Scudder
17. DATE SHIPPED M D Y: 1/31/83

## TRANSPORTER SECTION

18. COMPANY NAME: MR. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD067506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312)-596-3377
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): [illegible]
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

## HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: P.O. Box 190
33. EPA IDENTIFICATION NO.: IND016307265
34. P.O. BOX OR STREET ADDRESS: American Chemical Service
35. CITY, STATE, ZIP CODE: Griffith, IND. 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: 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 211KT-50 GPM 1.31.83

HAZARDOUS WASTE FACILITY

005275

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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# HAZARDOUS WASTE MANIFEST FORM

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

MANIFEST NUMBER
A 149093

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID057972935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414)-764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 5000 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | [illegible] |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 D008 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D009 | |

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): D.F. Scudder
17. DATE SHIPPED M D Y: 2 13 83

## TRANSPORTER SECTION

18. COMPANY NAME: MR Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: Oak Creek, Wis. 60473
22. TELEPHONE NUMBER: (312)-596-3377
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): Donald H Bult
26. Date Accepted M D Y: 2 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 Service
33. EPA IDENTIFICATION NO.: IND016302 65
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, IND. 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: 2 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

T0211K T-50 2·3·83
CRM.

HAZARDOUS WASTE FACILITY

005270

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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

MANIFEST NUMBER
A 149094

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059977935
3. COMMENTS/SPECIAL INSTRUCTIONS
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis 53154
6. TELEPHONE NUMBER: (414)-769-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4,950 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 4024 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

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): D.F. Scudder
17. DATE SHIPPED M D Y: 2 14 83

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Tank, Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312)-596-3377
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): C.E. Milburn
26. Date Accepted: 2 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 Service
33. EPA IDENTIFICATION NO.: IND011300265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Ind. 46319
36. TELEPHONE NUMBER: (219)-924-4570
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): EDWNFEE
40. Date Accepted M D Y: 2 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

T0211KT-50
GRM 2.4.83

005277

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 149095

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059712935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414)-764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 37600 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D007 | |

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): D.F. Scudder
17. DATE SHIPPED M D Y: 2 17 83

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312) 596-3377
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): [illegible]
26. Date Accepted M D Y: 2 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 Service
33. EPA IDENTIFICATION NO.: IND016302265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Ind. 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: 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
GRM 2-7-83

HAZARDOUS WASTE FACILITY

005218

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 149096

005273

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059972985
3. COMMENTS/SPECIAL INSTRUCTIONS
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 5,000 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | [illegible] |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 D008 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D001 | |

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): D.F. Scudder
17. DATE SHIPPED M D Y: 2 19 83

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312) 596-3377
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): CE Milburn
26. Date Accepted: 2 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 Service
33. EPA IDENTIFICATION NO.: IND016302265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Ind. 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: X Bob Mauck
39. NAME (Print): Bob Mauck
40. Date Accepted: 02 09 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

702127 T-50
GRM 2.9.83

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 149097

00572

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PIC INDUSTRIES
2. EPA IDENTIFICATION NO.: WID049771935
3. COMMENTS/SPECIAL INSTRUCTIONS
4. P.O. BOX OR STREET ADDRESS: 10800 S 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414)-764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| TM | 110 | WASTE PAINT | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 3104 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D001 | |

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: D.F. Sadler
16. NAME (Print): D.F. Sadler
17. DATE SHIPPED: M 2 D 11 Y 83

## TRANSPORTER SECTION

18. COMPANY NAME: HH Trucking, Inc.
19. EPA IDENTIFICATION NO.: ILD065760160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312)-596-3377
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

I hereby certify that the above named materials and indicated quantity(ies) has (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 2 D 14 Y

## HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND016302165
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, IND. 46319
36. TELEPHONE NUMBER: (219)-924-4378
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 2 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 210 RT-50
GEM 2-11-83

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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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 149099

005271

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059772935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414)-764-6100

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 5000 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | [illegible] |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

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: D.F. Scudder
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 2/15/83

## TRANSPORTER SECTION

18. COMPANY NAME: MP Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD067506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill 60473
22. TELEPHONE NUMBER: (312)-596-3377
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): [illegible]
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 Service
33. EPA IDENTIFICATION NO.: IND016302165
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, IND. 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: 2/15/83

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 E T. 50
GRM 2-15-83

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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# HAZARDOUS WASTE MANIFEST FORM

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

MANIFEST NUMBER
A 149103

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059979935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, W.S. 53154
6. TELEPHONE NUMBER: (414)-764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4,950 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 40540 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

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): D.F. Scudder
17. DATE SHIPPED M D Y: 2 / 22 / 83

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD067506160
20. P.O. BOX OR STREET ADDRESS: 701 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312)-596-3377
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): C E Milburn
26. Date Accepted M D Y: 2 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 Service
33. EPA IDENTIFICATION NO.: IND016302165
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, IND. 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 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

HAZARDOUS WASTE FACILITY

T0210 R T-50
2.22.83

005207

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 149105

005268

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414)-764-6600

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4,500 | Waste Resin Solution | ~~[illegible]~~ | ~~[illegible]~~ | 1. Solid 3. Mixture 2. Liquid [2] | ~~[illegible]~~ | 2/4/0 |
| | | | Flammable Liquid | UN 1866 | 1. Solid 3. Mixture 2. Liquid [2] | D001 | |
| | | | | | 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): D.F. Scudder
17. DATE SHIPPED M D Y: 2 23 83

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312)-596-3377
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): C.E. Milburn
26. Date Accepted M D Y: 2 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 Service
33. EPA IDENTIFICATION NO.: IND016302265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, IND 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 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 KT-50
GRM 2.23.83

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 149109

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG- Industries
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S 13th ST.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414)-764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4550 | WASTE PAINT | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | L/[illegible] |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 D008 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D009 | |

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): D.F. Scudder
17. DATE SHIPPED: M D Y 2 28 83

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312)-596-3377
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): Rich Antis
26. Date Accepted: M 2 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 Service
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. BOX 190
35. CITY, STATE, ZIP CODE: Griffith, IND. 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 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 212 R T-50 GRM
2-28-83

HAZARDOUS WASTE FACILITY

005270

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 149113

005267

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059975135
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414)-764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | | WASTE PAINT | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | [illegible] |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 D008 D009 | |
| | | | | | 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): D.F. Scudder
17. DATE SHIPPED M D Y: 3 14 83

## TRANSPORTER SECTION

18. COMPANY NAME: MR. Frank, Inc.
19. EPA IDENTIFICATION NO.: ID0069506160
20. P.O. BOX OR STREET ADDRESS: 301 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312)-596-3377
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): [illegible]
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

## HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. BOX 190
35. CITY, STATE, ZIP CODE: Griffith, IND. 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: 03 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

TO211R7-50
GAM 3.4.83

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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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 149116

005266

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059970935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414)-764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4900 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 4194 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 D008 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D001 | |

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): F. Sandler
17. DATE SHIPPED M D Y: 3 19 83

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312)-596-3377
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): Dave Voss
26. Date Accepted: 3 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 Service
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, IND 46349
36. TELEPHONE NUMBER: (219)-914-4370
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: 3 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

To 210 ET-50
GRM 3.9.83

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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# HAZARDOUS WASTE MANIFEST FORM

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

MANIFEST NUMBER
A 149117

005265

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059979935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10900 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4 700 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [X] | F003 F005 | 4/1/[illegible] |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 D008 D007 | |
| | | | | | 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): D.F. Sandler
17. DATE SHIPPED M D Y: 3 11 83

## TRANSPORTER SECTION

18. COMPANY NAME: Alp Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312) 596-3377
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): Rich Antis
26. Date Accepted M D Y: 3 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 Service
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, IND. 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): FDI
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)

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To 211E 7-50
GPM 3.11.83

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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# HAZARDOUS WASTE MANIFEST FORM

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

MANIFEST NUMBER
A 149118

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53150
6. TELEPHONE NUMBER: (414)-764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4 100 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | [illegible] |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D006 D007 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | D008 D009 | |

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): D. F. Scudder
17. DATE SHIPPED: M D Y 3 14 83

## TRANSPORTER SECTION

18. COMPANY NAME: MR. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312)-596-3377
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): [illegible]
26. Date Accepted: M 3 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 Service
33. EPA IDENTIFICATION NO.: IND016302 65
34. P.O. BOX OR STREET ADDRESS: P.O. Box. 190
35. CITY, STATE, ZIP CODE: Griffith, IND. 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: 3 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)

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TO204KT-50
GPM 3.14.83

HAZARDOUS WASTE FACILITY

005204

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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

MANIFEST NUMBER
A 149120

005263

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WIDC599773935
3. COMMENTS/SPECIAL INSTRUCTIONS
4. P.O. BOX OR STREET ADDRESS: 1808 S 13th. St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/M | 4 (ea) | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | (illegible) |
| | | | | | 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: D.F. Scudder
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED: M D Y 3/18/83

## TRANSPORTER SECTION

18. COMPANY NAME: M.K. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD066786160
20. P.O. BOX OR STREET ADDRESS: 701 E. W. 155th. St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312) 596-3377
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): [illegible]
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

## HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND063030165
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Ind. 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 Wunfee
39. NAME (Print): FDUNFEE
40. Date Accepted: M 3 D 18 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 211 KT-50
GKM 3-18-83

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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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 149121

## GENERATOR (SHIPPER) SECTION

| 1. COMPANY NAME | 2. EPA IDENTIFICATION NO. | 3. COMMENTS/SPECIAL INSTRUCTIONS |
|---|---|---|
| PPG Industries | WIDOS1779935 | |
| 4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St. | | |
| 5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154 | 6. TELEPHONE NUMBER: (414)-764-6000 | |

| 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) |
|---|---|---|---|---|---|---|---|
| T/V | 4,800 | WASTE PAINT | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 44240 |
| | | | | | 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 |
|---|---|---|
| D.F. Sandler | D.F. Sandler | 3 01 83 |

## TRANSPORTER SECTION

| 18. COMPANY NAME | 19. EPA IDENTIFICATION NO. |
|---|---|
| MR. FINK, INC. | IND067506160 |
| 20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St. | |
| 21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473 | 22. TELEPHONE NUMBER: (312)-596-3377 |
| 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 |
|---|---|---|
| Robert Perkins | Robert Perkins | 3 01 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 | 33. EPA IDENTIFICATION NO. |
|---|---|
| American Chemical Service | IND016307065 |
| 34. P.O. BOX OR STREET ADDRESS: P.O. Box 190 | |
| 35. CITY, STATE, ZIP CODE: Griffith, Ind. 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 |
|---|---|---|
| P Dunfee | P Dunfee | 3 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

HAZARDOUS WASTE FACILITY

To 210 KT-50
GAM 3-21-83

292500

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 149124

005260

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID 059979735
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 11500 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4600 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | Fuels Fuels | 4134 |
| | | | | | 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): D.F. Scudder
17. DATE SHIPPED M D Y: 3 28 83

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W 135th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312) 596-3377
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): [illegible]
26. Date Accepted M D Y: 3 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 Service
33. EPA IDENTIFICATION NO.: IND 016302165
34. P.O. BOX OR STREET ADDRESS: P.O. BOX 190
35. CITY, STATE, ZIP CODE: Griffith, Ind. 46319
36. TELEPHONE NUMBER: (219) 924-4310
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: 3 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

HAZARDOUS WASTE FACILITY

TO210RT-50
GHM 3.28.83

...AL 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 149125

005261

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS
4. P.O. BOX OR STREET ADDRESS: 10500 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 5,000 | Waste Solvent, NOS | Flammable Liquid | NA1993 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | |
| | | | | | 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): D.F. Sandler
17. DATE SHIPPED M D Y: 3 28 83

## TRANSPORTER SECTION

18. COMPANY NAME: MR. Trunk, Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312)-596-3377
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): Rich Antis
26. Date Accepted M D Y: 3 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 Service
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, IND. 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: 3 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

T0211R T-50
6PM 3.28.83

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 149129

005259

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059977935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4900 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [X] | F003 F005 | [illegible] |
| | | | | | 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): D.F. Scudder
17. DATE SHIPPED M D Y: 3/31/83

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD064506160
20. P.O. BOX OR STREET ADDRESS: 701 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312) 596-3377
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): Dave Vera
26. Date Accepted: 3/31/83

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 Service
33. EPA IDENTIFICATION NO.: IND016310265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Ind. 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): FDWF EE
40. Date Accepted: 3/31/83

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

HAZARDOUS WASTE FACILITY

To 211 RT-50
GRM 3.31.83

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 149130

005255

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059970735
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 5000 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [X] | F003 F005 | [illegible] |
| | | | | | 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): D.F. Scudder
17. DATE SHIPPED: M D Y 4/4/83

## TRANSPORTER SECTION

18. COMPANY NAME: MR. FRANK, INC.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312) 596-3377
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): Dave Voss
26. Date Accepted: M D Y 04/04/83

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 Service
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, IND 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: M D Y 04/04/83

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

T0210KT-50
GRM 4.4.83

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 149132

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS
4. P.O. BOX OR STREET ADDRESS: 10800 S 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414)-764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 5000 | Waste Solvent, NOS | Flammable Liquid | 4N1263 ~~[illegible]~~ | 1. Solid 3. Mixture 2. Liquid [X] | F003 F005 | [illegible] |
| | | | | | 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): D.F. Scudder
17. DATE SHIPPED: M D Y 4/7/83

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312)-596-3377
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): Donald H Buer
26. Date Accepted: 4/7/83

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 Service
33. EPA IDENTIFICATION NO.: IND016300165
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Ind. 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: 4/7/83

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 211 ET-50
GRM 4.7.83

HAZARDOUS WASTE FACILITY

005250

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 149133

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059970935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | 350 |
| | | | | | 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): D.F. Scudder
17. DATE SHIPPED: M D Y 4/8/83

## TRANSPORTER SECTION

18. COMPANY NAME: Air Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312) 596-3377
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

I hereby certify that the above named materials and indicated quantity(ies) has (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.: IND016302265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, IND 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 4/8/83

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 125 KT-50
GRM 4.8.83

HAZARDOUS WASTE FACILITY

005201

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 149134

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID009972935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4800 | WASTE PAINT | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F003 F005 | [illegible] |
| | | | | | 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): D.F. Sandler
17. DATE SHIPPED: M D Y 4 11 83

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312) 596-3377
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): Dave Voss
26. Date Accepted: M / D / Y 4 / 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 Service
33. EPA IDENTIFICATION NO.: IND016302165
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Ind. 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: 4 / 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

To211KT-50
GRM 4.11.83

005208

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 149135

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID009979935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 5000 | Waste Solvent, NOS | Flammable Liquid | NA 1993 | 1. Solid 3. Mixture 2. Liquid [X] | F003 F005 | [illegible] |
| | | | | | 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): D.F. Scudder
17. DATE SHIPPED: M D Y 4 12 83

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank, Inc.
19. EPA IDENTIFICATION NO.: ITD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312) 596-3377
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): Rich Antis
26. Date Accepted: M / D / Y 4 / 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 Service
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, IND. 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 4 / 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

HAZARDOUS WASTE FACILITY

TO210KT-50
GRM 4.12.83

005254

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 149139

005251

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 5,000 | WASTE PAINT | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [X] | F005 | 4/01 |
| | | | | | 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): D.F. Scudder
17. DATE SHIPPED: M D Y 4/20/83

## TRANSPORTER SECTION

18. COMPANY NAME: MR. FRANK, INC.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312) 596-3377
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): Rich Antis
26. Date Accepted: 4/20/83

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 Service
33. EPA IDENTIFICATION NO.: IND016302653
34. P.O. BOX OR STREET ADDRESS: P.O. BOX 190
35. CITY, STATE, ZIP CODE: Griffith, IND 46319
36. TELEPHONE NUMBER: (219) 924-4510
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: 4/20/83

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

To205RT-50
GRM 4.20.83

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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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 149140

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: T/C Industries
2. EPA IDENTIFICATION NO.: WID099171735
3. COMMENTS/SPECIAL INSTRUCTIONS
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414)-764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4500 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F005 | 31840 |
| | | | | | 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: D. Sadler
16. NAME (Print): D.T. Sadler
17. DATE SHIPPED M D Y: 4 12 83

## TRANSPORTER SECTION

18. COMPANY NAME: MK. Trans INC.
19. EPA IDENTIFICATION NO.: IDD065506160
20. P.O. BOX OR STREET ADDRESS: 301 W 135th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312) 596-3317
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: [illegible]
25. NAME (Print): Rick Martin
26. Date Accepted: 4 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 Service
33. EPA IDENTIFICATION NO.: IDD016305365
34. P.O. BOX OR STREET ADDRESS: PO Box 190
35. CITY, STATE, ZIP CODE: Gr. Mtl., IND. 46319
36. TELEPHONE NUMBER: 219-924-1390
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): ADUPEE
40. Date Accepted: 4 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 210E T-50
GRM 4.22.83

HAZARDOUS WASTE FACILITY

005202

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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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 149141

005253

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059979935
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis 53154
6. TELEPHONE NUMBER: (414)-764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4 500 | WASTE PAINT | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F005 | [illegible] |
| | | | | | 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): D.F. Scudder
17. DATE SHIPPED: M D Y 4 11 83

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th ST
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312) 596-3371
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): [illegible]
26. Date Accepted: M / D / Y 4 / 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 Service
33. EPA IDENTIFICATION NO.: IND016306165
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Ind. 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 4 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

TO210E T-50
GRM 4.25.83

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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# HAZARDOUS WASTE MANIFEST FORM

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

MANIFEST NUMBER
A 149143

005249

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059972735
3. COMMENTS/SPECIAL INSTRUCTIONS: Also Hazard Code F003
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4766 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F005 | [illegible] |
| | | | | | 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): D.F. Sandler
17. DATE SHIPPED: M D Y 4 29 83

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill 60473
22. TELEPHONE NUMBER: (312) 596-3377
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): [illegible]
26. Date Accepted: M D Y 4 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 Service
33. EPA IDENTIFICATION NO.: IND016302165
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Ind. 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): FDUNFLD
40. Date Accepted: M D Y 4 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

T0211K
T-50 GRM 4.29.83

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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# HAZARDOUS WASTE MANIFEST FORM

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

MANIFEST NUMBER
A 149144

005250

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059472935
3. COMMENTS/SPECIAL INSTRUCTIONS: Also Hazard Code F003
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W. | 5,000. | WASTE PAINT | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [X] | F005 | [illegible] |
| | | | | | 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: D.F. Scudder
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED: M D Y 5 12 83

## TRANSPORTER SECTION

18. COMPANY NAME: MR. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD069526160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312) 596-3377
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: [illegible]
25. NAME (Print): Rich Antis
26. Date Accepted: M D Y 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 Service
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, IND. 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): FOUNTEE
40. Date Accepted: M D Y 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

HAZARDOUS WASTE FACILITY

T0210 FT-50
GRM 5.2.83

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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# HAZARDOUS WASTE MANIFEST FORM

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

MANIFEST NUMBER
A 149146

005247

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059979735
3. COMMENTS/SPECIAL INSTRUCTIONS: Also Hazard Code F003
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | [illegible] | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [X] | F005 | [illegible] |
| | | | | | 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: D.F. Scudder
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED: M D Y 5 6 83

## TRANSPORTER SECTION

18. COMPANY NAME: MR. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD 069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312) 596-3377
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: [illegible]
25. NAME (Print): [illegible]
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

## HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND016300265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, IND. 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): EDWARDS
40. Date Accepted: M / D / Y 5 / 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

HAZARDOUS WASTE FACILITY

TO121ET-50
GRM 5-6-83

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 149148

00524

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059979935
3. COMMENTS/SPECIAL INSTRUCTIONS: Also Hazard Code F003
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 5,000 | WASTE PAINT | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F005 | 11 |
| | | | | | 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): D.F. Sculder
17. DATE SHIPPED: M 5 D 19 Y 83

## TRANSPORTER SECTION

18. COMPANY NAME: Mk. Frank, Inc.
19. EPA IDENTIFICATION NO.: IID069506160
20. P.O. BOX OR STREET ADDRESS: 201 W 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312) 596-3377
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): Robert Perkins
26. Date Accepted: M 5 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 Service
33. EPA IDENTIFICATION NO.: IND016320365
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, IND. 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 DUNNE
40. Date Accepted: M 5 D 19 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

T0211RT-50 GRAY
5.9.83

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 149152

005245

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059971935
3. COMMENTS/SPECIAL INSTRUCTIONS: Also hazard Code F003
4. P.O. BOX OR STREET ADDRESS: 10500 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414)-764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4,600 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid ☑ | F005 | [illegible] |
| | | | | | 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): Dr. Sandler
17. DATE SHIPPED: M D Y 5 16 83

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312)-596-3377
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): Rich Antis
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 Service
33. EPA IDENTIFICATION NO.: IND016302165
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, IND 46319
36. TELEPHONE NUMBER: (219)-924-7370
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 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 / 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
GRW 5-16-83

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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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 149156

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059779535
3. COMMENTS/SPECIAL INSTRUCTIONS: Hazardous Code 705
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis 53154
6. TELEPHONE NUMBER: (414)-764-1600

| 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) |
|---|---|---|---|---|---|---|---|
| T/N | 4500 | WASTE PAINT | Flammable Liquid | UN1263 | 1. Solid 3. Mixture [2] 2. Liquid | F005 | 37120 |
| | | | | | 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): D.F. Scudder
17. DATE SHIPPED: M D Y 5 20 83

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD069526460
20. P.O. BOX OR STREET ADDRESS: 201 W 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312)-596-3377
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

I hereby certify that the above named materials and indicated quantity(ies) has (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 048030165
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, IND. 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): FOUNTEE
40. Date Accepted M 5 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 210F T-50
GRM 5-20-83

HAZARDOUS WASTE FACILITY

#472600

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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

MANIFEST NUMBER
A 149157

005246

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Also Hazard Code F003
4. P.O. BOX OR STREET ADDRESS: 10800 S 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4600 | WASTE PAINT | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid ☑ | F005 | 4600 |
| | | | | | 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): D.F. Scudder
17. DATE SHIPPED: M D Y 5 05 83

## TRANSPORTER SECTION

18. COMPANY NAME: MR. Frank, INC.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312) 596-3377
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): Rick Hutis
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 Service
33. EPA IDENTIFICATION NO.: IND016300165
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, IND 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

HAZARDOUS WASTE FACILITY

TO210ET-50
GRM 5-23-83

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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# HAZARDOUS WASTE MANIFEST FORM

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

MANIFEST NUMBER
A 149161

005242

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID054972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Also hazard Code: F003
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4600 | WASTE PAINT | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F005 | 4150 |
| | | | | | 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): D. F. Scudder
17. DATE SHIPPED: M D Y 3-12-83

## TRANSPORTER SECTION

18. COMPANY NAME: MR. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312) 596-3377
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): Dick Antis
26. Date Accepted: M D Y 5/27/83

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 Service
33. EPA IDENTIFICATION NO.: IND016302165
34. P.O. BOX OR STREET ADDRESS: P.O. BOX 190
35. CITY, STATE, ZIP CODE: Griffith, IND. 46319
36. TELEPHONE NUMBER: (219) 914-4370
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 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

T0210E T-50
GRM 5.27.83

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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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 149164

005243

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059772935
3. COMMENTS/SPECIAL INSTRUCTIONS: Also Hazard Code F003
4. P.O. BOX OR STREET ADDRESS: 10800 S 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414)-764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F005 | [illegible] |
| | | | | | 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): D.F. Scudder
17. DATE SHIPPED: M D Y 6 13 83

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 701 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312) 596-3377
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): Gary Druen
26. Date Accepted: M D 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 Service
33. EPA IDENTIFICATION NO.: IND016307165
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, IND. 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 NFEE
40. Date Accepted: 6 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

TO210ET-50
GRM 6.3.83

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 149165

005231

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059972135
3. COMMENTS/SPECIAL INSTRUCTIONS: Also Hazard Code F003
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4,700 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F005 | 36,480 |
| | | | | | 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): D.F. Scudder
17. DATE SHIPPED M D Y: 6 16 83

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill 60473
22. TELEPHONE NUMBER: (312) 596-3312
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): Randy Karlovsky
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

## HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND016302265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Ind. 46319
36. TELEPHONE NUMBER: (219) 924-4570
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 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 / 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 GRN 6-6-83

HAZARDOUS WASTE FACILITY

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 149166

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID 0[illegible]
3. COMMENTS/SPECIAL INSTRUCTIONS: Also Hazard Code F003
4. P.O. BOX OR STREET ADDRESS: 10800 S 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 5,500 | Waste Solvent, NOS | Flammable Liquid | NA1993 | 1. Solid 2. Liquid 3. Mixture [X] | F005 | [illegible] |
| | | | | | 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): D.F. Scudder
17. DATE SHIPPED: M 6 D 18 Y 83

## TRANSPORTER SECTION

18. COMPANY NAME: MR Trank, Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312) 596-3377
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): Michael Martin
26. Date Accepted: M 6 D 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 Service
33. EPA IDENTIFICATION NO.: IND 01630165
34. P.O. BOX OR STREET ADDRESS: P.O. Box 170
35. CITY, STATE, ZIP CODE: Griffith, IND. 46319
36. TELEPHONE NUMBER: (219) 924-4310
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): FDON FEE
40. Date Accepted: M 6 D 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 205 RT-50
GRAY 6-8-83

HAZARDOUS WASTE FACILITY

005238

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 149168

## GENERATOR (SHIPPER) SECTION

| 1. COMPANY NAME | 2. EPA IDENTIFICATION NO. | 3. COMMENTS/SPECIAL INSTRUCTIONS |
|---|---|---|
| PPG Industries | WID059979935 | 11150 Holland Code 1203 |
| 4. P.O. BOX OR STREET ADDRESS: 10800 S 13th St. | | |
| 5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154 | 6. TELEPHONE NUMBER: (414)-764-6000 | |

| 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) |
|---|---|---|---|---|---|---|---|
| T/V | 4725 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [X] | F005 | 11[illegible]40 |
| | | | | | 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: D.F. Scudder
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 6/10/83

## TRANSPORTER SECTION

| 18. COMPANY NAME | 19. EPA IDENTIFICATION NO. |
|---|---|
| Mr. Fink, Inc. | ILD065506160 |
| 20. P.O. BOX OR STREET ADDRESS: 201 N 155th St. | |
| 21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473 | 22. TELEPHONE NUMBER: (312)-596-3311 |

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 |
|---|---|---|
| [signature] | Randy Hanson | 6/10/83 |

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 | 33. EPA IDENTIFICATION NO. |
|---|---|
| American Chemical Service | IND016302605 |
| 34. P.O. BOX OR STREET ADDRESS: P.O. Box 110 | |
| 35. CITY, STATE, ZIP CODE: Griffith, Ind. 46319 | 36. TELEPHONE NUMBER: (219)-924-4580 |

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] | EDUNFEE | 6/10/83 |

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

T021 RT-50
GRM 6-10-83

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 149169

005225

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: ALSO HAZARD CODE F003
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414) - 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4 500 | WASTE PAINT | FLAMMABLE LIQUID | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F005 | 54640 |
| | | | | | 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): D. F. SCUDDER
17. DATE SHIPPED M D Y: 8 1 83

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill 60473
22. TELEPHONE NUMBER: (312) 596-3377
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: 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

## HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: AMERICAN CHEMICAL SERVICE
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. BOX 190
35. CITY, STATE, ZIP CODE: GRIFFITH, IND. 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 DUNLEE
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

HAZARDOUS WASTE FACILITY

T0210K T-50 6RM 8-183

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 149170

005227

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: ALSO HAZARD CODE F003
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: ( 414 ) - 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4 500 | WASTE PAINT | FLAMMABLE LIQUID | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F005 | |
| | | | | | 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: D. F. Scudder
16. NAME (Print): D. F. SCUDDER
17. DATE SHIPPED M D Y: 7 25 83

## TRANSPORTER SECTION

18. COMPANY NAME: MR. FRANK, INC.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312 ) - 596-3377
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 7 D 25 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 SERVICE
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. BOX 190
35. CITY, STATE, ZIP CODE: GRIFFITH, IND. 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 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

T0210 E T-50 GRM 7-25-83

HAZARDOUS WASTE FACILITY

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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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 149171

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: ALSO HAZARD CODE F003
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: OAK CREEK, WIS. 53154
6. TELEPHONE NUMBER: (414) - 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4500 | WASTE PAINT | FLAMMABLE LIQUID | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F005 | 26560 |
| | | | | | 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): D.F. SCUDDER
17. DATE SHIPPED M D Y: 7 28 83

## TRANSPORTER SECTION

18. COMPANY NAME: MR. FRANK, INC.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312) - 596-3377
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): Randy Valievsky
26. Date Accepted: 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 SERVICE
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. BOX 190
35. CITY, STATE, ZIP CODE: Griffith, Ind. 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 WFEE
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

HAZARDOUS WASTE FACILITY

To 200 E I-50 GRM 7-28-83

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 149172

005224

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: ALSO HAZARD CODE F003
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: OAK CREEK, WIS. 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4,600 | WASTE PAINT | FLAMMABLE LIQUID | UN1263 | 1. Solid 3. Mixture 2. Liquid ☐ 2 | F005 | 25/20 |
| | | | | | 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): D.F. SCUDDER
17. DATE SHIPPED: M D Y 8/15/83

## TRANSPORTER SECTION

18. COMPANY NAME: MR. FRANK, INC.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312) 596-3377
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): [signature]
26. Date Accepted: M / D / Y 8/15/83

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 SERVICE
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. BOX 190
35. CITY, STATE, ZIP CODE: Griffith, Ind. 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: M / D / Y 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

To206 KT-50
GRM 8-5-83

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 149173

## GENERATOR (SHIPPER) SECTION

| | |
|---|---|
| 1. COMPANY NAME | PPG INDUSTRIES |
| 2. EPA IDENTIFICATION NO. | WID059972935 |
| 3. COMMENTS/SPECIAL INSTRUCTIONS | ALSO HAZARD CODE F003 |
| 4. P.O. BOX OR STREET ADDRESS | 10800 S. 13th St. |
| 5. CITY, STATE, ZIP CODE | OAK CREEK, WIS. 53154 |
| 6. TELEPHONE NUMBER | (414) 764-6000 |

| 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 T/W 5000 | 4,550 | WASTE PAINT | FLAMMABLE LIQUID | UNIDENT | 1. Solid 3. Mixture 2. Liquid [2] | F005 | [illegible] |
| | | | | | 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] | D. F. SCUDDER | 8 13 83 |

## TRANSPORTER SECTION

| | |
|---|---|
| 18. COMPANY NAME | MR. FRANK, INC. |
| 19. EPA IDENTIFICATION NO. | ILD069506160 |
| 20. P.O. BOX OR STREET ADDRESS | 201 W. 155th St. |
| 21. CITY, STATE, ZIP CODE | SOUTH HOLLAND, ILL. 60673 |
| 22. TELEPHONE NUMBER | (312) 596-3377 |
| 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 |
|---|---|---|
| [signature] | Randy Warcinsky | 8 / 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 SERVICE |
| 33. EPA IDENTIFICATION NO. | IND01630265 |
| 34. P.O. BOX OR STREET ADDRESS | P.O. BOX 190 |
| 35. CITY, STATE, ZIP CODE | GRIFFITH, IND. 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 | 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

HAZARDOUS WASTE FACILITY

To 2100 K T-50
GRM 8-3-83

005220

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 149174

005222

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: ALSO HAZARD CODE F003
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: OAK CREEK, WIS. 53154
6. TELEPHONE NUMBER: ( 414 ) - 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4 500 | WASTE PAINT | FLAMMABLE LIQUID | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F005 | 4 [illegible] |
| | | | | | 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): D.F. SCUDDER.
17. DATE SHIPPED: M 8 D 15 Y 83

## TRANSPORTER SECTION

18. COMPANY NAME: MR. FRANK, INC.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill 60473
22. TELEPHONE NUMBER: ( 312 ) - 596-3377
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): [illegible]
26. Date Accepted: M 8 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 SERVICE
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. BOX 190
35. CITY, STATE, ZIP CODE: Griffith, Ind. 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 DUNTLEY
40. Date Accepted: M 8 D 15 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 211KT-50 GRN
8-15-83

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 149175

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: ALSO HAZARD CODE F003
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 1550 | WASTE PAINT | FLAMMABLE LIQUID | UN1263 | 1. Solid 3. Mixture [2] 2. Liquid | F005 | 7200 |
| | | | | | 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): D.F. SCUDDER
17. DATE SHIPPED M D Y: 7/22/83

## TRANSPORTER SECTION

18. COMPANY NAME: MR. FRANK, INC.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill, 60473
22. TELEPHONE NUMBER: (312) 596-3377
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): Rick Martin
26. Date Accepted M D Y: 7/22/83

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 SERVICE
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Ind. 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): P DUNFEE
40. Date Accepted M D Y: 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

To 21FET-50 GRM 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 149176

005223

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: ALSO HAZARD CODE F005
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414) - 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4700 | WASTE PAINT | FLAMMABLE LIQUID | UN1263 | 1. Solid 3. Mixture [2] 2. Liquid | F005 | 36000 |
| | | | | | 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): D.F. SCUDDER
17. DATE SHIPPED: M D Y 8 16 83

## TRANSPORTER SECTION

18. COMPANY NAME: MR. FRANK, INC.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312) - 596-3377
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): K. [illegible]
26. Date Accepted: M 8 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 SERVICE
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Ind. 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): Harold S. Schmidt
40. Date Accepted: M 8 D 19 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 211 KT-50
GRM 8.16.83

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 149177

005231

## GENERATOR (SHIPPER) SECTION

| 1. COMPANY NAME | 2. EPA IDENTIFICATION NO. | 3. COMMENTS/SPECIAL INSTRUCTIONS |
|---|---|---|
| PPG INDUSTRIES | WID059972935 | ALSO HAZARD CODE F003 |
| 4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St. | | |
| 5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154 | 6. TELEPHONE NUMBER: (414) - 764-6000 | |

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4/550 | WASTE PAINT | FLAMMABLE LIQUID | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F005 | |
| | | | | | 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): D.F. SCUDDER

17. DATE SHIPPED M D Y: 7/18/83

## TRANSPORTER SECTION

| 18. COMPANY NAME | 19. EPA IDENTIFICATION NO. |
|---|---|
| MR. FRANK, INC. | ILD069506160 |
| 20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St. | |
| 21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473 | 22. TELEPHONE NUMBER: (312) - 596-3377 |

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 |
|---|---|---|
| | R.C. ANTIS | 7/18/83 |

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 | 33. EPA IDENTIFICATION NO. |
|---|---|
| American Chemical Service | IND01630265 |
| 34. P.O. BOX OR STREET ADDRESS: P.O. Box 190 | |
| 35. CITY, STATE, ZIP CODE: Griffith, Ind. 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 |
|---|---|---|
| | FDUNCE | 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

HAZARDOUS WASTE FACILITY

T0211E7-50
GEM 7.18.83

ISCONSIN
ATURAL RESOURCES

# HAZARDOUS WASTE MANIFEST FORM

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

MANIFEST NUMBER
A 149178

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

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: ALSO HAZARD CODE F003
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414) - 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 1700 | WASTE PAINT | FLAMMABLE LIQUID | UN1263 | 1. Solid 3. Mixture [2] 2. Liquid | F005 | 27700 |
| | | | | | 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): D.F.SCUDDER
17. DATE SHIPPED M D Y: 7/15/83

## TRANSPORTER SECTION

18. COMPANY NAME: MR. FRANK, INC.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th Street
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: ( 312) - 596-3377
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): K. [illegible]
26. Date Accepted M / D / Y: 7/15/83

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 SERVICE
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Ind. 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: 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

HAZARDOUS WASTE FACILITY

T0210KT-50
GRM 7-15-83

00230

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 149179

005232

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: ALSO HAZARD CODE F003
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414) - 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 5,000 | WASTE PAINT | FLAMMABLE LIQUID | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F005 | [illegible] |
| | | | | | 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): D. F. SCUDDER
17. DATE SHIPPED M D Y: 7 11 83

## TRANSPORTER SECTION

18. COMPANY NAME: MR. FRANK, INC.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill 60473
22. TELEPHONE NUMBER: ( 312) - 596-3377
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): [illegible]
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 SERVICE
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Ind. 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): FSWAFEE
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

To 210 RT-50 GRM 7-11-83

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 149180

005233

## GENERATOR (SHIPPER) SECTION

| 1. COMPANY NAME | 2. EPA IDENTIFICATION NO. | 3. COMMENTS/SPECIAL INSTRUCTIONS |
|---|---|---|
| PPG INDUSTRIES | WID059972935 | ALSO HAZARD CODE F003 |
| 4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St. | | |
| 5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154 | 6. TELEPHONE NUMBER: ( 414 ) - 764-6000 | |

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4750 | WASTE PAINT | FLAMMABLE LIQUID | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F005 | 41111 |
| | | | | | 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): D.F. SCUDDER
17. DATE SHIPPED M D Y: 7 18 83

## TRANSPORTER SECTION

| 18. COMPANY NAME | 19. EPA IDENTIFICATION NO. |
|---|---|
| MR. FRANK, INC. | ILD069506160 |
| 20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St. | |
| 21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473 | 22. TELEPHONE NUMBER: ( 312 ) - 596-3377 |
| 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 |
|---|---|---|
| [signature] | [illegible] | 7 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 | 33. EPA IDENTIFICATION NO. |
|---|---|
| AMERICAN CHEMICAL SERVICE | IND01630265 |
| 34. P.O. BOX OR STREET ADDRESS: P.O. Box 190 | |
| 35. CITY, STATE, ZIP CODE: Griffith, Ind. 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] | ADVANCE | 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

HAZARDOUS WASTE FACILITY

To 211 K T-50
GKH 7-8-83

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.

ILL 0521

# HAZARDOUS WASTE MANIFEST FORM

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

MANIFEST NUMBER
A 149181

0052359

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: ALSO HAZARD CODE F003
4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414) - 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4,750 | WASTE PAINT | FLAMMABLE LIQUID | Un1263 | 1. Solid 3. Mixture [2] 2. Liquid | F005 | [illegible] |
| | | | | | 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): D. F. SCUDDER
17. DATE SHIPPED: M D Y 6/27/83

## TRANSPORTER SECTION

18. COMPANY NAME: MR. FRANK, INC.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill 60473
22. TELEPHONE NUMBER: ( 312) - 596-3377
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): Kenny Kaminski
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 SERVICE
33. EPA IDENTIFICATION NO.: IND01630265
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Ind. 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 6 D 27 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 211-RT-50
GAM 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 149182

005234

## GENERATOR (SHIPPER) SECTION

| 1. COMPANY NAME | 2. EPA IDENTIFICATION NO. | 3. COMMENTS/SPECIAL INSTRUCTIONS |
|---|---|---|
| PPG INDUSTRIES | WID059972935 | ALSO HAZARD CODE F003 |
| 4. P.O. BOX OR STREET ADDRESS: 10800 S. 13th Street | | |
| 5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154 | 6. TELEPHONE NUMBER: ( 414 ) - 764-6000 | |

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4 700 | WASTE PAINT | FLAMMABLE LIQUID | UN1263 | 1. Solid 3. Mixture [2] 2. Liquid | F005 | 47100 |
| | | | | | 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): D.F. SCUDDER | 17. DATE SHIPPED M D Y: 6 24 83

## TRANSPORTER SECTION

| 18. COMPANY NAME | 19. EPA IDENTIFICATION NO. |
|---|---|
| MR. FRANK, IND. INC. | ILD069506160 |
| 20. P.O. BOX OR STREET ADDRESS: 201 W. 155th Street | |
| 21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473 | 22. TELEPHONE NUMBER: ( 312 ) - 596-3377 |
| 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 |
|---|---|---|
| [signature] | [illegible] | 6 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 | 33. EPA IDENTIFICATION NO. |
|---|---|
| AMERICAN CHEMICAL SERVICE | IND01630265 |
| 34. P.O. BOX OR STREET ADDRESS: P.O. Box 190 | |
| 35. CITY, STATE, ZIP CODE: Griffith, Ind. 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 DUN FEE | 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

T0210 F T-50
GRN 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 149183

005236

## GENERATOR (SHIPPER) SECTION

| 1. COMPANY NAME | 2. EPA IDENTIFICATION NO. | 3. COMMENTS/SPECIAL INSTRUCTIONS |
|---|---|---|
| PPG INDUSTRIES | WID059972935 | ALSO HAZARD CODE F003 |
| 4. P.O. BOX OR STREET ADDRESS: 10800 S 13th Street | | |
| 5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154 | 6. TELEPHONE NUMBER: (414) 764-6000 | |

| 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) |
|---|---|---|---|---|---|---|---|
| T/W 5 000 | 4,300 | WASTE PAINT | FLAMMABLE LIQUID | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F005 | [illegible] |
| | | | | | 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): D. F. SCUDDER
17. DATE SHIPPED: M D Y 6 / 20 / 83

## TRANSPORTER SECTION

| 18. COMPANY NAME | 19. EPA IDENTIFICATION NO. |
|---|---|
| MR. FRANK, INC. | ILD069506160 |
| 20. P.O. BOX OR STREET ADDRESS: 201 W. 155th Street | |
| 21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473 | 22. TELEPHONE NUMBER: (312) 596-3377 |
| 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 |
|---|---|---|
| [signature] | Randy Hanovsky | 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 | 33. EPA IDENTIFICATION NO. |
|---|---|
| AMERICAN CHEMICAL SERVICE | IND01630265 |
| 34. P.O. BOX OR STREET ADDRESS: P.O. Box 190 | |
| 35. CITY, STATE, ZIP CODE: Griffith, Ind. 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 | 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 Num
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO 211 RT-50 GRM 6-20-83

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 149184

005240

## GENERATOR (SHIPPER) SECTION

| | |
|---|---|
| 1. COMPANY NAME | PPG INDUSTRIES |
| 2. EPA IDENTIFICATION NO. | WID059972935 |
| 3. COMMENTS/SPECIAL INSTRUCTIONS | ALSO HAZARD CODE F003 |
| 4. P.O. BOX OR STREET ADDRESS | 10800 S. 13th Street |
| 5. CITY, STATE, ZIP CODE | Oak Creek, Wis. 53154 |
| 6. TELEPHONE NUMBER | (414) - 764-6000 |

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4725 | WASTE PAINT | FLAMMABLE LIQUID | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F005 | [illegible] |
| | | | | | 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): D. F. SCUDDER
17. DATE SHIPPED M D Y: 6/13/83

## TRANSPORTER SECTION

| | |
|---|---|
| 18. COMPANY NAME | MR. FRANK, INC. |
| 19. EPA IDENTIFICATION NO. | ILD069506160 |
| 20. P.O. BOX OR STREET ADDRESS | 201 W. 155th Street |
| 21. CITY, STATE, ZIP CODE | South Holland, Ill. 60473 |
| 22. TELEPHONE NUMBER | (312) - 596-3377 |
| 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): Randy Hanlovsky
26. Date Accepted: 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 SERVICE |
| 33. EPA IDENTIFICATION NO. | IND01630265 |
| 34. P.O. BOX OR STREET ADDRESS | P.O. Box 190 |
| 35. CITY, STATE, ZIP CODE | Griffith, Ind. 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): EDUD FEE
40. Date Accepted: 6/13/83

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

To 210 KT-50 GRM 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 149301

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059970935
3. COMMENTS/SPECIAL INSTRUCTIONS: Also Hazard Code T003
4. P.O. BOX OR STREET ADDRESS: 10300 S. 13th St
5. CITY, STATE, ZIP CODE: Oak Creek, Wis. 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W 5000 | 5,000 | Waste Solvent, NOS | Flammable Liquid | NA 1993 | 1. Solid 3. Mixture 2. Liquid [X] | T005 | 41470 |
| | | | | | 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): D.F. Sendler
17. DATE SHIPPED: M D Y 6 14 83

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312) 596-3317
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): Ronny Varnovsky
26. Date Accepted: M / D / Y 6 / 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 Service
33. EPA IDENTIFICATION NO.: IND016307165
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, Ind. 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: 6 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 210 E T-50 GRM
6.14.83

005241

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 149318

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG Industries
2. EPA IDENTIFICATION NO.: WID059770935
3. COMMENTS/SPECIAL INSTRUCTIONS: Also F003
4. P.O. BOX OR STREET ADDRESS: 10800 S 13th St.
5. CITY, STATE, ZIP CODE: Oak Creek, Wis 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4550 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [X] | F005 | [illegible] |
| | | | | | 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): D. F. Stadler
17. DATE SHIPPED: M D Y 8 22 83

## TRANSPORTER SECTION

18. COMPANY NAME: Mr. Frank, Inc.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th St.
21. CITY, STATE, ZIP CODE: South Holland, Ill. 60473
22. TELEPHONE NUMBER: (312) 596-3377
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): Rich Antis
26. Date Accepted: M D Y 8 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 Service
33. EPA IDENTIFICATION NO.: IND016302165
34. P.O. BOX OR STREET ADDRESS: P.O. Box 190
35. CITY, STATE, ZIP CODE: Griffith, IND. 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: 8-22-83

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

T0211KT-50GRM 8-22-83

HAZARDOUS WASTE FACILITY

005221

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 149324

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES, INC.
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: ALSO HAZARD CODE F003
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: OAK CREEK, WI 53154
6. TELEPHONE NUMBER: (414)-764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 5000 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F005 | [illegible] |
| | | | | | 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): D.F. Scudder
17. DATE SHIPPED: M D Y 8 17 83

## TRANSPORTER SECTION

18. COMPANY NAME: MR. FRANK, INC.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 155th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois 60473
22. TELEPHONE NUMBER: (312)-596-3377
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): [illegible]
26. Date Accepted: M D Y 8 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 SERVICE
33. EPA IDENTIFICATION NO.: IND01630265
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:

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 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

T0210KT-50
GRM 8-29-83

005220

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 149326

## GENERATOR (SHIPPER) SECTION

| | |
|---|---|
| 1. COMPANY NAME | PPG INDUSTRIES, INC. |
| 2. EPA IDENTIFICATION NO. | WID059972935 |
| 3. COMMENTS/SPECIAL INSTRUCTIONS | ALSO HAZARD CODE F003 |
| 4. P.O. BOX OR STREET ADDRESS | 10800 South 13th Street |
| 5. CITY, STATE, ZIP CODE | Oak Creek, WI 53154 |
| 6. TELEPHONE NUMBER | (414) 764-6000 |

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 5,000 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F005 | [illegible] |
| | | | | | 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): D.F. Scudder
17. DATE SHIPPED: M D Y 9 12 83

## TRANSPORTER SECTION

| | |
|---|---|
| 18. COMPANY NAME | MR. FRANK, INC. |
| 19. EPA IDENTIFICATION NO. | ILD069506160 |
| 20. P.O. BOX OR STREET ADDRESS | 201 West 155th Street |
| 21. CITY, STATE, ZIP CODE | South Holland, Illinois 60473 |
| 22. TELEPHONE NUMBER | (312) 596-3377 |
| 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): [illegible]
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

## HAZARDOUS WASTE FACILITY SECTION

| | |
|---|---|
| 32. FACILITY NAME | AMERICAN CHEMICAL SERVICE |
| 33. EPA IDENTIFICATION NO. | IND01630265 |
| 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 | |

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): EDUNEE
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 211K T-50 GRN 9.2.83

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 149328

005218

## GENERATOR (SHIPPER) SECTION

| | |
|---|---|
| 1. COMPANY NAME | PPG INDUSTRIES, INC. |
| 2. EPA IDENTIFICATION NO. | WID059972935 |
| 3. COMMENTS/SPECIAL INSTRUCTIONS | ALSO HAZARD CODE F003 |
| 4. P.O. BOX OR STREET ADDRESS | 10800 South 13th Street |
| 5. CITY, STATE, ZIP CODE | Oak Creek, WI 53154 |
| 6. TELEPHONE NUMBER | (414)-764-6000 |

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4725 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F005 | 27740 |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [2] | | |

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] | D.F. Scudder | 9 16 83 |

## TRANSPORTER SECTION

| | |
|---|---|
| 18. COMPANY NAME | MR. FRANK, INC. |
| 19. EPA IDENTIFICATION NO. | ILD069506160 |
| 20. P.O. BOX OR STREET ADDRESS | 201 West 155th Street |
| 21. CITY, STATE, ZIP CODE | South Holland, Illinois 60473 |
| 22. TELEPHONE NUMBER | (312)-596-3377 |
| 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 |
|---|---|---|
| [signature] | [illegible] | 9 / 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 SERVICE |
| 33. EPA IDENTIFICATION NO. | IND01630265 |
| 34. P.O. BOX OR STREET ADDRESS | P.O. Box 190 |
| 35. CITY, STATE, ZIP CODE | Griffith, Ihdiana 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] | [illegible] | 9 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

HAZARDOUS WASTE FACILITY

TO 210 KT-50 GRM 9-6-83

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 149337

005217

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Also Hazard Code: F003
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 660 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F005 | 4/1 |
| | | | | | 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): D.F. Scudder
17. DATE SHIPPED: M D Y 9/19/83

## TRANSPORTER SECTION

18. COMPANY NAME: MR. FRANK, INC.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois 60473
22. TELEPHONE NUMBER: (312) 596-3377
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): Miguel Garcia
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

## HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: AMERICAN CHEMICAL SERVICE
33. EPA IDENTIFICATION NO.: IND01630265
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

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: 9/19/83

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

To 211 RT-50 GRM 9.19.83

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 149338

005216

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Also Hazard Code: F003
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4,600 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F005 | [illegible] |
| | | | | | 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): D.F. Scudder
17. DATE SHIPPED: M D Y 1 20 83

## TRANSPORTER SECTION

18. COMPANY NAME: MR. FRANK, INC.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois 60473
22. TELEPHONE NUMBER: (312) 596-3377
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): Rich Antis
26. Date Accepted: M 1 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 SERVICE
33. EPA IDENTIFICATION NO.: IND01630265
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

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 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

To206KT-50
GKM 9-20-83

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 149341

005215

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES, INC.
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: F003
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) - 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 440 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture [2] 2. Liquid | F005 | |
| | | | | | 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): D.F. Scudder
17. DATE SHIPPED M D Y: 9 26 83

## TRANSPORTER SECTION

18. COMPANY NAME: MR. FRANK, INC.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois 60473
22. TELEPHONE NUMBER: (312) - 596-3377
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): M. Garcia
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

## HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: AMERICAN CHEMICAL SERVICE
33. EPA IDENTIFICATION NO.: IND01630265
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

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

38. AUTHORIZED SIGNATURE
39. NAME (Print): FDUNFEE
40. Date Accepted: 9/26/83

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

HAZARDOUS WASTE FACILITY

TO210 KT-50 GRM
9-26-83

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 149344

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES, INC.
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: N/SD F003
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W 5,000 | 4,500 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F005 | 3714 |
| | | | | | 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): D.F. Scudder
17. DATE SHIPPED: M D Y 10 13 83

## TRANSPORTER SECTION

18. COMPANY NAME: MR. FRANK, INC.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 155th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois 60473
22. TELEPHONE NUMBER: (312) 596-3377
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): [signature]
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 SERVICE
33. EPA IDENTIFICATION NO.: IND01630265
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

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 10 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

HAZARDOUS WASTE FACILITY

T0211E T-50 GRM 10.3.83

005214

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 149348

00523

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES, INC.
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Also waste code F003
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: ( 414 ) - 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4500 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F005 | 37000 |
| | | | | | 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: /s/ [signature]
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED M D Y: 10 10 83

## TRANSPORTER SECTION

18. COMPANY NAME: MR. FRANK, INC.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois 60473
22. TELEPHONE NUMBER: (312) - 596-3377
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): Frank Kaminski
26. Date Accepted M / D / Y: 10 / 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 SERVICE
33. EPA IDENTIFICATION NO.: IND01630265
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

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): P DUNFEE
40. Date Accepted: 10 / 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

T0210E T-50 GRW
10.10.83

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 149351

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES, INC.
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Also Waste Code: F003
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4,550 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F005 | 36[illegible] |
| | | | | | 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): D.F. Scudder
17. DATE SHIPPED: M D Y 10 18 83

## TRANSPORTER SECTION

18. COMPANY NAME: MR. FRANK, INC.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois 60473
22. TELEPHONE NUMBER: (312) 596-3377
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): [illegible]
26. Date Accepted: 10/19/83

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 SERVICE
33. EPA IDENTIFICATION NO.: IND01630265
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

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: 10/18/83

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

HAZARDOUS WASTE FACILITY T0210K T-50 GRM 10.18.83

005212

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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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 149357

005210

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES, INC.
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Also Waste Code: F003
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 5,000 | Waste Paint | Flammable liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F005 | [illegible] |
| | | | | | 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): D.F. Scudder
17. DATE SHIPPED: M D Y 10 24 83

## TRANSPORTER SECTION

18. COMPANY NAME: MR. FRANK, INC.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois 60473
22. TELEPHONE NUMBER: (312) 596-3377
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): [illegible]
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

## HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Service
33. EPA IDENTIFICATION NO.: IND01630265
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

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): Harold F Schmidt
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

HAZARDOUS WASTE FACILITY

To 211 R T-50 GRM
10.24.83

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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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 149361

005211

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES, INC.
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Also Waste Code F003
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F005 | 7520 |
| | | | | | 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): D.F. Scudder
17. DATE SHIPPED: M D Y 10 31 83

## TRANSPORTER SECTION

18. COMPANY NAME: MR. FRANK, INC.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois 60473
22. TELEPHONE NUMBER: (312) 596-3377
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): GARY DRUEN
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 SERVICE
33. EPA IDENTIFICATION NO.: IND01630265
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

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: 10 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

...US WASTE FACILITY

To 211 KT-50 GRW
10-31-83

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 149366

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES, INC.
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Also Waste Code: F003
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F005 | [illegible] |
| | | | | | 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): D.F. Scudder
17. DATE SHIPPED: M D Y 11/7/83

## TRANSPORTER SECTION

18. COMPANY NAME: MR. FRANK, INC.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 West 155th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois 60473
22. TELEPHONE NUMBER: (312) 596-3377
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): GARY DRUEN
26. Date Accepted: M / 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 SERVICE
33. EPA IDENTIFICATION: IND01630265
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

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 / 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 11-7-83

005209

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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Please type or print clearly using ball point pen — press hard.

# HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-68 REV. 6-81

MANIFEST NUMBER: A 149371

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES, INC.
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Also Waste Code: F003
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: ( 414 ) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | ~~4000~~ 3000 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F005 | 24150 |
| | | | | | 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: D. F. Scudder
16. NAME (Print): D.F. Scudder
17. DATE SHIPPED: M D Y 11 07 83

## TRANSPORTER SECTION

18. COMPANY NAME: MR. FRANK, INC.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois 60473
22. TELEPHONE NUMBER: ( 312 ) 596-3377
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: D. F. Scudder
25. NAME (Print): D. F. Scudder
26. Date Accepted: M 11 D 7 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 SERVICE
33. EPA IDENTIFICATION: IND01630265
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:

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

38. AUTHORIZED SIGNATURE: Michael Bruso
39. NAME (Print): Michael Bruso
40. Date Accepted: M 12 D 19 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 210K
T-50 GRM 11.21.83

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 149374

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES, INC.
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Also waste code: F003
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4700 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture [2] 2. Liquid | F005 | |
| | | | | | 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): D.F. Scudder
17. DATE SHIPPED M D Y: 11 28 83

## TRANSPORTER SECTION

18. COMPANY NAME: MR. FRANK, INC.
19. EPA IDENTIFICATION: ILD006506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois 60473
22. TELEPHONE NUMBER: (312) 596-3377
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 11 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 SERVICE
33. EPA IDENTIFICATION: IND001630265
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

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 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

HAZARDOUS WASTE FACILITY

T0212ET-50
6RM 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 149379

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES, INC.
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Also waste code: F003
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4750 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F005 | 22360 |
| | | | | | 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): D.F. Scudder
17. DATE SHIPPED M D Y: 12 15 83

## TRANSPORTER SECTION

18. COMPANY NAME: MR. FRANK, INC.
19. EPA IDENTIFICATION: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois 60473
22. TELEPHONE NUMBER: (312) 596-3377
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: 12 / 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 SERVICE
33. EPA IDENTIFICATION: IND01630265
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

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

38. AUTHORIZED SIGNATURE
39. NAME (Print): E DUNFEE
40. Date Accepted: 12 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

T0212FT-60
GLM 12-5-83

005208

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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

MANIFEST NUMBER
A 149384

005205

...verse side, Copy 6, for instructions.
...se type or print clearly using ball point pen — press hard.

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES, INC.
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Also waste code: F003
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4,650 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F005 | 27520 |
| | | | | | 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): D.F. Scudder
17. DATE SHIPPED M D Y: 12/12/83

## TRANSPORTER SECTION

18. COMPANY NAME: MR. FRANK, INC.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois 60473
22. TELEPHONE NUMBER: (312) 596-3377
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): Randy Kowalsky
26. Date Accepted: 12/12/83

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 SERVICE
33. EPA IDENTIFICATION NO.: IND01630265
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

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: 12/12/83

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 K T-50
GRM 12-12-83

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 149389

005270

## GENERATOR (SHIPPER) SECTION

| 1. COMPANY NAME | 2. EPA IDENTIFICATION NO. | 3. COMMENTS/SPECIAL INSTRUCTIONS |
|---|---|---|
| PPG INDUSTRIES, INC. | WID059972935 | Also Waste Code: F003 |
| 4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street | | |
| 5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154 | 6. TELEPHONE NUMBER: (414) 764-6000 | |

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4750 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture [2] 2. Liquid | F005 | 47114 |
| | | | | | 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): D.F. SCUDDER
17. DATE SHIPPED M D Y: 12 / 1 / 83

## TRANSPORTER SECTION

| 18. COMPANY NAME | 19. EPA IDENTIFICATION NO. |
|---|---|
| MR. FRANK, INC. | ILD069506160 |
| 20. P.O. BOX OR STREET ADDRESS: 201 W. 155th Street | |
| 21. CITY, STATE, ZIP CODE: South Holland, Illinois 60473 | 22. TELEPHONE NUMBER: (312) 596-3377 |
| 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 |
|---|---|---|
| [signature] | Randy Kaczynski | 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 | 33. EPA IDENTIFICATION |
|---|---|
| American Chemical Service | IND01630265 |
| 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 | |

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] | Harold F. Schmidt | 12 / 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 211ET-50 6PM 12-19-83

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 149391

005271

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES, INC.
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Also waste code: F003
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 3500 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F005 | |
| | | | | | 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): D.F. Scudder
17. DATE SHIPPED M D Y: 12 27 83

## TRANSPORTER SECTION

18. COMPANY NAME: MR. FRANK, INC.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois 60473
22. TELEPHONE NUMBER: (312) 596-3377
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): MIGNEL GARCIA
26. Date Accepted M / D / Y: 12 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 SERVICE
33. EPA IDENTIFICATION NO.: IND01630265
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

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: 12 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

HAZARDOUS WASTE FACILITY

To 210 KT-50
GRM 12-28-83

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 149397

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES, INC.
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Also waste code: F003
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: ( 414 ) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4,500 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F005 | [illegible] |
| | | | | | 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): D.F. Scudder
17. DATE SHIPPED: M 1 D 17 Y 84

## TRANSPORTER SECTION

18. COMPANY NAME: MR. FRANK, INC.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois 60473
22. TELEPHONE NUMBER: ( 312 ) 596-3377
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): Robert Perkins
26. Date Accepted: M 1 9 D 1 8 3 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 SERVICE
33. EPA IDENTIFICATION NO.: IND01630265
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:

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: M 1 D 9 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

T0210E T-50 GRN 1.9.84

00403

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 149201

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES, INC.
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Also waste code: F003
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: ( 414 ) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 110 T/I | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F005 | 8240 |
| | | | | | 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): D.F. Scudder
17. DATE SHIPPED M D Y: 1 16 84

## TRANSPORTER SECTION

18. COMPANY NAME: MR. FRANK, INC.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois 60473
22. TELEPHONE NUMBER: ( 312 ) 596-3377
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 1 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

T0210 K T-50 6CM 1.16.84

HAZARDOUS WASTE FACILITY

## HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: AMERICAN CHEMICAL SERVICE
33. EPA IDENTIFICATION NO.: IND01630265
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

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

38. AUTHORIZED SIGNATURE
39. NAME (Print): E DUNFEE
40. Date Accepted M 1 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

037404

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 149205

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES, INC.
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: / Also F003
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4725 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F005 | [illegible] |
| | | | | | 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): D.F. Scudder
17. DATE SHIPPED: M D Y 1 23 84

## TRANSPORTER SECTION

18. COMPANY NAME: MR. FRANK, INC.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois 60473
22. TELEPHONE NUMBER: (312) 596-3377
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): [signature]
26. Date Accepted: M 1 D 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

## HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: AMERICAN CHEMICAL SERVICE
33. EPA IDENTIFICATION NO.: IND01630265
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

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): Rushnok RF
40. Date Accepted: M 1 D 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

T0211RT-50 GRM 1.23.84

HAZARDOUS WASTE FACILITY

007405

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 149209

007406

## GENERATOR (SHIPPER) SECTION

| | |
|---|---|
| 1. COMPANY NAME | PPG INDUSTRIES, INC. |
| 2. EPA IDENTIFICATION NO. | WID059972935 |
| 3. COMMENTS/SPECIAL INSTRUCTIONS | Also F003 |
| 4. P.O. BOX OR STREET ADDRESS | 10800 South 13th Street |
| 5. CITY, STATE, ZIP CODE | Oak Creek, WI 53154 |
| 6. TELEPHONE NUMBER | (414) 764-6000 |

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | | Waste Paint | Flammable Liquid | Un1263 | 1. Solid 3. Mixture 2. Liquid [2] | F005 | [illegible] |
| | | | | | 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): D.F. Scudder
17. DATE SHIPPED M D Y: 1 30 84

## TRANSPORTER SECTION

| | |
|---|---|
| 18. COMPANY NAME | MR. FRANK, INC. |
| 19. EPA IDENTIFICATION NO. | ILD069506160 |
| 20. P.O. BOX OR STREET ADDRESS | 201 W. 155th Street |
| 21. CITY, STATE, ZIP CODE | South Holland, Illinois 60473 |
| 22. TELEPHONE NUMBER | (312) 596-3377 |
| 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): GARY DRUEN
26. Date Accepted: 1 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 SERVICE |
| 33. EPA IDENTIFICATION NO. | IND01630265 |
| 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 | |

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: 1 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 DNR USE ONLY

HAZARDOUS WASTE FACILITY

T0211ET-50 GRM 1.30.84

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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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 149223

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES, INC.
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Also F003
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F005 | [illegible] |
| | | | | | 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): D.F. Scudder
17. DATE SHIPPED: M D Y 2/20/84

## TRANSPORTER SECTION

18. COMPANY NAME: MR. FRANK, INC.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois 60473
22. TELEPHONE NUMBER: (312) 596-3377
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): GARY DRUTN
26. Date Accepted: M 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 SECTION

32. FACILITY NAME: AMERICAN CHEMICAL SERVICE
33. EPA IDENTIFICATION NO.: IND01630265
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

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: 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

To 211 KT-50
GRM 2.20.84

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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# HAZARDOUS WASTE MANIFEST FORM

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

MANIFEST NUMBER
A 149221

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES, INC.
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Also F003
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F005 | 27140 |
| | | | | | 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): D.F. Scudder
17. DATE SHIPPED: M D Y 2 16 84

## TRANSPORTER SECTION

18. COMPANY NAME: MR. FRANK, INC.
19. EPA IDENTIFICATION NO: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois 60473
22. TELEPHONE NUMBER: (312) 596-3377
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): Gary Dauen
26. Date Accepted: M 1 D 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 SERVICE
33. EPA IDENTIFICATION NO: IND01630265
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

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): H.F. Schmidt
40. Date Accepted: 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 206 RT-50 GRW 2.16.84

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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# HAZARDOUS WASTE MANIFEST FORM

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

MANIFEST NUMBER
A 149217

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES, INC.
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Also F003
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: ( 414 ) - 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4750 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture 2. Liquid [2] | F005 | 44440 |
| | | | | | 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): D.F. Scudder
17. DATE SHIPPED: M D Y 2/13/84

## TRANSPORTER SECTION

18. COMPANY NAME: MR. FRANK, INC.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois 60473
22. TELEPHONE NUMBER: ( 312 ) - 596-3377
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): [illegible]
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

## HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: AMERICAN CHEMICAL SERVICE
33. EPA IDENTIFICATION NO.: IND01630265
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:

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 Rushwalk
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

T0212 R T-50 6Ray
2.13.84

007409

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 149214

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES, INC.
2. EPA IDENTIFICATION NO.: WIS059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Also F003
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: (414) 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4 5110 | Waste Paint | Flammable Liquid | UN1263 | 1. Solid 3. Mixture [2] 2. Liquid | F005 | [illegible] |
| | | | | | 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): D.F. Scudder
17. DATE SHIPPED: M D Y 2 16 84

## TRANSPORTER SECTION

18. COMPANY NAME: MR. FRANK, INC.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois 60473
22. TELEPHONE NUMBER: (312) 596-3377
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): [illegible]
26. Date Accepted: M 1 D 1 Y 1

I hereby certify that the above named materials and indicated quantity(ies) has (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.: IND01630265
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:

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 8 D 8 Y 4

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 RT-60 6KY
2.8.84

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 149225

037411

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: PPG INDUSTRIES, INC.
2. EPA IDENTIFICATION NO.: WID059972935
3. COMMENTS/SPECIAL INSTRUCTIONS: Also F003
4. P.O. BOX OR STREET ADDRESS: 10800 South 13th Street
5. CITY, STATE, ZIP CODE: Oak Creek, WI 53154
6. TELEPHONE NUMBER: ( 414 ) - 764-6000

| 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) |
|---|---|---|---|---|---|---|---|
| T/W | 4,500 | Waste Paint | Flammable Liquid | Un1263 | 1. Solid 3. Mixture 2. Liquid [2] | F005 | 40520 |
| | | | | | 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): D.F. Scudder
17. DATE SHIPPED M D Y: 2 27 84

## TRANSPORTER SECTION

18. COMPANY NAME: MR. FRANK, INC.
19. EPA IDENTIFICATION NO.: ILD069506160
20. P.O. BOX OR STREET ADDRESS: 201 W. 155th Street
21. CITY, STATE, ZIP CODE: South Holland, Illinois 60473
22. TELEPHONE NUMBER: ( 312 ) - 596-3377
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

I hereby certify that the above named materials and indicated quantity(ies) has (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.: IND01630265
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

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

38. AUTHORIZED SIGNATURE
39. NAME (Print): FDVN FEE
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

T0212 E T-50 GRN
2-29-84

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 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law. |
|---|---|---|---|
| I D 0 0 5 3 6 2 0 1 7 | 7 1 5 2 | 1 of 1 | |

**GENERATOR**

3. Generator's Name and Mailing Address
Prab Conveyor
5944 E. Kilgore Road
Kalamazoo, MI 49003
4. Generator's Phone (616) 349-8761

A. State Manifest Document Number: INA 0117152
B. State Generator's ID:

5. Transporter 1 Company Name: A&B Industrial
6. Use EPA ID Number: H 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 Services
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. | 12. Containers Type | 13. Total Quantity | 14. Unit Wt/Vol. | Waste No. |
|---|---|---|---|---|---|
| a. Waste Paint Related Material Flammable Liquid NA 1263 | 005 | DM | 00055 | G | D001 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above: RQ

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 |
|---|---|---|---|---|
| Michael C. Reed | | | | |

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| R. Michael Hern | R. Michael Hern | 05 | 17 | 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 E Schmidt | | 05 | 20 | 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 0117152

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

012591

**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

0375727

SPECIAL WASTE HAULING MANIFEST

Authorization Number 197003

Litho-Strip (Company Name) — 7247 S. 78th Ave. (Address)

Bridgeview (City) — Ill. (State) — 60455 (Zip)

0316000013 G (Generator Number)

Fed. EPA# ILD 010278281

WASTE HAULER(S)

Mr. Frank Inc. (Hauler Name) — 201 W. 155th St. (Hauler Address) — So. Holland, Ill.

S.W.H. Registration Number 0079023

ILD 069506160

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) — Ind. (State) — 46319 (Zip)

IND 016360265

**TO BE COMPLETED BY WASTE GENERATOR**

WASTE NAME: Paint 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: 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: 5,000

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. IEPA

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 1/30/81 — Arthur J. Wilhelmsen (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: 01 30 81

(2) [signature] (Authorized Signature) — DATE: / /

5,000

**DISPOSAL, STORAGE, OR TREATMENT FACILITY***

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANT

[signature] (Authorized Signature)

WASTE SUBJECT TO FEE YES ____ NO ____

DATE: 1 30 81

COMMENTS OR SPECIAL INSTRUCTIONS: To 125 K 1/30/81 T-63 Jim Murphy

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

001171

TO BE COMPLETED BY WASTE GENERATOR

# STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0068089

WASTE GENERATOR

Authorization Number 99608

LITHO - STRIP CO. (Company Name) | 7247 S. 78TH AVE (Address)

BRIDGEVIEW (City) | IL (State) | 60455 (Zip)

0316000046 G (Generator Number)

ILD 010276281

WASTE HAULER(S)

(1) MR. FRANK INC. (Hauler Name) | 201 W. 155TH ST. (Hauler Address)

So. HOLLAND, IL

S.W.H. Registration Number 0029021

ILD 065506160

(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)

91800893 (Site Number)

GRIFFITH (City) | IND. (State) | 46319 (Zip)

IND 014360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT 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: 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

Kenneth B. Nelson (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 005000 (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 WAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) Robert Rebeus (Authorized Signature) DATE 03/25/82

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED.

_____ (Authorized Signature) DATE: 3/25/82

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 126 R-T-63 61CM 3/25/82

002602

TO BE COMPLETED BY WASTE GENERATOR

# STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0116084

WASTE GENERATOR

Authorization Number 996068

Litho Stip Co (Company Name) 7247 S 78TH Ave Address
Bridgeview City Ill State 60455 Zip
4316000013 Generator Number
ILD 0102782 81

WASTE HAULER(S)

(1) Mr Frank Hauler Name 201 W 155TH St Hauler Address
S.W.H. Registration Number 0079019

(2) _____ Hauler Name So Holland Ill Hauler Address
ILD 0695 06160 S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Services (Facility Name) 420 S Colfax Address
Griffith City Ind State 46319 Zip
918008902 Site Number
IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paints & 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: UN 1993 F005
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: 2-5-82 (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 004500 (1 GALLONS, 2 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) Donald Bull (Authorized Signature) DATE: 02/05/82

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

BFB M Quick (Authorized Signature) DATE: 02/05/82

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 124 K T-63 GRM 2/5/82

002601

IL 532-610
LPC 52 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**

0635660
997003
Authorization Number 996068

LITHO STRIP CO. (Company Name) | 7247 So. 78TH AVE. (Address) | 312 458 8416 (Phone Number) | 0310270007 G (14 Generator Number 24)

BRIDGEVIEW, (City) | IL (State) | 60455 (Zip) | ILD 010278281 (EPA Number)

WASTE HAULER(S)

MR. FRANK INC. (Hauler Name) | 201 W. 155TH ST. (Hauler Address) | S.W.H. Registration Number 0079029 (25 31)
SO. HOLLAND, IL | 312 596 3377 (Phone Number) | ILD 069 506 160 (EPA Number)

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number (32 38)
(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

ADDRIAN CHEMICAL SERVICE (Facility Name) | 420 So. COLFAX (Address) | 918 091 02 (39 Site Number 46)
GRIFFITH (City) | IND (State) | 46319 (Zip) | 312 768 3400 (Phone Number) | IND 016 360 265 (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: PAINT 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 PAINT SOLVENTS | HAZARD CLASS. FLAMABLE | 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: 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 Kenneth B. Nelson (Authorized Signature) DATE: 6/11/82

**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 Ralph (Authorized Signature) DATE: 6/11/82 (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: 6/11/82 (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. # 4

SITE COPY - PART 3

T0210RT-506RM

002603

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

0635662

Authorization Number 997003

LITHO STRIP CO. (Company Name) | 7247 So. 78TH AVE. (Address) | 3124588416 (Phone Number) | 0310270007 (Generator Number)

BRIDGEVIEW (City) | IL (State) | 60455 (Zip) | ILD010278281 (EPA Number)

WASTE HAULER(S)

MR. FRANK INC. (Hauler Name) | 201 W. 155TH ST. (Hauler Address) | S.W.H. Registration Number 0079018

SO. HOLLAND, IL | 3125963377 (Phone Number) | ILD069506160 (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 So. COLFAX (Address) | 91809102 (Site Number)

GRIFFITH (City) | IND. (State) | 46319 (Zip) | 3127683400 (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: PAINT 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 PAINT SOLVENTS

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: 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: 6-24-82

**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: 06/24/82 (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: 6/24/82 (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. # 4

SITE COPY - PART 3

TO 210 RT-50 GRM 6.24.82

002604

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

0635667

Authorization Number

LITHO STRIP CO. (Company Name) | 7247 S. 78TH AVE (Address) | 312 458 8416 (Phone Number) | 0310270007 (Generator Number)

BRIDGEVIEW (City) | IL (State) | 60455 (Zip) | ILD010278281 (EPA Number)

WASTE HAULER(S)

MR. FRANK INC. (Hauler Name) | 201 W. 155TH ST. (Hauler Address) | S.W.H. Registration Number 0079009

SO. HOLLAND, IL | 3125963377 (Phone Number) | ILD069506160 (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 So. COLFAX (Address) | 91809102 (Site Number)

GRIFFITH (City) | IND (State) | 46310 (Zip) | 3127683400 (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: PAINT 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 PAINT SOLVENTS
HAZARD CLASS: FLAMMABLE
UN1993 (UN or NA Number) | F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE 38,000 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 ____ 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 Kenneth B. Nelson (Authorized Signature) DATE: 8/30/81

**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) Robert Perkins (Authorized Signature) DATE: 09/02/82

(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:

*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 124 E T-63 6PM 9-2-82

002605

IL 532-610
UPC 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

0635676

**TO BE COMPLETED BY WASTE GENERATOR**

Authorization Number ____

Luster Strip (Company Name) | 7247 So 78th Ave (Address) | 3124588416 (Phone Number) | 0310270007 G (Generator Number)

Bridgeview (City) | Ill (State) | 60455 (Zip) | ILD 0102782 81 (EPA Number)

WASTE HAULER(S)

Mr. Frank Inc. (Hauler Name) | 201 W 151st St. (Hauler Address) | S.W.H. Registration Number 0079025

So Holland Ill | 3125963377 (Phone Number) | ILD069506160 (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 So. Colfax (Address) | 91809102 (Site Number)

Griffith (City) | Ind (State) | 46319 (Zip) | 3127683400 (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: Paint 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 |
|---|---|---|---|
| Paint Waste Solvent | Flamable | UN1993 | 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: 004500 (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 Bob Bentson (Authorized Signature) DATE: 11-11-82

**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: 11/12/82 (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

(Authorized Signature) DATE: 11/12/82 (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. # 4

SITE COPY - PART 3

To 125 RT-63 GKM 11.12.82

002608

IL 532-610
LPC 62 3 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**

0635700
Authorization Number Out of State

Lake Steel (Company Name) | 2247 S. 78th Ave. (Address) | 3124588416 (Phone Number) | 03102700007 G (Generator Number)

Bridgeview (City) | Ill. (State) | 60455 (Zip) | ILD010278281 (EPA Number)

WASTE HAULER(S)

Mr. Frank (Hauler Name) | 201 W. 155th St. (Hauler Address) | S.W.H. Registration Number 0079022

to Holland. Ill 3125963377 (Phone Number) | ILD069506160 (EPA Number)

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number

(Phone Number) | (EPA Number)

DESTINATION / DISPOSAL STORAGE OR TREATMENT SITE

American Chem Service (Facility Name) | 420 S. Colfax (Address) | 91808902 (Site Number)

Griffith (City) | Ind (State) | 46319 (Zip) | 3127683400 (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: Scrap 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: Waste Scrap Paint | HAZARD CLASS: Flamable. | UN1993 (UN or NA Number) | F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE 21000 (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~~ 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 Bob Burton (Authorized Signature) DATE 9-8-83

**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) Ronald Bridgewater (Authorized Signature) DATE 09/08/83

(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 QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

(Authorized Signature) DATE 09/08/83

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 210K T-50 6RM 9.8.83

005404

IL 532-610
EPC 62 9 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

0635701
Authorization Number

**TO BE COMPLETED BY WASTE GENERATOR**

Lucks Strip (Company Name) | 7247 So 75th Avenue (Address) | 3124588416 (Phone Number) | 03102700007 G (Generator Number)

Bridgeview (City) | Ill (State) | 60455 (Zip)

ILD0102782 81 (EPA Number)

WASTE HAULER(S)

Mr. Frank Inc. (Hauler Name) | 2010 155th (Hauler Address) | So Holland, Ill.

S.W.H. Registration Number 0079037

3125963377 (Phone Number)

ILD069506160 (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 So. Colfax (Address)

9180+902 (Site Number)

Griffith (City) | Ind (State) | 46319 (Zip) | 3127683430 (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: 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 Waste Solvent | HAZARD CLASS: Flammable | UN1993 (UN or NA Number) | F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE 35000 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 00 4800 (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 Bob Burton (Authorized Signature) DATE: 9-26-83

**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 Bull (Authorized Signature) DATE: 09/26/83 (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:

H Wimple (Authorized Signature) DATE 9/26/83 (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 # 4

SITE COPY - PART 3

To 211K T-58 GRM 9-26-83

0054U5

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

0635738

OUT OF STATE

Authorization Number _____ (8 – 13)

| | | | |
|---|---|---|---|
| Lake Strip (Company Name) | 7247 So 78th Ave. (Address) | 312 458 8416 (Phone Number) | 0310270007 G (Generator Number) |
| Bridgeview (City) | Ill. (State) | 60455 (Zip) | ILD010278281 (EPA Number) |

WASTE HAULER(S)

| | | | |
|---|---|---|---|
| Mr. Frank Inc (Hauler Name) | 2010 W 155th (Hauler Address) | | S.W.H. Registration Number 0079025 |
| | So Holland, Ill | 3125963377 (Phone Number) | ILD069506160 (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 So Culfax (Address) | | | 91808902 (Site Number) |
| Griffith (City) | Ind (State) | 46319 (Zip) | 3127683400 (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: Dirty Reclaim 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 |
|---|---|---|---|
| Paint Waste Solvent | Flamable | UN 1993 | F005 |

WEIGHT FOR D.O.T. USE 35000 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 Bob Bunton (Authorized Signature) DATE: 11-21-83

**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) John Van Vleymen (Authorized Signature) DATE: 11/21/83 (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:

F Dunfee (Authorized Signature) DATE: 11/21/83 (60 – 65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS 800 / 424-8802 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 RT-63 GRM 11.21.83

005406

IL 532 610
EPC 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

0635681
1

**TO BE COMPLETED BY WASTE GENERATOR**

Authorization Number ____ (8–13)

Lake Strip (Company Name) | 7247 So 78th Ave (Address) | 312 458 8416 (Phone Number) | 03 10 27 00 07 G (14 Generator Number 24)

Bridgeview (City) | Ill. (State) | 60455 (Zip) | ILD 010 278 281 (EPA Number)

WASTE HAULER(S)

Mr. Frank Inc (Hauler Name) | 201 W. 155th St. So. Holland, Ill (Hauler Address) | S.W.H. Registration Number 0079019 (25–31)

312 596 3377 (31 Phone Number) | ILD 069 506 160 (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 E. Colfax (Address) | 91809102 (39–46 Site Number)

Griffith (City) | Ind (State) | 46319 (Zip) | 312 768 3400 (Phone Number) | IND 016 360 265 (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: Paint 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 Work Solvent Flammable | HAZARD CLASS. | 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: 004500 (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 Bob Bunton (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) Mike Gaefer (Authorized Signature) | DATE: 01 31 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: 01 31 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. 8 4

SITE COPY - PART 3

To 125 RT-63 6PM 1.31.83

005374

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

0635683

Authorization Number

Litho Strip (Company Name) | 7247 So 78th Ave (Address) | 3124588416 (Phone Number) | 03102700076 (Generator Number)

Bridgeview (City) | Ill (State) | 60455 (Zip) | ILD 010 27P 281 (EPA Number)

WASTE HAULER(S)

Mr. Frank Inc (Hauler Name) | 201 W. 155th St. So Holland, Ill (Hauler Address) | 312 596 3377 (Phone Number) | S.W.H. Registration Number 0079029 | ILD069506160 (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 So. Colfax (Address) | 91809102 (Site Number)

Griffith (City) | Ind (State) | 46319 (Zip) | 3127683400 (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: Scrap 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 |
|---|---|---|---|
| Scrap Paint. | Flamable. | UN1993 | 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: 004700 (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 Bob Benton. (Authorized Signature) DATE: 3-7-83

**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) Donald L Bell (Authorized Signature) DATE: 03/07/83

(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.*

(Authorized Signature) DATE: 3/7/83

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. 4 4

**SITE COPY - PART 3**

To 210E T-50 6PM 3.7.83

0053675

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

0635686 (1–7)

Authorization Number ____ (8–13)

**TO BE COMPLETED BY WASTE GENERATOR**

Lucko Steel (Company Name) | 7247 So 78th Ave (Address) | 3124588416 (Phone Number) | 0310270000 7 (14–24 Generator Number)

Bridgeview (City) | Ill (State) | 60455 (Zip) | ILD010278281 (EPA Number)

WASTE HAULER(S)

M. Frank Inc (Hauler Name) | 201 W. 155th St. (Hauler Address) | S.W.H. Registration Number 0079029 (25–31)

So. Holland, Ill | 3125963377 (Phone Number) | FLD069506160 (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 So Colfax (Address) | 91809102 (39–46 Site Number)

Griffith (City) | Ind. (State) | 46319 (Zip) | 3127983400 (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: Paint 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 Waste Solvent | HAZARD CLASS: Flamable | UN1993 (UN or NA Number) | F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE 35000 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 Bob Bentini (Authorized Signature) | DATE: 4-4-83

**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: 04/04/83 (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: 4483 (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 124 RT-63 4.4.83

005576

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

0635687

Authorization Number Out of State

Litho Strip (Company Name) | 7247 So 78th Ave (Address) | 3124588416 (Phone Number) | 0310270007 G (Generator Number)

Bridgeview (City) | Ill. (State) | 60455 (Zip) | ILD 010278281 (EPA Number)

WASTE HAULER(S)

Mr. Frank (Hauler Name) | 201 W. 155th St. So. Holland Ill (Hauler Address) | S.W.H. Registration Number 0079079

3125963377 (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 So. Colfax (Address) | 91809102 (Site Number)

Griffith (City) | Ind. (State) | 46319 (Zip) | 3127683400 (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: Scrap 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: Waste Scrap Paint. HAZARD CLASS: Flamable 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: 003000 (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 Bob Buntin (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) Ronald Bridgewater (Authorized Signature) DATE: 04/21/83

(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:

[signature] (Authorized Signature) DATE: 04/21/83

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 RT-50 GRM 4.21.83

005347

IL 532-610
PC 52 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

0635689

Authorization Number ____ (8–13)

**TO BE COMPLETED BY WASTE GENERATOR**

| | | | | |
|---|---|---|---|---|
| Lake Shore (Company Name) | 7247 So 78th Ave Address | 3124588416 Phone Number | 0310270007 G (14–24) Generator Number | |
| Bridgeview City | Ill. State | 60455 Zip | ILD010278281 EPA Number | |

WASTE HAULER(S)

| | | | |
|---|---|---|---|
| Mr. Frank Hauler Name | 201 W. 1st St. Hauler Address So Holland, Ill | 3125963377 Phone Number | S.W.H. Registration Number 0079027 (25–31) |
| | | | ILD069506160 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 Service (Facility Name) | 420 So. Colfax Address | | | 91809102 (39–46) Site Number |
| Griffith City | Ind. State | 46319 Zip | 3127683400 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: Scrap 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 Scrap Paint Flamable | 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: 003000 (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 Pat Santin (Authorized Signature) DATE 5-13-83

**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) Bauch (Authorized Signature) DATE: 05/13/83 (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: 5/13/83 (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 / 426-2[illegible]

DISTRIBUTION PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV. [illegible]

SITE COPY - PART 3

210 F T-50 GRM 5-13 83

005048

12-610
9-81

**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

0635692

Authorization Number ____

Lithe Strip (Company Name) | 7247 So 78th Ave. (Address) | 3124528416 (Phone Number) | 0310270007 (Generator Number)

Bridgeview (City) | Ill. (State) | 60455 (Zip) | ILD010278281 (EPA Number)

WASTE HAULER(S)

Mr. Frank (Hauler Name) | 201 W 155th St (Hauler Address) | S.W.H. Registration Number 0079029

So Holland, Ill. | 3125963377 (Phone Number) | ILD069506160 (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 So. Colfax (Address) | 91809102 (Site Number)

Griffith (City) | Ind. (State) | 46319 (Zip) | 3127683400 (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: Scrap 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: Waste Scrap Paint HAZARD CLASS: Flamable UN1993 (UN or NA Number) F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE 21000 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.) 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 Bob Bunton (Authorized Signature) DATE: 5-26-83

**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) Michael Martin (Authorized Signature) DATE 05/26/83

(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 05/26/83

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

T0210 K T-50 EPM 5-26-83

005349

IL 532 610
LPC 62 6 '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

0635693

Authorization Number ____ (8–13)

| | | | |
|---|---|---|---|
| Lithe Strip (Company Name) | 7247 So 78th Ave (Address) | 3124588416 (Phone Number) | 0310270007 G (Generator Number) |
| Bridgeview (City) | Ill (State) | 60455 (Zip) | ILD010278281 (EPA Number) |

WASTE HAULER(S)

| | | | |
|---|---|---|---|
| Mr. Frank Inc (Hauler Name) | 201 W. 155th (Hauler Address) | | S.W.H. Registration Number 0079 |
| | So Holland Ill | 3125963377 (Phone Number) | ILD069506160 (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) | | | 91809102 (Site Number) |
| Griffith (City) | Ind (State) | 46319 (Zip) | 3127683400 (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: Paint 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 Waste Solvent HAZARD CLASS: Flamable UN1993 (UN or NA Number) F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE 35000 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 Bob Bunton (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) Miguel [illegible] (Authorized Signature) DATE: 06 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:

[illegible] (Authorized Signature) DATE: 06 09 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 # 4

SITE COPY - PART 3

To 125 E T-63 GPM 6-9-83

005400

IL 532 610
IPC 62 8-P1

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

0635696

Authorization Number

Litho Strip (Company Name) | 7247 S. 78th Ave. (Address) | 3124588416 (Phone Number) | 0310270007 G (Generator Number)

Bridgeview (City) | Ill. (State) | 60455 (Zip) | ILD010278281 (EPA Number)

WASTE HAULER(S)

Mr. Frank (Hauler Name) | 201 W. 155th St. (Hauler Address) | S.W.H. Registration Number 0079

So Holland, Ill | 3125963377 (Phone Number) | ILD069506160 (EPA Number)

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number 009

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | 420 S Colfax (Address) | 91808902 (Site Number)

Griffith (City) | Ind. (State) | 46319 (Zip) | 3127683400 (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: Scrap 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: Waste Scrap Paint HAZARD CLASS: Flamable. UN1993 (UN or NA Number) F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE 21000 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.) 1

METHOD OF SHIPMENT (Circle One) (DRUMS ____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) 630

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] Bob Bantin (Authorized Signature) DATE: 6-29-83

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) G. Robertson (Authorized Signature) DATE: / /

(2) (Authorized Signature) DATE: 06 30 83.

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: 6/30/83

COMMENTS OR SPECIAL INSTRUCTIONS: 2:30 pm. T-50 to 211 E 6/30/83 Jm [signature]

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

005401

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

0635698

Authorization Number

| | | | |
|---|---|---|---|
| Lake Strip (Company Name) | 7247 S. 78th Ave. (Address) | 3124588416 (Phone Number) | 0310270007 G (Generator Number) |
| Bridgeview (City) | Ill. (State) | 60455 (Zip) | ILD 010278281 (EPA Number) |

WASTE HAULER(S)

| | | | |
|---|---|---|---|
| Mr. Frank (Hauler Name) | 201 W. 155th St. (Hauler Address) So Holland Ill | 3125963377 (Phone Number) | S.W.H. Registration Number 0079001 / ILD069506160 (EPA Number) |
| (Hauler Name) | (Hauler Address) | (Phone Number) | S.W.H. Registration Number / (EPA Number) |

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

| | | | | |
|---|---|---|---|---|
| American Chem. Service (Facility Name) | 420 So Colfax (Address) | | | 91808902 (Site Number) |
| Griffith (City) | Ind (State) | 46319 (Zip) | 3127683400 (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: Scrap 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: Waste Scrap Paint. HAZARD CLASS: Flamable. UN1993 (UN or NA Number) F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE 21000 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 Bob Bantin (Authorized Signature) DATE: 8-3-83

**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) J. Wallis (Authorized Signature) DATE: 8/3/83 (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) [signature] DATE: 8/3/83 (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. # 4

SITE COPY - PART 3

TO211K T-50 GRM 8-3-83

005402

# STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0635707

Authorization Number

| (Company Name) | Address | Phone Number | Generator Number |
|---|---|---|---|
| [illegible] Strip | 7247 S 78th Ave | 3124588416 | 0310270007 G |

| City | State | Zip | EPA Number |
|---|---|---|---|
| Bridgeview | Ill | 60455 | ILD010278281 |

WASTE HAULER(S)

| Hauler Name | Hauler Address | Phone Number | S.W.H. Registration Number / EPA Number |
|---|---|---|---|
| Mr Frank Inc. | 201, W 155th So Holland Ill | 3125963377 | 0079009 / ILD069506160 |
| | | | |

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

| (Facility Name) | Address | Site Number | City | State | Zip | Phone Number | EPA Number |
|---|---|---|---|---|---|---|---|
| American Chemical Service | 420 S. Colfax | 91808902 | Griffith | Ind | 46319 | 3127683400 | IND016360265 |
| | | | | | | | |

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 Waste Solvent HAZARD CLASS: Flamable UN 1993 (UN or NA Number) F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE 35000 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 ____ 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 Bob Bunton (Authorized Signature) DATE: 8-17-83

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) [signature] (Authorized Signature) DATE: 08/18/83

(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 8/18/83

COMMENTS OR SPECIAL INSTRUCTIONS 12:35 pm 2:30 pm

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 E T-63 GRM 8.18.83

005403

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

0635742 (1-7)
OUT OF STATE
Authorization Number (8-13)

Lucks Strip. (Company Name) | 2247 So. 78th Ave. (Address) | 312 458 8416 (Phone Number) | 0310270007 G (14 Generator Number 24)
Bridgeview (City) | Ill (State) | 60455 (Zip) | ILD 010278281 (EPA Number)

WASTE HAULER(S)

M. Frank (Hauler Name) | 2010 W 155th (Hauler Address) | S.W.H. Registration Number 0079001 (25-31)
So 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 Chem. Serv. (Facility Name) | 440 S Colfax (Address) | 91808902 (39 Site Number 46)
Griffith (City) | Ind (State) | 46319 (Zip) | 312 683 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: Duty Pollam 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 Waste Solvent. HAZARD CLASS: Flamable 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: 003000 (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: 2-15-84

**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: 02 15 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: 02 15 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 T-50 GRN 2-15-84 007073

IL 532-6TO
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**

0635744
out of State
Authorization Number (8–13)

Lucks Strip (Company Name) | 7447 So 78th Ave (Address) | 312 458 8416 (Phone Number) | 0310270007 (Generator Number 6–24)

Bridgeview (City) | Ill. (State) | 60455 (Zip) | ILD 010278281 (EPA Number)

WASTE HAULER(S)

Mr. Frank (Hauler Name) | 2010 W 155th, So Holland, Ill (Hauler Address) | S.W.H. Registration Number 0079001 (25–31) | 3125963377 (Phone Number) | ILD069506160 (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 So Colfax (Address) | 91808902 (Site Number 39–46)

Griffith (City) | Ind (State) | 46319 (Zip) | 3127683400 (Phone Number) | IND016360265 (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: Dirty Lebcam 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 Waste Solvent Flamable | HAZARD CLASS: | UN1993 (UN or NA Number) | F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE 20,000 LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 002,500 (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: 2-15-84

**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) [signature] (Authorized Signature) DATE: 02 15 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:

[signature] (Authorized Signature) DATE: 02 15 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 125 FT-636RM 2.15.84

007074

IL 532-610
LPC 62 8/81

**TO BE COMPLETED BY WASTE GENERATOR**

# STATE OF ILLINOIS

A29333 Rel 2

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0635747

Authorization Number: Out of State

| (Company Name) | Address | Phone Number | Generator Number |
|---|---|---|---|
| Litho Strip | 7247 S. 78th Avenue | 3124588416 | 0310270007 G |

| City | State | Zip | EPA Number |
|---|---|---|---|
| Bridgeview | Ill | 60455 | ILD010278281 |

WASTE HAULER(S)

| Hauler Name | Hauler Address | S.W.H. Registration Number |
|---|---|---|
| Mr. Frank | 201 W. 155th St. So Holland, Ill | 0079001 |

| Phone Number | EPA Number |
|---|---|
| 3125963377 | ILD069506160 |

| Hauler Name | Hauler Address | S.W.H. Registration Number |
|---|---|---|
| | | |

| Phone Number | EPA Number |
|---|---|
| | |

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

| (Facility Name) | Address | Site Number |
|---|---|---|
| American Chem Service | 420 So. Colfax | 91808902 |

| City | State | Zip | Phone Number | EPA Number |
|---|---|---|---|---|
| Griffith | Ind | 46319 | 3127683400 | IND 016300265 |

| Alternate (Facility Name) | Address | Site Number |
|---|---|---|
| | | |

| City | State | Zip | Phone Number | EPA Number |
|---|---|---|---|---|
| | | | | |

**TO BE COMPLETED BY WASTE GENERATOR**

WASTE NAME: Scrap 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 Scrap Paint | Flamable | UN 1993 | F005 |

WEIGHT FOR D.O.T. USE 21000 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.) 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 Bob Buntin (Authorized Signature) DATE: 4-18-84

**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) Mike Rufer (Authorized Signature) DATE: 04 18 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: 04 18 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 T0210 E T-50 GRW 4-18-84

007075

IL 532-610 T
LPC 62 8

TO ... ED BY
WAS... GE... ATOR

# STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0635748

Authorization Number out of State

Litho Strip (Company Name) | 7247 So 78th Ave (Address) | 3124588416 (Phone Number) | 0310270007 G (Generator Number)

Bridgeview (City) | Ill (State) | 60455 (Zip) | ILD 010278281 (EPA Number)

WASTE HAULER(S)

Mr Frank (Hauler Name) | 2010 W 155th (Hauler Address) | S.W.H. Registration Number 0079011

So Holland Ill | 3125963377 (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 Ser. (Facility Name) | 420 So Olfax (Address) | 91808902 (Site Number)

Griffith (City) | Ind (State) | 46319 (Zip) | 3127633400 (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: Dirty Reclaim 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 Waste Solvent

HAZARD CLASS: Flamable

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: 4200 (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 Bob Bunton (Authorized Signature) DATE: 4-27-84

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) Gary Deress (Authorized Signature) DATE: 4-27-84

(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) [signature] DATE: 4-27-84

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

To 125 RT-63 GRM 4-27-84

007076

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**

0635753 (1–7)

Authorization Number: out of state (8–13)

Lake Strip (Company Name) | 7247 S. 78th Ave (Address) | 3124588416 (Phone Number) | 0310270007 G (14 Generator Number 24)

Bridgeview (City) | Ill (State) | 60455 (Zip) | ILD 010278281 (EPA Number)

WASTE HAULER(S)

Mr Trash (Hauler Name) | 2010 W 15th, So Holland, Ill (Hauler Address) | 3125963377 (Phone Number) | S.W.H. Registration Number 0079004 (25–31) | ILD069506160 (EPA Number)

(Hauler Name) | (Hauler Address) | (Phone Number) | S.W.H. Registration Number (32–38) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chem Service (Facility Name) | 420 S. Colfax (Address) | 91808902 (39 Site Number 46)

Griffith (City) | Ind (State) | 46319 (Zip) | 3127683400 (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: Dirty Reclaim 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 Flamable | HAZARD CLASS: 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: 003000 (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: Bob Benton (Authorized Signature) | DATE: 6-13-84

**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) _____ (Authorized Signature) | DATE: 06/13/84 (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 QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) | DATE: 8/13/84 (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 3 212 E T-50

0070777

IL 532-61C
LPC 62 8/8:

**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

0986147 (1–7)

Authorization Number: out of State (8–13)

Lubs Strip (Company Name) | 7446 78th Ave (Address) | 312 458 2416 (Phone Number) | 0310270007 G (14 Generator Number 24)

Bridgeview (City) | Ill (State) | 60455 (Zip) | ILD 010278281 (EPA Number)

WASTE HAULER(S)

Mr Frank (Hauler Name) | 2010 W 15th (Hauler Address) | S.W.H. Registration Number 0029001 (25–31)

So 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 Chem Serv (Facility Name) | 420 S Colfax (Address) | 9108902 (39 Site Number 46)

Griffith (City) | Ind. (State) | 46319 (Zip) | 312 763 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: Dirty Petroleum 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 Waste Solvent Flammable | HAZARD CLASS: | UN 1993 (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: 002600 (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 Bob Bannister (Authorized Signature) DATE: 6-13-84

**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) Joe Weber (Authorized Signature) DATE: 06 13 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: 6/13/84 (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 212E T-SO

007078

IL 532-610
UPC 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

0944233

Authorization Number: out of state

Lake Strip (Company Name) | 7247 So 78th Ave (Address) | 312 458 8416 (Phone Number) | 0310270007 G (Generator Number)

Bridgeview (City) | Ill (State) | 60455 (Zip) | ILD 0102782 81 (EPA Number)

WASTE HAULER(S)

Mr Frank (Hauler Name) | 2010 W 155th (Hauler Address)

So Holland Ill | 3125963377 (Phone Number) | S.W.H. Registration Number 0079/021 | IL0069506160 (EPA Number)

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number | (Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chem Service (Facility Name) | 420 S Wolf (Address) | 9186 8902 (Site Number)

Griffith (City) | Ind (State) | 46319 (Zip) | 312 768 3400 (Phone Number) | IND 016 360 265 (EPA Number)

(Alternate (Facility Name)) | (Address) | (Site Number)

(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

**TO BE COMPLETED BY WASTE GENERATOR**

WASTE NAME: Dirty Reclaim 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 Waste Solvent | HAZARD CLASS: Flamable | UN1993 (UN or NA Number) | D001 (EPA HW Number)

WEIGHT FOR D.O.T. USE 44,000 (LBS / TONS (circle one)) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 00560 | (1 GALLONS / 2 CU. YDS. (Circle One)) /

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: 8-22-84

**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) [signature] (Authorized Signature) DATE 08/22/84

(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____

[signature] (Authorized Signature) DATE: 8/22/84

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**

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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. ILD010278281 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
Lucho Strip
7247 S 78th Ave Bridgeview, Ill 60455

4. Generator's Phone ( 312 ) 458-8416

A. Illinois Manifest Document Number IL 1231471

B. Illinois Generator's ID 0310275007

5. Transporter 1 Company Name M 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 Chem Service
420 S. Colfax
Griffith, Ind. 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 | Waste No. |
|---|---|---|---|---|---|---|---|
| a. | | Dirty Reclam Solvent | | | | | EPA HW Number D001 |
| | X | Paint Waste Solvent Flamable UN1993 | 1 | TP | 05000 | 1 | Authorization Number [illegible] |
| 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 governmental regulations, and Illinois regulations.

| Printed/Typed Name | Signature | Date Month Day Year |
|---|---|---|
| Bob Buntin | Bob Buntin | 11 9 84 |

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date Month Day Year |
|---|---|---|
| CARL E. MILBURN | Carl E. Milburn | 11 9 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 | Signature | Date Month Day Year |
|---|---|---|
| F PUNFEE | + Dunfee | 11 9 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

126K 1-63

007080

**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 D0 1 0 2 7 8 2 8 1 — 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
LITHO STRIP CO
7247 S 78th AVE BRIDGEVIEW, ILL 60455

4. Generator's Phone ( 312 ) 458-8416

A. Illinois Manifest Document Number: IL 1231499
B. Illinois Generator's ID: 0 2 1 0 2 7 5 0 0 7

5. Transporter 1 Company Name: MR. FRANK
6. US EPA ID Number: I L D 0 6 9 5 0 6 1 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
GRIFFITH, IND. 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

| | 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 | DIRTY RECLAIM SOLVENT PAINT WASTE SOLVENT FLAMABLE UN1993 | 0 0 1 | TT | 0 2500 | 1 | EPA HW Number: D0 0 1 Authorization Number: OUT OF STAT |
| 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 governmental regulations, and Illinois regulations.

Printed/Typed Name: BOB BUNTIN — Signature: Bob Buntin — Date: Month 12 Day 20 Year 84

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JOE WEBER — Signature: Joe Weber — Date: Month 12 Day 20 Year 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 12 Day 20 Year 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 3 212 K T-50 9000 Ato 2% Cl.

007081

**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 7-31-88

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. ILDD1027828 | Manifest Document No. 100001

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
Litho Strip Co.
7247 S. 78th Av. Bridgeview IL 60455

4. Generator's Phone ( 312 ) 458-8416

A. Illinois Manifest Document Number IL 1138845

B. Illinois Generator's ID 0210215007

5. Transporter 1 Company Name: MR. FRANK

6. US EPA ID Number: ILD069506100

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
420 S. Colfax
Griffith IND 46319

10. US EPA ID Number: IND016360265

G. Illinois Facility's ID 0718009002

H. Facility's Phone (219) 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. | DIRTY - RECLAIM SOLVENT PAINT WASTE SOLVENT FLAMABLE UN1993 | X | 001 | TT | 028006 | | 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

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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: Bob Rustin — Signature: Bob Rustin J.H. — Date: Month Day Year 12 20 84

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: JOE WEBER. — Signature: Joe Weber — Date: Month Day Year 12 20 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: F. DUNFEE — Signature: F Dunfee — Date: Month Day Year 12 20 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

210 R T-50

007082

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.: IL D0102782 81 — 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
LITHO STRIP CO
7247 S 78th AVE. BRIDGEVIEW, ILL 60455

4. Generator's Phone ( 312 ) 458-8416

A. Illinois Manifest Document Number: IL 1283391

B. Illinois Generator's ID: 0310275007

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 CHEM SERVICE
420 S COLFAX
GRIFFITH, IND 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) | 12. Containers No. | Type | 13. Total Quantity | 14. Unit Wt/Vol | Waste No. |
|---|---|---|---|---|---|---|
| a. | HM X DIRTY ~~RKKAIM~~ RECLAIM SOLVENT FLAMMABLE LIQUID PAINT WASTE SOLVENT FLAMABLE UN1993 | 001 | TT | 03000 | 1 | EPA HW Number: 0001 OUT OF STATE |
| 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 governmental regulations, and Illinois regulations.

Printed/Typed Name: BOB BUNTIN — Signature: Bob Buntin — Date: Month Day Year 03 25 85

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: RKN WHITE — Signature: [signature] — Date: Month Day Year 03 25 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: FDUNFEE — Signature: [signature] — Date: Month Day Year 3 25 85

GENERATOR / TRANSPORTER / FACILITY

IN ILLINOIS: 217 / 782-3637 *2-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 E T-50 00[illegible]

TO BE COMPLETED BY WASTE GENERATOR

# STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0068062

WASTE GENERATOR

Authorization Number 197003

Litho-Strip (Company Name) | 7247 S. 78th Ave. (Address)

Bridgeview (City) | Ill. (State) | 60455 (Zip)

0316000013 (Generator Number)

WASTE HAULER(S)

(1) Mr. Frank Inc. (Hauler Name) | 201 W. 155th St. So. Holland, Ill. (Hauler Address)

S.W.H. Registration Number 0029009

(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)

Griffith (City) | Ind. (State) | 46319 (Zip)

9180890 2 (Site Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint 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: 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: 6-6-80 Art Wiedmann (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 005000 (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) _____ (Authorized Signature) DATE: 06/06/80

(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: 6/6/80

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

0000111

TO BE COMPLETED BY WASTE GENERATOR

# STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0068071

WASTE GENERATOR

Authorization Number 197003

Litho-Strip (Company Name) — 7247 S 78th Ave (Address)

Bridgeview (City) — Ill. (State) — 60455 (Zip)

0316000013 G (Generator Number)

WASTE HAULER(S)

(1) Mr. Frank Inc (Hauler Name) — 201 W 155th St. So. Holland, Ill. (Hauler Address) — S.W.H. Registration Number 00790023

(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) — Ind. (State) — 46319 (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint 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: 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: 9-3-80 — Arthur J. Wilhelmsen (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 005000 — 1 GALLONS (Circle One) 2 CU. YDS. 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: 09/03/80

(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: 9/3/80

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

0000110

TO BE COMPLETED BY WASTE GENERATOR

# STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0160094
1 7

WASTE GENERATOR

Authorization Number 192003
8 13

Litho Strip (Company Name) | 7247 S. 78th Ave. (Address)
Bridgeview (City) | Ill. (State) | (Zip)

0316000013 G
14 Generator Number 24

WASTE HAULER(S)

(1) Mr. Frank Inc. (Hauler Name) | 201 W 155th St. So. Holland, Ill. (Hauler Address)
S.W.H. Registration Number 0029009
25 31

(2) (Hauler Name) | (Hauler Address)
S.W.H. Registration Number
32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | 420 S. Colfax (Address)
9180890
39 Site Number 46
Griffith (City) | Ind. (State) | (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint 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: 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: 3-27-80

Art Wilkinson (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 5000 (47 52)
(1 GALLONS / 2 CU. YDS.) (Circle One) (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) Gary Inman (Authorized Signature) DATE: 03 27 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:

D. Winkle (Authorized Signature) DATE: 3 27 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

TO BE COMPLETED BY WASTE GENERATOR

# STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0068096 (1–7)

Authorization Number 997003 (8–13)

LITHO STRIP (Company Name) | 7247 S. 78TH AVE. (Address)
BRIDGEVIEW (City) | ILL. (State) | (Zip)

0316000013 (14–24) Generator Number

WASTE HAULER(S)

(1) MR. FRANK INC. (Hauler Name) | 201 W. 155TH St. So. HOLLAND, ILL. (Hauler Address)
S.W.H. Registration Number 0079019 (25–31)

(2) (Hauler Name) | (Hauler Address)
S.W.H. Registration Number (32–38)

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | 420 S. COLFAX (Address) | (39–46 Site Number)
GRIFFITH (City) | IND. (State) | (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT 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: 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: 1/9/80

(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 8000 (47–52) (1) GALLONS (2) CU. YDS. (Circle One) (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) (Authorized Signature) DATE: 01 09 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:

(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

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

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TO BE COMPLETED BY WASTE GENERATOR

**STATE OF ILLINOIS**
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0173208

WASTE GENERATOR

Authorization Number 197003

Litho Strip (Company Name) 7247 S. 78th AVE (Address) Cicero

Bridgeview (City) Ill. (State) (Zip)

0316000013 (Generator Number)

WASTE HAULER(S)

(1) Apollo Liquid Waste (Hauler Name) 1715 Rockland Rd (Hauler Address) Lane Bluff, Ill. S.W.H. Registration Number 01160

(2) (Hauler Name) (Hauler Address) S.W.H. Registration Number 0116004

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) 420 S. Colfax (Address) (Site Number)

Griffith (City) Ind (State) (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint 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: 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: 11/7/80 (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 005000 (1 GALLONS / 2 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) Harry Swanson (Authorized Signature) DATE: 11/7/80

(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: 11/7/80

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

2000109

TO BE COMPLETED BY
WASTE GENERATOR

# STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0068072

WASTE GENERATOR

Authorization Number 197003

Litho-Strip (Company Name) — 7247 S. 78th Ave. (Address)

Bridgeview (City) — Ill. (State) — 60455 (Zip)

0316000013 (Generator Number)

Fed. EPA # ILD 010278281

WASTE HAULER(S)

(1) Mr. Frank Inc. (Hauler Name) — 201 W. 155th St (Hauler Address) — S.W.H. Registration Number 0079023

So. Holland, Ill. — ILD 069506160

(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) — Ind. (State) — 46319 (Zip) — IND 016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Paint 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: [illegible]

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

UN1993

DATE: 5-1-81 — Arthur J. Wilhelmsen (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: 05/01/81 (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: 5/1/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: FTO 124E 5/1/81 T-63 JPM

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

001172

TO BE COMPLETED BY WASTE GENERATOR

# STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0068085

WASTE GENERATOR

Authorization Number 197003

Litho-strip Co (Company Name) 7247 S 78th Ave (Address)

Bridgeview (City) ILL (State) 60455 (Zip)

0316000013 (Generator Number)

Fed EPA ILD 010278281

WASTE HAULER(S)

(1) MR FRANK INC (Hauler Name) 201 W 155th St (Hauler Address)

S.W.H. Registration Number 0079018

(2) _____ (Hauler Name) So Holland ILL (Hauler Address)

S.W.H. Registration Number ILD 069506160

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

American Chem Service (Facility Name) 420 S Colfax (Address)

Griffith (City) IND (State) 46319 (Zip)

9180890 2 (Site Number)

IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint 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: 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: 10/16/81 (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 005000 (47–52) (1) GALLONS (2) CU. YDS (Circle One) (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) _____ (Authorized Signature) DATE: 10/16/81 (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: 10/16/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: To 125 ☒ T-63 10/16/81 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

001174

TO BE COMPLETED BY WASTE GENERATOR

**STATE OF ILLINOIS**
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0116082

Authorization Number 197003

WASTE GENERATOR

Litho-Strip (Company Name) 7247 S. 78TH Ave (Address)
Bridgeview (City) ILL (State) 60455 (Zip)

0316000013 (Generator Number)

WASTE HAULER(S)

(1) MR FRANK INC (Hauler Name) 201 W 155TH St (Hauler Address) So Holland ILL
S.W.H. Registration Number 0079009
ILD069506160

(2) _____ (Hauler Name) _____ (Hauler Address)
S.W.H. Registration Number _____

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chem Service (Facility Name) 420 S. Colfax (Address) 91808902 (Site Number)
Griffith (City) Ind (State) 46319 (Zip)
IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint 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: 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 10/7/81 (Authorized Signature) [signature] FPOS

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 004800 (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 10/07/81

(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 10/7/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 126E T-63 10/7/81 [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

001173

TO BE COMPLETED BY WASTE GENERATOR

# STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0116083

WASTE GENERATOR

Authorization Number 197003

Litho Strip Co (Company Name) 7247 S. 78TH Ave (Address)
Bridgeview (City) Ill (State) 60455 (Zip)
0316000013 G (Generator Number)

WASTE HAULER(S)

(1) Mr Frank (Hauler Name) 201 S 155TH St (Hauler Address)
S.W.H. Registration Number 0079 021

(2) _____ (Hauler Name) So Holland Ill (Hauler Address)
S.W.H. Registration Number ILD069506160

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Services (Facility Name) 420 S Cedar (Address)
Griffith (City) Ind (State) 46319 (Zip)
918008902 (Site Number)
IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paints & 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: 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 11-24-81 (Authorized Signature)

WASTE HAULER*

QUANTITY OF ~~WASTE~~ RECEIVED: 005000 (1 GALLONS / LBS. / 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) Donald J Buet (Authorized Signature) DATE 11/24/81

(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 11 24 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

SITE COPY - PART 3

To 124 K T-63 GLM 11/24/81

001176

TO BE COMPLETED BY WASTE GENERATOR

# STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0116100

WASTE GENERATOR

Authorization Number 197003

Little Strip (Company Name) 7247 S 78th Ave Address

Bridgeview City IL State 60455 Zip

0316000013 Generator Number

WASTE HAULER(S)

(1) MR FRANK Hauler Name 201 W 155th St. Hauler Address

S.W.H. Registration Number 0-19009

(2) _____ Hauler Name So Holland IL Hauler Address

ILD 069506160 S.W.H. Registration Number

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

American Chem Service (Facility Name) 4205 Colfax Address

9180894 Site Number

Griffith City IND State 46319 Zip

IND 046360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint + 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: 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: 11/4/81 (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED 004800 (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) _____ (Authorized Signature) DATE: 11/04/81

(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: 11/4/81

COMMENTS OR SPECIAL INSTRUCTIONS: _____

782-3637 · 24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS · OUTSIDE ILLINOIS 800-424-8802

PART 1 GENERATOR PART 2 IEPA PART 3 SITE PART 4 HAULER PART 5 IEPA PART 6 GENERATOR

E COPY - PART 3

To 124 K T-63 GAL 11/4/81

001175

TO BE COMPLETED BY WASTE GENERATOR

# STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0122137

Authorization Number 197003

WASTE GENERATOR

Litho Strip Co (Company Name) 7247 S 18th Ave (Address)
Bridgeview (City) Ill (State) 60455 (Zip)

0316000013 (Generator Number)

WASTE HAULER(S)

(1) Mr Frank (Hauler Name) 201 W 155 St TH (Hauler Address) S.W.H. Registration Number 0079029

(2) (Hauler Name) So Holland Ill (Hauler Address) Ild 069506160 S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) 420 S Colfax (Address) 918008902 (Site Number)
Griffith (City) Ind (State) 46319 (Zip) Ind 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paints or 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: 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 12-10-81 (Authorized Signature) 12/E005

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 004800 (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) Don A H Brett (Authorized Signature) DATE: 12/10/81

(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: 12/10/81

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

SITE COPY - PART 3

To 125 K T-63 GRM 12/10/81

001177

**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 010278281 — 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: LITHO STRIP CO. 7247 So. 78TH AVE. BRIDLEVIEW, IL. 60455

4. Generator's Phone (312) 458-8416

A. Illinois Manifest Document Number: IL 1283392

B. Illinois Generator's ID: 0310279097

5. Transporter 1 Company Name: MR. FRANK

6. US EPA ID Number: ILD 062506160

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 So. COLFAX GRIFFITH, IND 46319

10. US EPA ID Number: IND 016360265

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 | DIRTY RECLAIM SOLVENT UN 1993 PAINT WASTE SOLVENT FLAMABLE LIQUID | 001 | TT | 02800 | 1 | EPA HW Number: [illegible] Authorization Number: [illegible] |
| 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 governmental regulations, and Illinois regulations.

| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| KENNETH B. NELSON | Kenneth B. Nelson | 03 25 85 |

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| RICH WHITE | Rich White | 03 25 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 | Signature | Date (Month Day Year) |
|---|---|---|
| F DUNFEE | F Dunfee | 3 25 85 |

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 RT-63

009478

**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.: ILD010278281 — 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: Lilho Strip, 7247 So. 78th Ave. Bridgeview, Ill. 60455

4. Generator's Phone (312) 458-8416

A. Illinois Manifest Document Number: IL 1283413

B. Illinois Generator's ID: 0310270004

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 So. Colfax, Griffith, Ind 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) | 12. Containers No. | Type | 13. Total Quantity | 14. Unit Wt/Vol | 15. Waste No. |
|---|---|---|---|---|---|---|
| a. | Scrap Paint UN 1993 | | | | | EPA HW Number: D001 |
| | X WASTE FLAMMABLE LIQUID Flamable Liquid | 001 | TT | 02800 | 1 | Authorization Number: [illegible] |
| 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

for 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 governmental regulations, and Illinois regulations.

| Printed/Typed Name | Signature | Date Month Day Year |
|---|---|---|
| Bob Buntin | Bob Buntin | 05 07 85 |

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date Month Day Year |
|---|---|---|
| RICH WHITE | [signature] | 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 | Signature | Date Month Day Year |
|---|---|---|
| FDUNFEE | [signature] | 5 7 85 |

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

D001 210K T-50

009479

**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 010278281 — 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
LITHO STRIP
7247 S. 78th Ave. Bridgeview, IL 60455

4. Generator's Phone (312) 458-8416

A. Illinois Manifest Document Number: IL 1339877

B. Illinois Generator's ID: 03 1 0 27 00 0 4

5. Transporter 1 Company Name: Mr. Frank

6. US EPA ID Number: ILD069506160

C. Illinois Tranporter's ID: 0 07 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
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) | 12. Containers No. | Type | 13. Total Quantity | 14. Unit Wt/Vol | Waste No. |
|---|---|---|---|---|---|---|
| a. | SCRAP PAINT UN 1993 WASTE FLAMMABLE LIQUID | 001 | tt | 05500 | | EPA HW Number: D001 Authorization Number: out of sta |
| b. | | | | | | EPA HW Number: Authorization Number: |
| c. | | | | | | EPA HW Number: Authorization Number: |
| d. | | | | | | EPA HW Number: Authorization Number: |

J. Additional Descriptions for Materials Liste

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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: GAIL REH — Signature: [signature] — Date: Month 07 Day 09 Year 8

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: DWAYNE SHAW — Signature: [signature] — Date: Month 7 Day 11 Year 8

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: ALVIN WHITAKER — Signature: [signature] — Date: Month 7 Day 11 Year 88

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

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FACILITY COPY - PART 3

211 FF-50

009480

**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.: IL0010272281 — Manifest Document No.: [illegible]
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: LITHO STRIP, 7247 S. 78th Ave Bridgeview, Il 60455
4. Generator's Phone (312) 458 8416
5. Transporter 1 Company Name: Mr. Frank
6. US EPA ID Number: IL0069506160
7. Transporter 2 Company Name:
8. US EPA ID Number:
9. Designated Facility Name and Site Address: American Chemical Service, 4205 S. Cliff, Griffith, Ind 46319
10. US EPA ID Number: IND016360265

A. Illinois Manifest Document Number: IL 1339891
B. Illinois Generator's ID: 0310270004
C. Illinois Tranporter's ID: 00179
D. (312) 596-3377 Transporter's Phone
E. Illinois Transporter's ID:
F. ( ) Transporter's Phone
G. Illinois Facility's ID: [illegible]
H. Facility's Phone: (312) [illegible]

| | 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. | SCRAP PAINT UN1993 WASTE SOLVENT N.O.S. WASTE FLAMMABLE LIQUID | X | 001 | TT | 03900 | | EPA HW Number: [illegible] Authorization Number: [illegible] |
| 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

[illegible]

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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) |
|---|---|---|
| GAIL REH | [signature] | 08 14 85 |

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| Dwayne Shaw | [signature] | 08 14 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 | Signature | Date (Month Day Year) |
|---|---|---|
| F DUNFEE | [signature] | 8 14 85 |

GENERATOR / TRANSPORTER / FACILITY

IN ILLINOIS: 217 / 782-3637 "24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS" OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

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FACILITY COPY - PART 3

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**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.: ILD010278281 — 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
Litho Strip Company
7247 S. 78th Ave., Bridgeview, Ill. 60455

4. Generator's Phone ( 312 ) 458-8416

A. Illinois Manifest Document Number: IL 1418651

B. Illinois Generator's ID: 0310270004

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 S. Colfax
Griffith, Ind. 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) | 12. Containers No. | Type | 13. Total Quantity | 14. Unit Wt/Vol | Waste No. |
|---|---|---|---|---|---|---|
| a. | X SCRAP PAINT N.O.S. WASTE FLAMMABLE LIQUID UN 1993 | 001 | TT | 03000 | 1 | EPA HW Number: 0001 Authorization Number: OUT OF STATE |
| 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
UNLESS I AM A SMALL QUANTITY GENERATOR WHO HAS BEEN EXEMPTED BY STATUTE OR REGULATIONS FROM THE PERFORMANCE OF 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 PRACTICAL 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 ENVIRONMENT

K. Handling Codes for Wastes Listed Above
1 = Gallons 2 = Cubic Yards

15. Special Handling Instructions and Additional Information

FOR INCENERATION

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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 | Signature | Date (Month Day Year) |
|---|---|---|
| Gail Reh | Gail Reh | 09 06 85 |

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| JOE WEBER | Joe Weber | 09 06 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) |
|---|---|---|
| FDUNFEE | FDunfee | 9 6 85 |

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. #6

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 9000 BTU 1 Y.C.

009482

**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. ILD010278281 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
Litho Strip Company
7247 S. 78th Ave., Bridgeview, Ill. 60455

A. Illinois Manifest Document Number IL 1339945

B. Illinois Generator's ID 0310275007

4. Generator's Phone ( 312 ) 458-8416

5. Transporter 1 Company Name: Mr. Frank

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 Chem. Service
420 S. Colfax
Griffith, Ind. 46319

10. US EPA ID Number: IND016360265

G. Illinois Facility's ID 1918089000 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 | I. Waste No. |
|---|---|---|---|---|---|---|
| a. | X DIRTY RECLAIM SOLVENT - FLAMMABLE LIQUID WASTE SOLVENT - FLAMABLE - UN1993 | 001 | TT | D4200 | 1 | EPA HW Number D000 Authorization Number OUT OF STATE |
| 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
UNLESS I AM A SMALL QUANTITY 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 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) |
|---|---|---|
| Gail Reh | | 09 19 85 |

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| John VanVlymen | John VanVlymen | 09 20 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) |
|---|---|---|
| FDUNFEE | FDunfee | 9 20 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

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FACILITY COPY - PART 3

210K T-50

009483

**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.: ILD010278281 — 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
LITHO STRIP COMPANY
7247 S. 78th AVE. BRIDGEVIEW, IL 60455

4. Generator's Phone (312) 458-8416

A. Illinois Manifest Document Number: IL 1418721
B. Illinois Generator's ID: 0310275007
C. Illinois Tranporter's ID: 00079
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
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
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. | X DIRTY RECLAIM SOLVENT - FLAMMABLE LIQUID WASTE SOLVENT FLAMMABLE UN 1993 | 001 | tt | 05000 | | EPA HW Number: D001 Authorization Number: OUT OF STATE |
| 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
[illegible] 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 & TOXICITY OF WASTE GENERATED TO THE DEGREE I HAVE DETERMINED TO BE ECONOMICALLY PRACTICAL AND I HAVE SELECTED THE METHOD OF TREATMENT STORAGE OR DISPOSAL CURRENTLY AVAILABLE TO ME WHICH

K. Handling Codes for Wastes Listed Above
1 = Gallons 2 = Cubic Yards

15. Special Handling Instructions and Additional Information
MINIMIZES THE FUTURE THREAT TO HUMAN HEALTH AND 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 government regulations, and Illinois regulations.

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| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| GAIL REH | [signature] | 11 01 85 |

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| DAVE SCHLEYER | [signature] | 11 01 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) |
|---|---|---|
| F DUNFEE | [signature] | 11 1 85 |

GENERATOR / TRANSPORTER / FACILITY

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

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FACILITY COPY - PART 3

125 RT-63

009484

**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.: ILD010278281 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
LITHO-STRIP COMPANY
7247 S. 78th AVE. BRIDGEVIEW, IL 60455

4. Generator's Phone ( 312 ) 458-8416

A. Illinois Manifest Document Number: IL 1418729

B. Illinois Generator's ID: 0310270004

5. Transporter 1 Company Name: Mr. Frank

6. US EPA ID Number: ILD069506160

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

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: IND063602265

G. Illinois Facility's ID: 1911810819010012

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. | X SCRAP PAINT, N.O.S. WASTE FLAMMABLE LIQUID UN 1993 | 001 | TT | 03700 | 1 | D001 |
| b. | | | | | | |
| c. | | | | | | |
| d. | | | | | | |

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above
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.

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Printed/Typed Name: GAIL REH — Signature: Jim Howard — Date: 11/18/85

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: RON BRIDGEWATER — Signature: Ron Bridgewater — Date: 11/18/85

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Date

**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: 11/18/85

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 #6

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FACILITY COPY - PART 3

204 F T-50

009485

**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. ILD010278281 — 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
LITHO STRIP CO
7247 S 78th AVE. BRIDGEWIEW, ILL 60455
4. Generator's Phone ( 312 ) 458-8416

A. Illinois Manifest Document Number IL 1339950
B. Illinois Generator's ID 0310270004

5. Transporter 1 Company Name — 6. US EPA ID Number
MR. FRANK INC — 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 — 10. US EPA ID Number
AMERICAN CHEMICAL SERVICE
420 S. COLFAX
GRIFFITH, IND. 46319 — 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 SCRAP PAINT UN 1993 WASTE FALMMABLE LIQUID NOS FLAMMABLE LIQUID | X | 001 | TT | 03000 | G | D001 |
| b. | | | | | | |
| c. | | | | | | |
| d. | | | | | | |

GENERATOR

J. Additional Descriptions for Materials Listed Above
UNLESS I AM A SMALL QUALITY GENERATOR AND HAS BEEN EXEMPTED BY NOTIFICATION CERTIFICATION UNDER SEC 3006 OF RCRA I ALSO CERTIFY THAT I HAVE A PROGRAM IN PLACE TO REDUCE THE VOLUME OF TOXIC OR HAZARDOUS MATERIALS GENERATED TO THE DEGREE I HAVE DETERMINED TO BE ECONOMICALLY PRACTICABLE AND 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: BOB BUNTIN — Signature — Date: Month 12 Day 4 Year 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: RICH WHITE — Signature — Date: Month 12 Day 4 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: EDUNFEE — Signature — Date: Month 12 Day 4 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

211KT-50 009486

**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 1 0 2 7 8 2 8 1 — 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
LITHO -STRIP COMPANY
7247 S. 78TH AVE. BRIDGEVIEW, IL 60455
4. Generator's Phone ( 312 ) 458-8416

A. Illinois Manifest Document Number: IL 1418742

B. Illinois Generator's ID: 0 3 1 0 2 7 0 0 0 4

C. Illinois Tranporter's ID: 0 0 7 9

D. ( ) Transporter's Phone

E. Illinois Transporter's ID

F. ( ) Transporter's Phone

5. Transporter 1 Company Name: MR. FRANK — 6. US EPA ID Number: I L D 0 6 9 5 0 6 1 6 0

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

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
420 S. COLFAX
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 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. | X SCRAP PAINT N.O.S. FLAMMABLE LIQUID WASTE FLAMMABLE LIQUID UN 1993 | X | 001 | TT | 03000 | 1 | EPA HW Number: D001 D018; Authorization Number: OUT OF STATE |
| 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 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: GAIL REH — Signature — Date (Month Day Year): 12 09 85

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: RICH WHITE — Signature — Date (Month Day Year): 12 09 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 Day Year): 12 9 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. #6

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FACILITY COPY - PART 3

206K-T-50

009487

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 1 0 2 7 8 2 8 1 | 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
Litho-Strip Company
7247 S. 78th Ave. Bridgeview, IL 60455
4. Generator's Phone ( 312 ) 458-8416

A. Illinois Manifest Document Number: IL-141853

B. Illinois Generator's ID: 0 3 1 0 2 7 5 0 0 7

C. Illinois Tranporter's ID: 0 0 7 1 9

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: I L D 0 6 9 5 0 6 1 6 0

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

9. Designated Facility Name and Site Address
American chemical Service
420 S. Colfax
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 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. | [redacted] | [redacted] | | | 1 | EPA HW Number: D 0 0 1 Authorization Number: Out of State |
| b. | XXX WASTE FLAMMABLE LIQUID, N.O.S. U.N. 1993 | 001 | DT | 03000 | 1 | 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 N.O.S.

K. Handling Codes for Wastes Listed Above
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.

GENERATOR

Printed/Typed Name: Gail Reh | Signature: [signature] | Date: Month 9 Day 19 Year 86

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: DWAYNE J HAW. | Signature: [signature] | Date: Month 9 Day 19 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: FDUNFEE | Signature: [signature] | Date: Month 9 Day 18 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

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

ZIORT-50

011243

**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

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# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. ILD010278281 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
LITHO STRIP COMPANY
7247 S. 78th AVE. BRIDGEVIEW, IL 60455
4. Generator's Phone ( 312 ) 458-8416

A. Illinois Manifest Document Number: IL 1418554
B. Illinois Generator's ID: 0310270004
C. Illinois Tranporter'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
6. US EPA ID Number: ILD069506116
7. Transporter 2 Company Name
8. US EPA ID Number

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
420 S. COLFAX
GRIFFITH, IND 46319
10. US EPA ID Number: IND063602265

| | 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. | SCRAP PAINT N.O.S. FLAMMABLE LIQUID WASTE FLAMMABLE LIQUID UN 1993 | X | 001 | TT | 03000 | 1 | EPA HW Number: D001 Authorization Number: Out of State |
| 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 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 | Signature | Date (Month Day Year) |
|---|---|---|
| GAIL REH | | 01 22 86 |

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| RICH WHITE | | 01 22 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) |
|---|---|---|
| EDUFFEE | | 1 23 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. 86

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

011244

**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 010278281 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
LITHO-STRIP COMPANY
7247 S. 78th Ave. Bridgeview, IL 60455

4. Generator's Phone ( 312 ) 458-8416

A. Illinois Manifest Document Number: IL 1418555

B. Illinois Generator's ID: 0 3 1 0 2 7 0 0 0 4

5. Transporter 1 Company Name: Mr. Frank

6. US EPA ID Number: ILD 069506160

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 S. Colfax
Griffith, IN 46319

10. US EPA ID Number: IND 016360265

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. | SCRAP PAINT N.O.S. FLAMMABLE LIQUID WASTE FLAMMABLE LIQUID UN. 1993 | X | 0.0.1 | t.t | 91,700 | 1 | EPA HW Number: D001 Authorization Number: Out of State |
| 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 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.

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Printed/Typed Name: GAIL REH Signature: [signature] Date: Month 01 Day 27 Year 85

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: RICH WHITE Signature: [signature] Date: Month 01 Day 27 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: F Dunfee Date: Month 1 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 #6

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FACILITY COPY - PART 3

212KT-50

011245

**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. ILD010278281 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
Litho-Strip Company
7247 S. 78th Ave. Bridgeview, IL 60455

4. Generator's Phone ( 312 ) 458-8416

A. Illinois Manifest Document Number IL 1418557

B. Illinois Generator's ID 0310275007

5. Transporter 1 Company Name Mr. Frank Inc.

6. US EPA ID Number ILD069506166

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 S. Colfax
Griffith, IN 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 | Waste No. |
|---|---|---|---|---|---|---|---|
| a. | DIRTY RECLAIM SOLVENT - FLAMMABLE LIQUID N.O.S. (WASTE SOLVENT) FLAMMABLE UN 1993 WASTE N.O.S. | X | 001 | TT | 0.3000 | / | EPA HW Number D001<br>Authorization Number Out of State |
| b. | | | | | | | EPA HW Number<br>Authorization Number |
| c. | | | | | | | EPA HW Number<br>Authorization Number |
| d. | | | | | | | EPA HW Number<br>Authorization Number |

J. Additional Descriptions for Materials Listed Above
WASTE SOLVENTS N.O.S.

K. Handling Codes for Wastes Listed Above
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.

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| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| GAIL PEH | | 01/30/86 |

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| MICHAEL A. PFEIFER (DRIVER) | | 01/30/86 |

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 | | 01/30/86 |

*24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* ILLINOIS: 217 / 782-3637 OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

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. 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

ITY COPY - PART 3

212FT-50

011246

**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 1 0 2 7 8 2 8 1 — 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
LITHO STRIP COMPANY
7247 S 78th AVE BRIDGEVIEW, ILL 60455

4. Generator's Phone ( 312 ) 458-8416

A. Illinois Manifest Document Number: IL 1418552

B. Illinois Generator's ID: 0 3 1 0 2 7 0 0 0 4

C. Illinois Tranporter's ID: 0 0 7 9

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: I L D 0 6 9 5 0 6 1 6

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

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
420 S. COLFAX
GRIFFITH, IND. 46319

10. US EPA ID Number: I N D 0 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 | Waste No. |
|---|---|---|---|---|---|---|---|
| a. | SCRAP PAINT N.O.S. WASTE FLAMMABLE LIQUID UN 1993 FLAMMABLE LIQUID | X | 0 0 1 | TT | 0,3000 | 1 | EPA HW Number: 000 01 Authorization Number: OUT OF STATE |
| 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 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: BOB BUNTIN — Signature: Bob Buntin — Date (Month Day Year): 0 1 0 6 8 6

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: RICK WHITE — Signature: Rick White — Date (Month Day Year): 0 1 0 6 8 6

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 Day Year): 1 6 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

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 RT 50

011242

**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 4 9 8 1 3 2 5 6 — 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
Litho-Strip
4800 S. Kilbourn Chicago, IL 60632

4. Generator's Phone ( 312 ) 254-3400

A. Illinois Manifest Document Number: IL 1418568
B. Illinois Generator's ID: 0 3 1 6 2 8 0 0 1 1

5. Transporter 1 Company Name: ~~[illegible]~~ STRAND TRUCKING
6. US EPA ID Number: I L D 0 0 0 6 4 6 8 1 8
C. Illinois Tranporter's ID: 0 0 2 8
D. (312) [illegible] 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
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 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. | DIRTY RECLAIM SOLVENT -- WASTE FLAMMABLE LIQUID (WASTE SOLVENT/N.O.S. FLAMMABLE N.O.S. UN 1993 | X | 66 | DM | 3300 | 1 | EPA HW Number: D001 Authorization Number: Out of State |
| 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 N.O.S.

K. Handling Codes for Wastes Listed Above: 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.

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| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| GAIL REH | Gail Reh | 03 14 86 |

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| X JAMES BATTEN | James Batten | 03 14 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 in item 19.

| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| MICHAEL O. BURGE | Michael O. Burge | 03 14 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

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FACILITY COPY - PART 3

204FT-50

011247

**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 4 9 8 1 3 2 5 6 | 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
LITHO-STRIP
4800 S. Kilbourn Chicago, IL 60632
4. Generator's Phone ( )

A. Illinois Manifest Document Number: IL 141 8570
B. Illinois Generator's ID: 0 3 1 6 2 8 0 0 1 1
C. Illinois Tranporter's ID: 0 0 2 4
D. (312) 385-8440 Transporter's Phone
E. Illinois Transporter's ID:
F. Transporter's Phone
G. Illinois Facility's ID: 9 1 8 0 8 9 0 0 0 2
H. Facility's Phone: (312) 768-3400

5. Transporter 1 Company Name: STRAND TRUCKING
6. US EPA ID Number: I L D 0 0 0 6 4 6 8 1 0
7. Transporter 2 Company Name:
8. US EPA ID Number:
9. Designated Facility Name and Site Address: AMERICAN CHEMICAL SERVICE, 420 S. Colfax, Griffith, IN 46319
10. US 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) | HM | 12. Containers No. | Type | 13. Total Quantity | 14. Unit Wt/Vol | Waste No. |
|---|---|---|---|---|---|---|---|
| a. | DIRTY RECLAIM SOLVENT - WASTE FLAMMABLE LIQUID (WASTE SOLVENT) N.O.S. FLAMMABLE N.O.S. UN-1993 | X | 016 | DM | 99800 | 1 | D001 |
| b. | | | | | | | |
| c. | | | | | | | |
| d. | | | | | | | |

J. Additional Descriptions for Materials Listed Above: WASTE SOLVENTS N.O.S.

K. Handling Codes for Wastes Listed Above: 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.

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| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| GAIL REH | | 10 15 0 2 8 6 |

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| JAMES BATTEN | | 10 15 0 2 8 6 |

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) |
|---|---|---|
| MICHAEL O'BRIEN | | 10 15 0 2 8 6 |

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

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 FT50
011248

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.: ILD049813256 / 000001

2. Page 1 of: 1

Information in the shaded areas is not required by Federal law

3. Generator's Name
LITHO-STRIP
4800 S. Kilbourn Chicago, IL 60632

4. Generator's Phone ( 312 ) 254-3400

A. State Manifest Document Number: IN 047360

B. State Generator's ID: 0316280011

5. Transporter 1 Company Name: STRAND TRUCKING

6. US EPA ID Number: ILD000646810

C. State Transporter's ID: 0024

D. Transporter's Phone: 312-25-1110

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: INDO16360265

G. State 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) | 12. Containers No. | 12. Containers Type | 13. Total Quantity | 14. Unit Wt/Vol | I. Waste No. |
|---|---|---|---|---|---|
| a. DIRTY RECLAIM SOLVENT - WASTE FLAMMABLE LIQUID (WASTE SOLVENT) N.O.S. ~~FLAMMABLE N.O.S. UN 1993~~ | 1 | DM | 1 | 1 | D001 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
WASTE SOLVENTS N.O.S.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

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.

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| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| Gail Reh | | 12 | 17 | 86 |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date: Month | Day | Year |
|---|---|---|---|---|
| | | 12 | 17 | 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 Item 19.

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| HAROLD F. Schmidt | | 12 | 17 | 86 |

IN 047360

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

T.S.D. DETACH AND RETAIN THIS COPY

125 F 763
011235

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.: ILD049813256 00001

2. Page 1 of: 1

Information in the shaded areas is not required by Federal law

3. Generator's Name: Litho-Strip
4800 S. Kilbourn Chicago, IL 60632
4. Generator's Phone ( 312 ) 254-3400

A. State Manifest Document Number: IN 047363

B. State Generator's ID: 0316280011

5. Transporter 1 Company Name: STRAND TRUCKING

6. US EPA ID Number: ILD000646810

C. State Transporter's ID: 0024

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
Griffith, IN 46319

10. US EPA ID Number: IND016360265

G. State Facility's ID: 918068900 02

H. Facility's Phone: (312) 768-8800

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. DIRTY RECLAIM SOLVENT - WASTE FLAMMABLE LIQUID (WASTE SOLVENT) N.O.S. FLAMMABLE N.O.S. UN 1993 | 1 | DM | 1 | 1 | D001 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above: WASTE SOLVENTS N.O.S.

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.

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| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| Gail Reh | | 11 | 1 | 16 |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date: Month | Day | Year |
|---|---|---|---|---|
| | | 11 | 15 | 16 |

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 |
|---|---|---|---|---|
| HAROLD F Schmidt | | 11 | 15 | 16 |

IN 047363

EPA Form 8700-22A (Rev. 11-85)

UHWM 2/LP2

T.S.D. DETACH AND RETAIN THIS COPY

011236

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.: ILD049813256 / 0001

2. Page 1 of: 1

Information in the shaded areas is not required by Federal law

3. Generator's Name: LITHO-STRIP
4800 S. Kilbourn Chicago, IL 60632

4. Generator's Phone ( 312 ) 254-3400

A. State Manifest Document Number: IN 047362

B. State Generator's ID: 0316280011

5. Transporter 1 Company Name: STRAND TRUCKING

6. US EPA ID Number: ILD000646810

C. State Transporter's ID: 0024

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
Griffith, IN 46319

10. US EPA ID Number: IND016360265

G. State Facility's ID: 918089000 2 IL

H. Facility's Phone: (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. DIRTY RECLAIM SOLVENT - WASTE FLAMMABLE LIQUID (WASTE SOLVENT) N.O.S. FLAMMABLE N.O.S. UN 1993 | 017 | DM | 0110 | 1 | D001 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above

WASTE SOLVENTS N.O.S.

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.

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| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| GAIL REH | | 1 | 17 | 86 |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date: Month | Day | Year |
|---|---|---|---|---|
| Stan Strand | Stan Strand | 1 | 17 | 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 item 19.

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| ARMUTH | | 01 | 19 | 86 |

IN 047362

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

T.S.D. DETACH AND RETAIN THIS COPY

125 Tc T63

011237

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.: ILD049813256 / 000001

2. Page 1 of: 1

Information in the shaded areas is not required by Federal law

3. Generator's Name: LITHO-STRIP
4800 S. Kilbourn Chicago, IL 60632

4. Generator's Phone: 312 254-3400

A. State Manifest Document Number: IN 047361

B. State Generator's ID: IL 0 3 1 6 2 8 0 0 1 1

5. Transporter 1 Company Name: STRAND TRUCKING

6. US EPA ID Number: ILD000646310

C. State Transporter's ID: 0024

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
Griffith, IN 46319

10. US EPA ID Number: IND016360265

G. State Facility's ID: 918089000 2 IL

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. DIRTY RECLAIM SOLVENT - WASTE FLAMMABLE LIQUID ( WASTE SOLVENT) N.O.S. FLAMMABLE N.O.S. UN 1993 | 002 | DM | 00110 | 1 | D001 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above: WASTE SOLVENTS N.O.S.

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.

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GENERATOR

Printed/Typed Name: GAIL REH | Signature | Month 12 Day 14 Year 86

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials | Printed/Typed Name | Signature | Date: Month 12 Day 14 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 Item 19.

Printed/Typed Name | Signature | Month Day Year

IN 047361

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

T.S.D. DETACH AND RETAIN THIS COPY

125 R T63 011238

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 4 9 8 1 3 2 5 6 — 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
LITHO-STRIP
4800 S. Kilbourn Chicago, IL 60632

4. Generator's Phone ( 312 ) 254-3400

A. Illinois Manifest Document Number: IL-1418578

B. Illinois Generator's ID: 0 3 1 6 2 8 0 0 1 1

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. Illinois Tranporter's ID: 0 0 2 4

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 SERVICE
420 S. Colfax
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 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. | DIRTY RECLAIM SOLVENT - WASTE FLAMMABLE LIQUID (WASTE SOLVENT) N.O.S. FLAMMABLE N.O.S. UN 1993 | X | 042 | DM | 02100 | 1 | EPA HW Number: D001 / Authorization Number: Out of State |
| 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 N.O.S.

K. Handling Codes for Wastes Listed Above
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 | Signature | Date (Month Day Year) |
|---|---|---|
| GAIL REH | | 0 7 0 7 8 6 |

| TRANSPORTER | | | |
|---|---|---|---|
| 17. Transporter 1 Acknowledgement of Receipt of Materials | | | Date |
| Printed/Typed Name: THOMAS P. STRAND | Signature | | 0 7 0 7 8 6 |
| 18. Transporter 2 Acknowledgement of Receipt of Materials | | | Date |
| Printed/Typed Name | Signature | | |

| 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. | | | Date |
| Printed/Typed Name: MICHAEL BRUCE | Signature | | 0 7 0 7 8 6 |

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

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

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011239

**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 4 9 8 1 3 2 5 6 — 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
LITHO-STRIP
4800 S. Kilbourn Chicago, IL 60632

A. Illinois Manifest Document Number: IL 1418574

B. Illinois Generator's ID: 0 3 1 6 2 8 0 0 1 1

4. Generator's Phone ( 312 ) 254-3400

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. Illinois Transporter's ID: 0 0 2 4

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 SERVICE
420 S. Colfax
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 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. DIRTY RECLAIM SOLVENT - WASTE FLAMMABLE LIQUID (WASTE SOLVENT) N.O.S. FLAMMABLE N.O.S. ON-1993 | X | 50 | D N | 0250 U | 1 | EPA HW Number: D 0 0 1<br>Authorization Number: Out of State |
| b. | | | | | | EPA HW Number<br>Authorization Number |
| c. | | | | | | EPA HW Number<br>Authorization Number |
| d. | | | | | | EPA HW Number<br>Authorization Number |

J. Additional Descriptions for Materials Listed Above
a. WASTE SOLVENTS N.O.S.

K. Handling Codes for Wastes Listed Above
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.

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Printed/Typed Name: GAIL REH — Signature — Date: Month 06 Day 03 Year 86

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: STAN STRAND — Signature — Date: Month 06 Day 16 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: MICHAEL O'BRIEN — Signature — Date: Month 06 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

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FACILITY COPY - PART 3

125ETG 011240

**STATE OF ILLINOIS** ENVIRONME ROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL
2200 CHUR OAD, 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 4 9 8 1 3 2 5 6 — 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
LITHO-STRIP
4800 S. Kilbourn Chicago, IL 60632

4. Generator's Phone ( 312 ) 254-3400

A. Illinois Manifest Document Number: IL 1418571
B. Illinois Generator's ID: 0 3 1 6 2 8 0 0 1 1
C. Illinois Tranporter's ID: 0 0 2 4
D. ( ) Transporter's Phone:
E. Illinois Transporter's ID:
F. ( ) Transporter's Phone:
G. Illinois Facility's ID: 9 1 8 0 8 9 0 0 0 2
H. Facility's Phone: (312) 768-3400

5. Transporter 1 Company Name: STRAND TRUCKING — 6. US EPA ID Number: I L D 0 0 0 6 4 6 8 1 0

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

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
420 S. Colfax
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) | HM | 12. Containers No. | Type | 13. Total Quantity | 14. Unit Wt/Vol | K. Waste No. |
|---|---|---|---|---|---|---|---|
| a. | DIRTY RECLAIM SOLVENT - WASTE FLAMMABLE LIQUID (WASTE SOLVENT) N.O.S. FLAMMABLE N.O.S. UN 1993 | X | 020 | DM | 01,000 | 1 | EPA HW Number: D001<br>Authorization Number: Out of State |
| b. | | | | | | | EPA HW Number:<br>Authorization Number: |
| c. | | | | | | | EPA HW Number:<br>Authorization Number: |
| d. | | | | | | | EPA HW Number:<br>Authorization Number: |

J. Additional Descriptions for Materials Listed Above
WASTE SOLVENTS N.O.S.

K. Handling Codes for Wastes Listed Above
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: GAIL REH — Signature: Gail Reh — Date (Month Day Year): 05 29 86

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JAMES RATTEN — Signature: James Ratten — Date (Month Day Year): 05 29 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: MICHAEL O BURKE — Signature: Michael O Burke — Date (Month Day Year): 05 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

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

121 ET 63

011241

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

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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.: ILD049813256 — Manifest Document No.: 00001
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law

3. Generator's Name: LITHO-STRIP
4800 S. Kilbourn Chicago, IL 60632
4. Generator's Phone (312) 254-3400

A. State Manifest Document Number: IN 047376
B. State Generator's ID: 031628001 1
C. State Transporter's ID: 0024
D. Transporter's Phone: 312-385-8440
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID: 918089000 2
H. Facility's Phone: (312) 768-3400

5. Transporter 1 Company Name: STRAND TRUCKING
6. US EPA ID Number: ILD000646810
7. Transporter 2 Company Name:
8. US EPA ID Number:

9. Designated Facility Name and Site Address: AMERICAN CHEMICAL SERVICE
420 S. Colfax
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. DIRTY RECLAIM SOLVENT - WASTE FLAMMABLE LIQUID (WASTE SOLVENT) N.O.S. FLAMMABLE N.O.S. UN 1993 | 42 | DM | 7350 | 1 | D001 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above: WASTE SOLVENTS N.O.S.
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: Gail Reh — Signature: [signature] — Month / Day / Year: 1 / 1 / 87

17. Transporter 1 Acknowledgement of Receipt of Materials — Date
Printed/Typed Name: Bernard M Strand — Signature: Bernard M Strand — Month / Day / Year: 1 / 1 / 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: Harrard F. Schmidt — Signature: Harrard F. Schmidt — Month / Day / Year: 1 / 15 / 87

GENERATOR — TRANSPORTER — FACILITY

IN 047376

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

T.S.D. DETACH AND RETAIN THIS COPY

GAU 40-125TL T63 b
2-204TL T50 b

012570

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

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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.: ILD049813256 / 000001
2. Page 1 of: 1
Information in the shaded areas is not required by Federal law

3. Generator's Name: LITHO-STRIP
4800 S. Kilbourn Chicago, IL 60632
4. Generator's Phone (312) 254-3400

A. State Manifest Document Number: IN 047367
B. State Generator's ID: 031362800111

5. Transporter 1 Company Name: STRAND TRUCKING
6. US EPA ID Number: ILD000646810
C. State Transporter's ID: 0024
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
Griffith, IN 46319
10. US EPA ID Number: IND016360265
G. State Facility's ID: 918080900012
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 | Waste No. |
|---|---|---|---|---|---|
| a. DIRTY RECLAIM SOLVENT WASTE FLAMMABLE LIQUID (WASTE SOLVENT) N.O.S. FLAMMABLE N.O.S. UN 1993 | 43 | D M | 23165 | 1 | 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 | Signature | Month | Day | Year |
|---|---|---|---|---|
| Gail Reh | | 12 | 06 | 87 |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| Leonard III Strand | Leonard III Strand | 12 | 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 | | 06 | 06 | 87 |

IN 047367

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

T.S.D. DETACH AND RETAIN THIS COPY

MRK 43-2042 F50 6

012572

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

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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.: ILD049813256 / 000001
2. Page 1 of: 1
Information in the shaded areas is not required by Federal law

3. Generator's Name: LITHO-STRIP (PRECOAT)
4. Generator's Phone: (312) 254-3400
A. State Manifest Document Number: IN047368
B. State Generator's ID: 0316280011

5. Transporter 1 Company Name: STRAND TRUCKING
6. US EPA ID Number: ILD000646810
C. State Transporter's ID: 0024
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, Griffith, IN 46319
10. US EPA ID Number: INDO16360265
G. State Facility's ID: 918080900002
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. DIRTY RECLAIM SOLVENT WASTE FLAMMABLE LIQUID (WASTE SOLVENT) N.O.S. FLAMMABLE N.O.S. UN 1993 | 036 | DM | 01800 | 1 | 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.

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GENERATOR

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| GAIL REH | | | | |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials — Date

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| Leonard M Strand | Leonard M Strand | 12 | 13 | 17 |

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 |
|---|---|---|---|---|
| HAROLD F SCHMIDT | Harold F Schmidt | 12 | 13 | 17 |

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

T.S.D. DETACH AND RETAIN THIS COPY

MRK 36-125K TG 12

012573

IN 047368

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

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**UNIFORM HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. / Manifest Document No.: ILD049813256 00001
2. Page 1 of 1
Information in the shaded areas is not required by Federal law

3. Generator's Name: LITHO-STRIP (PRECOAT)
4900 S. Kilbourn Chicago, IL 60632
4. Generator's Phone ( 312 ) 254-3400

A. State Manifest Document Number: IN 047370
B. State Generator's ID: 0311628001111
C. State Transporter's ID: 0024
D. Transporter's Phone: 812-385-8440

5. Transporter 1 Company Name: STRAND TRUCKING
6. US EPA ID Number: ILD000646810
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: IND010636265
G. State Facility's ID: 9158089000021
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. SCRAP PAINT N.O.S., FLAMMABLE LIQUID, WASTE FLAMMABLE LIQUID UN 1993 | 01 | DM | 00100 | 1 | 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.

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GENERATOR

Printed/Typed Name: GAIL REH
Signature:
Month 05 Day 02 Year 87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Leonard M Strand
Signature:
Date: Month 05 Day 02 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 05 Day 03 Year 87

IN 047370

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

T.S.D. DETACH AND RETAIN THIS COPY

MRK 14-204R TSD

012574

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

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Form Approved OMB No. 2000 0404 Expires 7 31 86

**UNIFORM HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. / Manifest Document No.: ILD049813256 00001

2. Page 1 of: 1

Information in the shaded areas is not required by Federal law

3. Generator's Name: LITHO STRIP (Pre Coat)
4800 S LILBOURN CHICAGO, ILL 60632

A. State Manifest Document Number: IN047372

4. Generator's Phone: 312 254-3400

B. State Generator's ID: 0131625000111

5. Transporter 1 Company Name: STRAND TRUCK

6. US EPA ID Number: ILD000064810

C. State Transporter's ID: 024

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 CHEM SERVICE
420 S COLFAX
GRIFFITH, IND. 46319

10. US EPA ID Number: IND016360265

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. DIRTY SOLVENT RECLAIM WASTE, FLAMMABLE LIQUID (WASTE SOLVENT) N.O.S. FLAMMABLE NOS UN 1993 | 02 | DM | 01800 | 1 | D001 |
| 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.

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 |
|---|---|---|---|---|
| BOB BUNTIN | Bob Buntin | 11 | 11 | 87 |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date: Month | Day | Year |
|---|---|---|---|---|
| [illegible] | [illegible] | 11 | 11 | 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 | Signature | Month | Day | Year |
|---|---|---|---|---|
| HAROLD F SCHMIDT | Harold F Schmidt | 11 | 12 | 87 |

IN 047372

EPA Form 8700-22A (Rev. 11-85)

UHWM 2/LP2

T.S.D. DETACH AND RETAIN THIS COPY

MRK 22-125E TO3H

012576

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.: ILD049813256 00001
2. Page 1 of: 1
Information in the shaded areas is not required by Federal law

3. Generator's Name: LITHO STRIP (PRECOAT)
4800 S. Kilbourn, CHGO., ILL 60632
4. Generator's Phone (312) 254-3400

A. State Manifest Document Number: IN 047371
B. State Generator's ID: 03162800111
C. State Transporter's ID: 024
D. Transporter's Phone: 312-385-2440

5. Transporter 1 Company Name: STRAND TRK
6. US EPA ID Number: ILD000646810
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 CHEM SERVICE
920 S. COLFAX
GRIFFITH, IN 46319
10. US EPA ID Number: IND016360265
G. State Facility's ID: 918890002
H. Facility's Phone: 312-768-2400

| 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. DIRTY RECLAIM SOLVENT WASTE FLAM LIQUID (WASTE SOLVENT) N.O.S. HAMABLE NOS UN 1993 | DPA | DM | 01317 | L | 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 |
|---|---|---|---|---|
| Bob Buntin | Bob Buntin | 11 | 17 | 87 |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date: Month | Day | Year |
|---|---|---|---|---|
| [illegible] | [illegible] | 11 | 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 item 19.

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| [illegible] F Schmidt | [illegible] | 11 | 18 | 87 |

IN 047371

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

T.S.D. DETACH AND RETAIN THIS COPY

MRK 20-125R TO B
5-204R TO R

012575

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.: IL004981325600001

2. Page 1 of 1

Information in the shaded areas is not required by Federal law

3. Generator's Name: LITHO STRIP (PRECOAT)
4800 S KILBOURN AVE CHICAGO, ILL 60632

4. Generator's Phone: 312 254-3400

A. State Manifest Document Number: IN 047373

B. State Generator's ID: 031628001 1

5. Transporter 1 Company Name: STRAND TRUCK

6. US EPA ID Number: ILD000646810

C. State Transporter's ID: 024

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 CHEM SERVICE
420 S COLFAX
GRIFFITH, IND

10. US EPA ID Number: IND016360265

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. DIRTY SOLVENT RECLAIM WASTE FLAMMABLE LIQUID (WASTE SOLVENT) N.O.S. FLAMMABLE NOS UN 1993 | 30 | 55 DM | 1650 | 1 | 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: BOB BUNTIN — Signature: Bob Buntin — Month 05 Day 04 Year 87

17. Transporter 1 Acknowledgement of Receipt of Materials — Date

Printed/Typed Name: THOMAS STRAND — 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

GENERATOR / TRANSPORTER / FACILITY

IN 047373

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

MAK

T.S.D. DETACH AND RETAIN THIS COPY

22-125R TG3 B
8-125R TG3 B

012577

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.0.9.6.3.4.4.2.1.3 — Manifest Document No.: 0.8.4.0.8

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: PRAEFKE BRAKE & SUPPLY, 133 OAK ST. - WEST BEND, WISCONSIN 53095

4. Generator's Phone: (414) 334-2355

A. State Manifest Document Number: INA 0248908

B. State Generator's ID:

5. Transporter 1 Company Name: CBC Transport

6. Use EPA ID Number: WID 0.4.7.7.5.9.2.8.8

C. State Transporter's ID: 11536

D. Transporter's Phone: (11) 764-7005

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, IN 46319

10. Use EPA ID Number: IND 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. RQ, HAZARDOUS WASTE LIQUID, N.O.S. ORM-E NA9189 | 004 | DM | 00220 | G | F001 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above: 11a Trichlor & Resin

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: MICHAEL W. BUTZ — Signature: [signature] — Date: Month 07 Day 07 Year 88

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: BRUCE BENOIT — Signature: [signature] — Date: Month 07 Day 07 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: STEVE KULAVICK — Signature: [signature] — Date: Month 07 Day 08 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 0248908

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

3-120KT63 7/25M
1-204KT50 7/29M

0015337

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 0 9 6 3 4 4 2 1 3
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
PRAEFKE BRAKE
133 OAK STREET WEST BEND, WI 53095
4. Generator's Phone ( 414 ) 334-2355

A. State Manifest Document Number: INA 0309648
B. State Generator's ID:

5. Transporter 1 Company Name: E&K HAZARDOUS WASTE SERVICE INC.
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 SOUTH COLFAX
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", HAZARDOUS WASTE LIQUID, N.O.S., ORM-E, NA 9189, (F001) | 002 | DM | 00.1.65 | 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.

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: MICHAEL W. BUTZ
Signature: Michael W. Butz
Date: Month 04 Day 05 Year 89

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: [illegible]
Signature: [illegible]
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 Item 19.
Printed/Typed Name: STEVE KULAVICK
Signature: Steve Kulavick
Date: Month 04 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.

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

204 RTSD 9/10

COPY 5. TSD COPY

0016848

TO BE COMPLETED BY WASTE GENERATOR

# STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0115750

Authorization Number 997020

PRE FINISH METALS 2300 E PRATT
(Company Name) Address
ELK GROVE VILLAGE IL 60007
City State Zip

Generator Number 0314400021

WASTE HAULER(S)

(1) MR FRANK S. HOLLAND, IL.
Hauler Name Hauler Address S.W.H. Registration Number 0079003

(2) Hauler Name Hauler Address S.W.H. Registration Number

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMER. CHEM SER 420 S COLFAX AVE. 0240314
(Facility Name) Address Site Number
GRIFFITH IN. 46319
City State Zip

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT 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: FLAMMABLES

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: 2/4/80 Louis Hall
(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 002500 (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) mike (Authorized Signature) DATE 02/04/80

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

BOB MANN (Authorized Signature) DATE 02/04/80

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

00:0299

TO BE COMPLETED BY WASTE GENERATOR

# STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0115730

Authorization Number 997020

PRE FINISH METALS 2300 E PRATT
(Company Name) Address

ELK GROVE VILLAGE IL 60007
City State Zip

0314400021 G
Generator Number

WASTE HAULER(S)

(1) MR. FRANK S HOLLAND IL
Hauler Name Hauler Address

S.W.H. Registration Number 00790 18

(2) Hauler Name Hauler Address S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMER. CHEM. SER 410 S. COLFAX AVE. 0240314
(Facility Name) Address Site Number

GRIFFITH IN. 46319
City State Zip

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT 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: 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: 3-7-80 Louise Hall
(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) mike Martin (Authorized Signature) DATE 03/07/80 (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.

_____ (Authorized Signature) DATE 03/07/80 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS:

T. Pungle

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

00:0300

TO BE COMPLETED BY WASTE GENERATOR

# STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0115731

Authorization Number 997024

PRE FINISH METALS (Company Name) 2300 E PRATT Address
ELK GROVE VILLAGE City IL State 60007 Zip

031440002 1 G Generator Number

WASTE HAULER(S)

(1) MR FRANK Hauler Name S HOLLAND, IL Hauler Address S.W.H. Registration Number 0079021

(2) Hauler Name Hauler Address S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMER CHEM SER (Facility Name) 410 S. COLFAX AVE Address 9180890 02 Site Number
GRIFFITH City IN State 46319 Zip

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT 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: 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: 5/9/86 Louise Hall (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 005000 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) Michael O Martin (Authorized Signature) DATE 05/13/86

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

J Dunlap (Authorized Signature) DATE 5/13/86

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]301

TO BE COMPLETED BY WASTE GENERATOR

# STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0115735

Authorization Number 997020

PRE FINISH METALS (Company Name) 2300 E. PRATT (Address)
ELK GROVE VILLAGE (City) IL (State) 60007 (Zip)

0314400021 G (Generator Number)

WASTE HAULER(S)

(1) MR FRANK (Hauler Name) S. HOLLAND, IL (Hauler Address) S.W.H. Registration Number 0079029

(2) _____ (Hauler Name) _____ (Hauler Address) S.W.H. Registration Number _____

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMER CHEM SER. (Facility Name) 410 S. COLFAX AVE. (Address) 918089 02 (Site Number)
GRIFFITH (City) IN. (State) 46319 (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT 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: 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: 7/23/80 Louis Hall (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 005000 (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) _____ (Authorized Signature) DATE 07/23/80

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

Richard C. Kingsbury (Authorized Signature) DATE: 07/23/80

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

000302

TO BE COMPLETED BY WASTE GENERATOR

# STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0115736 (1–7)

Authorization Number 997020 (8–13)

PRE FINISH METALS (Company Name) 2300 E. PRATT (Address)
ELK GROVE VILLAGE (City) IL (State) 60007 (Zip)

03144000021 G (14–24) Generator Number

WASTE HAULER(S)

(1) MR. FRANK (Hauler Name) S. HOLLAND, IL (Hauler Address) S.W.H. Registration Number 0079019 (25–31)

(2) _____ (Hauler Name) _____ (Hauler Address) S.W.H. Registration Number _____ (32–38)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMER. CHEM SER (Facility Name) 420 S. COLFAX (Address) 91808902 (39–40) Site Number
GRIFFITH (City) IN (State) 46319 (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT 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: 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: 9/10/80 Louis Hall (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) Mike Martin (Authorized Signature) DATE: 09/10/80 (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:

_____ (Authorized Signature) DATE: 9/10/80 (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

0000301

TO BE COMPLETED BY WASTE GENERATOR

# STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0115737

Authorization Number 997020

PRE FINISH METALS (Company Name) 2300 E PRATT Address
ELK GROVE VILLAGE City IL State 60007 Zip

0314400021 Generator Number

WASTE HAULER(S)

(1) MR FRANK Hauler Name — S. HOLLAND IL Hauler Address — S.W.H. Registration Number 0079079

(2) Hauler Name — Hauler Address — S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMER. CHEM. SER. (Facility Name) 420 S. COLFAX Address 918089862 Site Number
GRIFFIN City IN. State 46319 Zip

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:

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: 11/3/80 Louis Hall (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 004500 (1 GALLONS / 2 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) [signature] (Authorized Signature) DATE: __/__/__

(2) _____ (Authorized Signature) DATE: 11/03/80

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

[signature] (Authorized Signature) DATE: 11/3/80

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

0000295

TO BE COMPLETED BY WASTE GENERATOR

**STATE OF ILLINOIS**
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0115740

Authorization Number ~~998452~~ ~~997020~~ 997020

WASTE GENERATOR

PRE FINISH METALS (Company Name) 2300 E. PRATT (Address)
ELK GROVE VILLAGE (City) IL (State) 60007 (Zip)

0314400021 G (Generator Number)

WASTE HAULER(S)

(1) MR. FRANK (Hauler Name) S. HOLLAND, IL (Hauler Address) S.W.H. Registration Number 0079018

(2) _____ (Hauler Name) _____ (Hauler Address) S.W.H. Registration Number _____

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMER CHEM. SER. (Facility Name) 420 S COLFAX (Address) 91808902 (Site Number)
GRIFFIN (City) IN. (State) 46319 (Zip)

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: _____ 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: 11/17/80 Louis Hall (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 005000 (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: 11/17/80

(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: 11/17/80

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

0000303

TO BE COMPLETED BY WASTE GENERATOR

# STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0115742

WASTE GENERATOR

Authorization Number 997020

PRE FINISH METALS (Company Name) 2300 E. PRATT Address
ELK GROVE VILLAGE City IL State 60007 Zip

03144000021 G Generator Number
ILT 180010407

WASTE HAULER(S)

(1) MR FRANK Hauler Name — S. HOLLAND, IL Hauler Address

S.W.H. Registration Number 0079019
ILD069506160

(2) _____ Hauler Name — _____ Hauler Address

S.W.H. Registration Number _____

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMER CHEM SER. (Facility Name) 420 S. COLFAX Address
GRIFFIN City IN. State 46319 Zip

918089 02 Site Number
IND 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: FOR

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: 1/28/81

L Hall (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 004502 (1 GALLONS / 2 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) Gary Queen (Authorized Signature) DATE: 01 28 81

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

X BOB MILLER (Authorized Signature) DATE: 01 28 81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 125R 1/28/81 T-63 Jim Murphy

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

000670

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

0293643

Authorization Number 998452

PRE FINISH METALS (Company Name) 2300 E. PRATT (Address)
ELK GROVE VILLAGE (City) IL (State) 60007 (Zip)

0314400021 G (Generator Number)
ILT180010407

WASTE HAULER(S)

MR. FRANK (Hauler Name) S. HOLLAND, IL (Hauler Address)
S.W.H. Registration Number 0079018

ILD069506160

Hauler Name Hauler Address
S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMER. CHEM. SER. (Facility Name) 410 S. COLFAX AVE. (Address) 91808902 (Site Number)
GRIFFITH (City) IN. (State) 46317 (Zip)

IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE 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: 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 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: 4/8/81 L. Hall (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) Gary Druer (Authorized Signature) DATE: 04/08/81

(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 08 81

COMMENTS OR SPECIAL INSTRUCTIONS: TO WEST AGIT T-50 4/8/81 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

000672

# STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0293644

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 998452

PRE FINISH METALS (Company Name) | 2300 E. PRATT (Address)
ELK GROVE VILLAGE (City) | IL (State) | 60007 (Zip)

03144000021 G (Generator Number)
ILT 1800104 07

WASTE HAULER(S)

MR. FRANK (Hauler Name) | S. HOLLAND IL (Hauler Address)
S.W.H. Registration Number 0079004

ILD 069506160
Hauler Name | Hauler Address
S.W.H. Registration Number

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMER. CHEM. SER. (Facility Name) | 410 S. COLFAX AVE. (Address) | 91808902 (Site Number)
GRIFFITH (City) | IN. (State) | 46317 (Zip)
IND 016 360 265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINT
WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

F005

SHIPPING DESCRIPTION: | HAZARD CLASS: 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)

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: 5/19/81 | L Hall (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 19 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: 05 19 81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO WEST AGIT – T-50 5/19/81

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

000671

TO BE COMPLETED BY WASTE GENERATOR

# STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0115745

WASTE GENERATOR

Authorization Number 997020

PRE FINISH METALS (Company Name) 2300 E PRATT (Address)
ELK GROVE VILLAGE (City) IL (State) 60007 (Zip)

0314400021 G (Generator Number)
ILT180010407

WASTE HAULER(S)

(1) MR. FRANK (Hauler Name) S. HOLLAND IL (Hauler Address)
S.W.H. Registration Number 0079029
ILD 069506160

(2) _____ (Hauler Name) _____ (Hauler Address)
S.W.H. Registration Number _____

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMER CHEM SER (Facility Name) 4205 COLFAX (Address)
GRIFFIN (City) IN. (State) 46319 (Zip)
918089022 (Site Number)
IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SOLVENT 1985
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: 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: 4/27/81
L. Hall (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 004800 (1 GALLONS / 2 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) Gary Davis (Authorized Signature) DATE 4 27 81
(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 4/27/81

COMMENTS OR SPECIAL INSTRUCTIONS: TOV 124 X 4/27/81 T-63 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

000673

TO BE COMPLETED BY WASTE GENERATOR

# STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0115746

Authorization Number 998452

PRE FINISH METALS (Company Name) 2300 E PRATT Address
ELK GROVE VILLAGE City IL State 60007 Zip
0314400021 Generator Number
ILD184910407

WASTE HAULER(S)

(1) M R FRANK Hauler Name 201 W. 155th ST. S HOLLAND, IL Hauler Address
S.W.H. Registration Number 0079029
ILD069506160

(2) Hauler Name Hauler Address
S.W.H. Registration Number

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMER CHEMSER (Facility Name) ~~400~~ S. COLFAX AVE. Address
GRIFFITH City IN. State 46319 Zip
91808902 Site Number
IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE 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: 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: 6/9/81
L Hall (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 005000 (1 GALLONS / 2 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) _____ (Authorized Signature) DATE: 06/09/81

(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: 06/09/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO WEST AGIT T-50 6/9/81 gtm

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

000674

TO BE COMPLETED BY WASTE GENERATOR

# STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0115747

WASTE GENERATOR

Authorization Number 997020

PRE FINISH METALS (Company Name) 2300 E PRATT (Address)

ELK GROVE VILLAGE (City) IL (State) 60007 (Zip)

0314400021 G (Generator Number)

ILT180010407

WASTE HAULER(S)

(1) MR FRANK (Hauler Name) S. HOLLAND, IL. (Hauler Address) S.W.H. Registration Number 0079019

ILD069506160

(2) _____ (Hauler Name) _____ (Hauler Address) S.W.H. Registration Number _____

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMER CHEM SER (Facility Name) 4205 COLFAX (Address) 91808902 (Site Number)

GRIFFIN (City) IN (State) 46319 (Zip)

IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SOLVENT F017

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: 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: 6/16/81 L Hall (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 5000 (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) C Baruchi (Authorized Signature) DATE 06/16/81 (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 6/16/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS TO 124R T-63 - 6/16/81 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

000675

TO BE COMPLETED BY WASTE GENERATOR

# STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0115748 (1–7)

Authorization Number 997020 (8–13)

PRE FINISH METALS (Company Name) | 2300 E. PRATT (Address)
ELK GROVE VILLAGE (City) | IL (State) | 60007 (Zip)
0314400021 (14–24) Generator Number
ILT180010407

WASTE HAULER(S)

(1) MR. FRANK (Hauler Name) | S. HOLLAND, IL. (Hauler Address)
S.W.H. Registration Number 0079009 (25–31)
ILD069506160

(2) _____ (Hauler Name) | _____ (Hauler Address)
S.W.H. Registration Number _____ (32–38)

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMER. CHEM. SER. (Facility Name) | 4205 COLFAX (Address)
9180890 2 (39–46) Site Number
GRIFFIN (City) | IN (State) | 46319 (Zip)
IND016360265

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: _____ | F005 | 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 7/10/81 | L Hall (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 005000 (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) _____ (Authorized Signature) | DATE 07/10/81 (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 7/10/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO 125X T-63 7/10/81 JMM

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

000676

**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**

0491481

Authorization Number 998452

PRE FINISH METALS (Company Name) | 2300 E. PRATT (Address) | 312-439-2210 (Phone Number) | 0314400021 (Generator Number)

ELK GROVE VILLAGE (City) | IL (State) | 60007 (Zip) | ILT180010407 (EPA Number)

WASTE HAULER(S)

MR. FRANK (Hauler Name) | 201 W. 155TH ST S. HOLLAND, IL. (Hauler Address) | S.W.H. Registration Number 0079009

312 5963377 (Phone Number) | ILD069506160 (EPA Number)

Hauler Name | Hauler Address | S.W.H. Registration Number

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMER. CHEM. SER. (Facility Name) | 420 S. COLFAX AVE. (Address) | 91808902 (Site Number)

GRIFFITH (City) | IN. (State) | 46317 (Zip) | 3127683400 (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: WASTE 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: FLAMMABLE 1993 (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: 005000 (47–52) 2 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 L. Hall (Authorized Signature) DATE: 9/1/81

**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) Ronald Bridgewater (Authorized Signature) DATE 9/1/81 (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 9/1/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO 211 Tx T-50 9/1/81 gm

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

000677

# 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

0491482 (1–7)

Authorization Number 998452 (8–13)

PRE FINISH METALS (Company Name) | 2300 E. PRATT (Address) | 3124392210 (Phone Number) | 03144000221 G (14 Generator Number 24)

ELK GROVE VILLAGE (City) | IL (State) | 60007 (Zip) | ILL1800104O7 (EPA Number)

WASTE HAULER(S)

MR. FRANK (Hauler Name) | 201 W. 155TH ST. S. HOLLAND, IL (Hauler Address) | S.W.H. Registration Number 0079018 (25–31)

3125963377 (Phone Number) | ILD069506160 (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 SER (Facility Name) | 420 S. COLFAX AVE. (Address) | 9180890 2 (39 Site Number 46)

GRIFFITH (City) | IN. (State) | 46319 (Zip) | 3127683400 (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: WASTE 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: FLAMMABLE | HAZARD CLASS: 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: 004000 (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 [signature] (Authorized Signature) DATE 5-28-82

**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 05/28/82 (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 05/28/82 (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 210 F T-50 GRM 5-28-82

003705

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

0799363
1 7

Authorization Number 8 13

**TO BE COMPLETED BY WASTE GENERATOR**

Return to:
ATTN: R. Drufke

Pre Finish Metals (Company Name) | 2300 Pratt (Address) | 3 1 2 4 3 9 2 2 1 0 (Phone Number) | 0 3 1 4 4 0 0 0 2 1 G (14 Generator Number 24)

Elk Grove Village (City) | IL (State) | 60007 (Zip) | I L D 0 5 6 6 3 9 8 8 3 (EPA Number)

WASTE HAULER(S)

American Chemical 420 S. Colfax Avenue (Hauler Name) Griffith, IN 46319 (Hauler Address) | S.W.H. Registration Number 0 0 2 4 (25 31)

2199244370 (Phone Number) | I N D 0 1 6 3 6 0 2 6 5 (EPA Number)

Strand Trucking Co. 136 S. Kenton Avneue (Hauler Name) Crestwood, IL 60445 (Hauler Address) | S.W.H. Registration Number 0 3 1 1 0 1 2 (32 38)

3123888440 (Phone Number) | I L D 0 0 0 6 4 6 8 1 0 (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical (Facility Name) | 420 S. Colfax Avenue (Address) | 91808902 (39 Site Number 40)

Griffith (City) | IN (State) | 46319 (Zip) | 2199244370 (Phone Number) | IND016360265 (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: SPENT 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 Methyl Ethyl Ketone | HAZARD CLASS: FLAMMABLE | U N 1 1 9 3 (UN or NA Number) | F 0 0 5 (EPA HW Number)

WEIGHT FOR D.O.T. USE 32000 (LBS) TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 4400 (47 52) (GALLONS (circle one) 2 CU. YDS.) 53

METHOD OF SHIPMENT (Circle One) (DRUMS 80 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 Robert K Deacon (Authorized Signature) DATE 10-21-83

**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) (Authorized Signature) DATE 10/21/83 (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

(Authorized Signature) DATE 10/21/83 (60 65)

COMMENTS OR SPECIAL INSTRUCTIONS.

IN ILLINOIS, 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS 800 / 424-8802 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 126 K T-63 GRM 10.21.83

CJ5345

**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 3 9 8 8 3 — 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
PRE FINISH METALS , INC. 2300 E. PRATT BLVD ELK GROVE VILLAGE, 60007

4. Generator's Phone ( 312 ) 439 7210

A. Illinois Manifest Document Number: IL 1182306

B. Illinois Generator's ID: 0 3 1 4 4 0 0 0 2 1

5. Transporter 1 Company Name: STRAND TRUCKING CO.

6. US EPA ID Number: I L D 0 0 0 6 4 6 8 1 0

C. Illinois Tranporter's ID: 1 3 0 7

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 CHEMICALS
GRIFFITH, IND 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 7 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. FLAMMABLE N.O.S. LIQUID PAINT AND SOLVENT U.N. 1993 | | 7 5 | DR | 3 7 5 0 | 0 | 1 6 5 |
| | | | | | | EPA HW Number: D 0 0 1 |
| | | | | | | Authorization Number: 9 9 4 6 6 7 |
| 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
FLAMMABLE LLquid

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: Robert R Deacon — Signature: Robert R Deacon — Date (Month Day Year): 9 10 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: JAMES BATTEN — Signature: James Batten — Date (Month Day Year): 09 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: MICHAEL O'BRIEN — Signature — Date (Month Day Year): 9 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

204 RT-50 12/09/1510 5.2 Y. C.

038134

**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 3 9 8 8 4 — 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
PRE FINISH METALS, INC.
2300 E. Pratt Blvd.
ELK GROVE VILLAGE, Il. 60007

4. Generator's Phone ( 312 ) 439-2210

A. Illinois Manifest Document Number: IL 1182319

B. Illinois Generator's ID: 0 3 1 1 4 6 0 0 0 2 1 1

5. Transporter 1 Company Name: STRAND TRUCKING CO.

6. US EPA ID Number: I L D 0 0 0 6 4 6 8 1 0

C. Illinois Tranporter's ID: 1 1 3 1 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 CHEMICALS
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 1 7 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. | FLAMMABLE N.O.S. LIQUID PAINT AND SOLVENT U.N. 1993 | | 33 | DR | 18975 | lbs | EPA HW Number: D001 / Authorization Number: 9 9 4 1 6 1 7 |
| 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: FLAMMABLE LIQUID

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 R Deacon — Signature: Robert R Deacon — Date: Month Day Year 9 1 2 8 5

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: THOMAS STRAND — Signature: Thomas Strand — Date: Month Day Year 0 9 1 2 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: MURPHY — Signature — Date: Month Day Year 9 1 2 8 5

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

204 R T- 50

038135

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. ILD054439883 — 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
PRE FINISH METALS, INC.
2300 E. Pratt Blvd.
Elk Grove Village, IL 60007

4. Generator's Phone ( 312 ) 439-2210

A. Illinois Manifest Document Number IL 118321

B. Illinois Generator's ID 0 3 1 4 4 0 0 0 2 1

5. Transporter 1 Company Name
Strand Trucking Co.

6. US EPA ID Number I L D 0 0 0 6 4 6 8 1 0

C. Illinois Tranporter's ID P 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 CHEMICALS
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 1 7 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 | I. Waste No. |
|---|---|---|---|---|---|---|---|
| GENERATOR a. | Waste Methyl Ethyl Ketone U.N. 1193 | | 80 | DR | 04900 | GL | EPA HW Number D001<br>Authorization Number 9944667 |
| b. | | | | | | | EPA HW Number<br>Authorization Number |
| c. | | | | | | | EPA HW Number<br>Authorization Number |
| d. | | | | | | | EPA HW Number<br>Authorization Number |

J. Additional Descriptions for Materials Listed Above
Flammable Liquid

K. Handling Codes for Wastes Listed Above

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 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, and Illinois regulations.

Printed/Typed Name: Robert R. Deacon — Signature: Robert R Deacon — Date: Month 11 Day 12 Year 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: James Batton — Signature: James Batton — Date: Month 11 Day 12 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 — Signature — Date: Month 11 Day 12 Year 85

IN ILLINOIS: 217 / 782-3637 FOR 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

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UJ8135

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. ILR056639888 — 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
★ PRE FINISH METALS, INC.
2300 East Pratt Blvd.
Elk Grove, IL 60007

A. Illinois Manifest Document Number: IL 1182322

4. Generator's Phone ( 312 ) 439-2210

B. Illinois Generator's ID: 0311464000021

5. Transporter 1 Company Name: Strand Trucking Co.

6. US EPA ID Number: ILD000646810

C. Illinois Tranporter's ID: 11111

D. (312) 386-8440 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 Chemicals
Griffith, IN 46319

10. US EPA ID Number: IND016360265

G. Illinois Facility's ID: 9170890002

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. ~~Flammable N.O.S. Liquid Paint and Solvent~~ UN1193 WAST METHYL ETHYL KETONE | | 1 | DM | 418 | GAL | EPA HW Number F003 Authorization Number 9946617 |
| 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: Flammable Liquid

K. Handling Codes for Wastes Listed Above

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 certifications 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.

GENERATOR

| Printed/Typed Name | Signature | Date Month Day Year |
|---|---|---|
| Robert R. Deacon | Robert R Deacon | 11 11 1985 |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date Month Day Year |
|---|---|---|
| Leonard M Strand | Leonard M Strand | 11 11 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 |
|---|---|---|
| Michael O. Burgio | Michael O. Burgio | 11 15 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

117 T-T-63 ✓

UJ8131

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. C O D 1 0 5 7 0 2 8 8 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
Precision Auto Body
70 S. Havana, Aurora, CO 80012

A. State Manifest Document Number INA 0159784

4. Generator's Phone ( 303 ) 366-4134

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 0311

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 Avenue
Griffith, IN 46319

10. US EPA ID Number I N D 0 1 5 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 | 02 | DM | 0110 | 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 | 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 Item 19.

Printed/Typed Name FRANK PRICE | Signature Frank Price | 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 0159784

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

0159784

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 9822 08084
Manifest Document No.: 55836
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: PRECISION ENERGY SYSTEMS, 1040 N. MAIN ST. LOMBARD IL
4. Generator's Phone (312) 916-1661
A. State Manifest Document Number: INA 0255836
B. State Generator's ID: 0430605035
C. State Transporter's ID: 1505
D. Transporter's Phone: 312 916-1661
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID:
H. Facility's Phone:

5. Transporter 1 Company Name: PRECISION ENERGY SYSTEMS
6. Use EPA ID Number: ILD 9822 08084
7. Transporter 2 Company Name:
8. Use EPA ID Number:

9. Designated Facility Name and Site Address: ~~[illegible]~~ AMERICAN CHEMICAL SERVICES, 4205 S. COLFAX, GRIFFITH, IND 46232
10. Use EPA ID Number: IND

| 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 FLAMMABLE LIQUID UN1993 F003 | 001 | DM | 00055 | 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: NORTHWESTERN MEMORIAL

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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: PETER WHITLIFF
Signature: [signature]
Date: Month 08 Day 15 Year 88

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JEROME O'HALLORAN
Signature: [signature]
Date: Month 8 Day 15 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 8 Day 16 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 0255836

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

DISTRIBUTION:
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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

123RT63 8/19

0015394

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 9.82.20.8084
Manifest Document No.: 3.8.4.4
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: PRECISION ENERGY SYSTEMS, 1040 N. MAIN, LOMBARD, IL 60146
4. Generator's Phone (312) 916-1661
A. State Manifest Document Number: INA 0138999
B. State Generator's ID: 043060
C. State Transporter's ID: 01
D. Transporter's Phone: 916-1661
E. State Transporter's ID: 01
F. Transporter's Phone: 916-1661
G. State Facility's ID: 01
H. Facility's Phone: 01

5. Transporter 1 Company Name: PRECISION ENERGY SYSTEMS
6. Use EPA ID Number: ILD 9.82.20.8084
7. Transporter 2 Company Name: PRECISION ENERGY SYSTEMS
8. Use EPA ID Number: ILD 9.82.20.8084
9. Designated Facility Name and Site Address: AMERICAN CHEMICAL SERVICES, 1200 S. COLLEGE, GRIFFITH, IND 46319-0193
10. Use EPA ID Number: IND 016 360 261

| 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. |
|---|---|---|---|---|---|
| RQ WASTE FLAMMABLE LIQUIDS NOS FLAMMABLE LIQUID UN1993 F003 | 003 | DM | 00165 | G | |
| RQ WASTE FLAMMABLE LIQUIDS NOS FLAMMABLE LIQUID UN1993 F003 | 002 | DH | 00110 | G | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
MICHAEL REESE HOSPITAL LINE A.
NORTHWESTERN MEMORIAL HOSPITAL LINE B

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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: MIKE WILK
Signature: Mike Wilk
Date: Month 04 Day 13 Year 88

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: PETER L. WHITTINGTON
Signature: Peter L Whittington
Date: Month 04 Day 13 Year 88

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: JOHN McLAUGHLIN
Signature: John McLaughlin
Date: Month 4 Day 13 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: Harold F Schmidt
Date: Month 04 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 0138999

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

DISTRIBUTION:
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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

123KT63 4/19M

0015305

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

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Form Approved OMB No. 2000 0404 Expires 7 31 86

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: MIG000017035
Manifest Document No.: 99016
2. Page 1 of 1
Information in the shaded areas is not required by Federal law

3. Generator's Name
PRECISION TOOL
2839 Henry, Muskegon, MI 49443

4. Generator's Phone (616) 733-0811

A. State Manifest Document Number: IN 099016
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. |
|---|---|---|---|---|---|
| WASTE 1,1,1-TRICHLOROETHANE (F002) ORM-A UN2831 | 7 | DM | [illegible] | G | F002 |
| b. ACCEPTED 6 of 7 | | | | | |
| 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.

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Printed/Typed Name: Frank Zadonick
Signature: [signature]
Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: [signature]
Signature: [signature]
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: Milt Popa
Signature: [signature]
Month Day Year: 6 1 87

GENERATOR / TRANSPORTER / FACILITY

IN 099016

EPA Form 8700-22A (Rev. 11-85)

UHWM 2/LP2

1-DRUM RETURNED TO CUSTOMER
MRK
T.S.D. DETACH AND RETAIN THIS COPY
2-204R T50 B
1-203R T50 B
1-1AR T63 B
2-120R T63 B

012590

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.: ILD049818256 0000 1

2. Page 1 of 1

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

3. Generator's Name: PRECOAT METALS (formerly Litho-Strip)
4800 S. KILBOURN Ave. Chicago, IL 60632
4. Generator's Phone: 312 254-3400

A. State Manifest Document Number: IN 047374

B. State Generator's ID: 0316280011

5. Transporter 1 Company Name: STRAND TRUCKING
6. US EPA ID Number: ILD000646810
C. State Transporter's ID: 024
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
Griffith, Ind.
10. US EPA ID Number: IND016360265
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. DIRTY SOLVENT RECLAIM WASTE FLAMMABLE LIQUID (WASTE SOLVENT) N.O.S. FLAMMABLE NOS UN XXXX 1993 UN 1993 | 018 | DM | 02090 | 1 | 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: GAIL REH
Signature:
Month/Day/Year: 06/12/87

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: MILT POPA
Signature:
Month/Day/Year: 6 / 2 / 87

IN 047374

EPA Form 8700-22A (Rev. 11-85)

UHWM 2/LP2

T.S.D. DETACH AND RETAIN THIS COPY

MRC 38-12 GR TG3 B

012578

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.: ILD048181255 00001

2. Page 1 of: 1

Information in the shaded areas is not required by Federal law

3. Generator's Name: PRECOAT METALS
4800 S. Kilbourn Chicago, IL 60632
4. Generator's Phone (312) 254-3400

A. State Manifest Document Number: IN 047389
B. State Generator's ID: 031628001-1
C. State Transporter's ID: 024
D. Transporter's Phone: 312-385-8440

5. Transporter 1 Company Name: STRAND TRUCKING
6. US EPA ID Number: ILD000646810
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
10. US EPA ID Number: IND016360265
G. State Facility's ID: 918-089-002
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. DIRTY SOLVENT RECLAIM WASTE FLAMMABLE LIQUID (WASTE SOLVENT), N.O.S. FLAMMABLE NOS UN 1993 UN 1993 | 032 | DM | 016000 | W | 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.

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GENERATOR

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| GAIL REH | | OCT | 17 | 87 |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date: Month | Day | Year |
|---|---|---|---|---|
| MARK STRAND | | OCT | 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 item 19.

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| HARRY F Schmidt | | OCT | 17 | 87 |

IN 047389

EPA Form 8700-22A (Rev. 11-85)

UHWM 2/LP2

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Indiana State Board of Health
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**UNIFORM HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. / Manifest Document No.: ILD049813256 00001
2. Page 1 of: 1
Information in the shaded areas is not required by Federal law

3. Generator's Name: PRECOAT METALS
Mailing Address: 4800 S. Kilbourn, Chicago, IL 60632
4. Generator's Phone: 312 254-3400

A. State Manifest Document Number: IN 047377
B. State Generator's ID: 031628001

5. Transporter 1 Company Name: STRAND TRUCKING
6. US EPA ID Number: ILD000646810
C. State Transporter's ID: 024
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
Griffith, IN
10. US EPA ID Number: IND016360265
G. State Facility's ID: 918089000012
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. DIRTY SOLVENT RECLAIM WASTE FLAMMABLE LIQUID (WASTE SOLVENT) N.O.S. FLAMMABLE NOS UN 1993 UN 1993 | 01 | DM | 00110 | W | 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.

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GENERATOR

Printed/Typed Name: Gail Reh
Signature:
Month 07 Day 06 Year 87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Stan Stangl
Signature:
Date: Month 07 Day 06 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 07 Day 06 Year 87

IN 047377

EPA Form 8700-22A (Rev. 11-65) UHWM 2/LP2

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Indianapolis, IN 46207-7035

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**UNIFORM HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. / Manifest Document No.: ILD049813256 00001
2. Page 1 of: 1
Information in the shaded areas is not required by Federal law

3. Generator's Name: PRECOAT METALS
4800 S. Kilbourn Chicago, IL 60632
4. Generator's Phone ( 312 ) 254-3400

A. State Manifest Document Number: IN 047378
B. State Generator's ID: 0316280011

5. Transporter 1 Company Name: STRAND TRUCKING
6. US EPA ID Number: ILD000646810
C. State Transporter's ID: 0024
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
Gri-fith, IN
10. US EPA ID Number: IND016360265
G. State Facility's ID: 9118089000 02
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 | Waste No. |
|---|---|---|---|---|---|
| a. DIRTY SOLVENT RECLAIM WASTE FLAMMABLE LIQUID (WASTE SOLVENT) N.O.S. UN 1993 FLAMMABLE NOS UN 1993 | 007 | D M | 01186 | 1 | 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

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GENERATOR

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| Gail Reh | | | 11 | 17 |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials — Date

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| JAMES BATTON | | 01 | 11 | 87 |

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 |
|---|---|---|---|---|
| HAROLD F. SCHMIDT | | 01 | 14 | 87 |

IN 047378

18

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1-204R TS0 B

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**UNIFORM HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.: ILD049813256 — Manifest Document No.: 00001
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law

3. Generator's Name: PRECOAT METALS
4. Generator's Phone: 4800 S KILBOURN CHICAGO, ILL 60632

A. State Manifest Document Number: IN 047379
B. State Generator's ID: 0316280011

5. Transporter 1 Company Name: STRAND TRUCKING
6. US EPA ID Number: ILD000646810
C. State Transporter's ID: 024
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 GRIFFITH, IND
10. US EPA ID Number: IND016360265
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. DIRTY SOLVENT RECLAIM WASTE FLAMMABLE LIQUID (WASTE SOLVENT) N.O.S. FLAMMABLE NOS UN1993 | 032 | DM | 01600 | 1 | 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.

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| Printed/Typed Name | Signature | Month Day Year |
|---|---|---|
| GAIL REH | [signature] | 08 19 87 |

17. Transporter 1 Acknowledgement of Receipt of Materials — Date

| Printed/Typed Name | Signature | Month Day Year |
|---|---|---|
| JAMES BATTEN | [signature] | 08 19 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 | Signature | Month Day Year |
|---|---|---|
| HARROLD F. Schmidt | [signature] | 08 19 87 |

IN 047379

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

30-123TC T63 B
1-204TC T50 B

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**UNIFORM HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. / Manifest Document No.: ILD049813256 00001
2. Page 1 of: 1
Information in the shaded areas is not required by Federal law

3. Generator's Name: PRECOAT METALS
4800 S. Kilbourn Chicago, IL 60632
4. Generator's Phone ( 312 ) 254-3400

A. State Manifest Document Number: IN 047380
B. State Generator's ID: 03162800141

5. Transporter 1 Company Name: STRAND TRUCKING
6. US EPA ID Number: ILD000646810
C. State Transporter's ID: 024
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 Griffith, IND
10. US EPA ID Number: INDO11636026 5
G. State Facility's ID: 9178089000 2
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 | Waste No. |
|---|---|---|---|---|---|
| GENERATOR a. DIRTY SOLVENT RECLAIM WASTE FLAMMABLE LIQUID (WASTE SOLVENT) N.O.S. FLAMMABLE NOS UN 1993 | 01 5 | D M | 00180 | 1 | 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

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| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| Gail Reh | | 01 | 21 | 87 |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| THOMAS STRAND | | 01 | 21 | 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 | | 01 | 22 | 87 |

IN 047380

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14 12bTr T-63 8/31 M
1 204Tr T-50 8/31 M

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**UNIFORM HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. / Manifest Document No.: ILD049813256 000001

2. Page 1 of

Information in the shaded areas is not required by Federal law

3. Generator's Name: PRECOAT METALS
4800 S. Kilbourn Chicago, IL 60632
4. Generator's Phone ( 312 ) 254-3400

A. State Manifest Document Number: IN 047381

B. State Generator's ID: 0316280011

5. Transporter 1 Company Name: STRAND TRUCKING
6. US EPA ID Number: ILDDDD064580

C. State Transporter's ID: 024

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 Griffith, IND
10. US EPA ID Number: IND016360255

G. State Facility's ID: 918089002

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 KIRBY a. DIRTY SOLVENT RECLAIM WASTE FLAMMABLE LIQUID (WASTE SOLVENT) N.O.S. FLAMMABLE NOS UN 1993 | 027 | DIM | 01485 | 1 | 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

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| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| Gail Reh | | 09 | 14 | 87 |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials — Date

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| | | 09 | 14 | 87 |

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 |
|---|---|---|---|---|
| MILTON PUPA | | 9 | 17 | 87 |

IN 047381

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

22-126R-T-63 9/16/87 W
5-204R-T-50 9/17/87 W

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**UNIFORM HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. / Manifest Document No.: ILD049813256 / 000001

2. Page 1 of 1

Information in the shaded areas is not required by Federal law

3. Generator's Name: PRECOAT METALS

4. Generator's Phone: 312 254-3400

4800 S. Kilbourn Chicago, IL 60632

A. State Manifest Document Number: IN 047382

B. State Generator's ID: 0316280011

5. Transporter 1 Company Name: STRAND TRUCKING

6. US EPA ID Number: ILD000646810

C. State Transporter's ID: 024

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 Griffith, IND

10. US EPA ID Number: IND016360265

G. State Facility's ID: 918089000025

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. DIRTY SOLVENT RECLAIM WASTE FLAMMABLE LIQUID (WASTE SOLVENT) N.O.S. FLAMMABLE NOS UN 1993 | 015 | D M | 01855 | 1 | 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

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GENERATOR

Printed/Typed Name: Gail Reh

Signature:

Month Day Year: 10 02 87

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: HAROLD F. SCHMIDT

Signature:

Month Day Year: 10 05 87

EPA Form 8700-22A (Rev. 11-85)

UHWM 2/LP2

35-204 E-T-50 10/2/87 gm T.S.D. DETACH AND RETAIN THIS COPY

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Indiana State Board of Health
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**UNIFORM HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. / Manifest Document No.: ILD049813256 00001

2. Page 1 of: 1

Information in the shaded areas is not required by Federal law

3. Generator's Name
PRECOAT METALS
4800 S. Kilbourn Chicago, IL 60632
4. Generator's Phone ( 312 ) 254-3400

A. State Manifest Document Number: IN 047383

B. State Generator's ID: 0316280011

5. Transporter 1 Company Name: STRAND TRUCKING
6. US EPA ID Number: ILD000646810
C. State Transporter's ID: 024
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 Griffith, IND
10. US EPA ID Number: IND016360265
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. DIRTY SOLVENT RECLAIM WASTE FLAMMABLE LIQUID (WASTE SOLVENT) N.O.S. FLAMMABLE NOS UN 1993 | 54 | D M | 17816 | 1 | 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

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GENERATOR

Printed/Typed Name: GAIL REH
Signature:
Month 11 Day 12 Year 87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Date: Month 11 Day 16 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:
Signature:
Month Day Year

IN 047383

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

44-123R-T-63 11/18/87
10-204R T-50 11/18/87

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# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. / Manifest Document No.: ILD049813256 / 00001

2. Page 1 of: 1

Information in the shaded areas is not required by Federal law

3. Generator's Name
PRECOAT METALS
4800 S. Kilbourn Chicago, IL 60632

A. State Manifest Document Number: IN047384

4. Generator's Phone ( 312 ) 254-3400

B. State Generator's ID: 0316280011

5. Transporter 1 Company Name: STRAND TRUCKING

6. US EPA ID Number: ILD000646810

C. State Transporter's ID: 024

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 Griffith, IND

10. US EPA ID Number: IND016360265

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 | Waste No. |
|---|---|---|---|---|---|
| a. DIRTY SOLVENT RECLAIM WASTE FLAMMABLE LIQUID (WASTE SOLVENT) N.O.S. FLAMMABLE N.O.S. UN 1993 | 010 | DM | 01210 | 1 | 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: GAIL REH

Signature

Month Day Year: 12 17

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Leonard W. Strand

Signature: Leonard W. Strand

Date: Month 12 Day 17 Year 87

TRANSPORTER

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: HARRALD F. SCHMIDT

Signature

Month Day Year: 12 17 87

IN047384

EPA Form 8700-22A (Rev. 11-85)

UHWM 2/LP2

38-126R T-63 12/9/87
2-204R T-50 12/10/87

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012589

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

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Form Approved OMB No. 2000 0404 Expires 7 31 86

**UNIFORM HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. / Manifest Document No.: ILD049813256 00001

2. Page 1 of: 1

Information in the shaded areas is not required by Federal law

3. Generator's Name: Litho-Strip
4800 S. Kilbourn Chicago, IL 60632

4. Generator's Phone: 312 254-3400

A. State Manifest Document Number: IN 047366

B. State Generator's ID: 03162801111

5. Transporter 1 Company Name: STRAND TRUCKING

6. US EPA ID Number: ILD000646810

C. State Transporter's ID: 0024

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
Griffith, IN 46319

10. US EPA ID Number: IND016360265

G. State Facility's ID: 91LR0891000 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. SCRAP PAINT N.O.S. FLAMMABLE LIQUID WASTE FLAMMABLE LIQUID UN 1993 | 13B | D M | 12019 | 1 | 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.

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GENERATOR

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| Gail Reh | | 11 | 1 | 87 |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date: Month | Day | Year |
|---|---|---|---|---|
| Leonard M Strand | Leonard M Strand | 11 | 1 | 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 | Signature | Month | Day | Year |
|---|---|---|---|---|
| Harrend F Schmidt | Harrend F Schmidt | 11 | 05 | 87 |

IN 047366

EPA Form 8700-22A (Rev. 11-85)

UHWM 2/LP2

T.S.D. DETACH AND RETAIN THIS COPY

38-20YR TSD 6

012571

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

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Form Approved OMB No. 2000 0404 Expires 7 31 86

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. / Manifest Document No.: ILDOA9B1B2556 / 00001

2. Page 1 of 1

Information in the shaded areas is not required by Federal law

GENERATOR

3. Generator's Name: PRECOAT METALS
4800 S. Kilbourn Chicago, IL 60632

4. Generator's Phone (312 ) 254-3400

A. State Manifest Document Number: IN047386

B. State Generator's ID: 0316280011

5. Transporter 1 Company Name: STRAND TRUCKING

6. US EPA ID Number: ILDOOO646810

C. State Transporter's ID: 024

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 Griffith, IND

10. US EPA ID Number: INDO16360265

G. State Facility's ID: 918089002

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 | Waste No. |
|---|---|---|---|---|---|
| a. DIRTY SOLVENT RECLAIM WASTE FLAMMABLE LIQUID (WASTE SOLVENT) N.O.S. FLAMMABLE NOS UN 1993 | 004 | DM | 02420 | 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.

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Printed/Typed Name: GAIL REH — Signature — Month 01 Day 21 Year 86

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: THOMAS STRAND — Signature — Date: Month 01 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: HARRALD F. SCHMIDT — Signature — Month 01 Day 21 Year 87

IN 047386

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

42-126 T-63 1/26/88
2-204 T-30 1/28/22

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

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Form Approved OMB No. 2000 0404 Expires 7 31 86

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: ILD049813256
Manifest Document No.: 00001

2. Page 1 of 1

Information in the shaded areas is not required by Federal law

3. Generator's Name: PRECOAT METALS
4800 S. Kilbourn Chicago, IL 60632

4. Generator's Phone (312) 254-3400

A. State Manifest Document Number: IN 047385

B. State Generator's ID: 0316280011

5. Transporter 1 Company Name: STRAND TRUCKING

6. US EPA ID Number: ILD000646810

C. State Transporter's ID: 024

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 Griffith, IND

10. US EPA ID Number: IND016360265

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. DIRTY SOLVENT RECLAIM WASTE FLAMMABLE LIQUID ( WASTE SOLVENT) N.O.S. FLAMMABLE NOS UN 1993 | 38 | DM | 2090 | 1 | 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.

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Printed/Typed Name: GAIL REH
Signature: [signature]
Month Day Year: 01 05 88

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Leonard M Strand
Signature: Leonard M Strand
Date: 01 05 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: Harold F Schmidt
Signature: [signature]
Month Day Year: 01 05 88

GENERATOR / TRANSPORTER / FACILITY

IN 047385

EPA Form 8700-22A (Rev. 11-85)
35-126T- T-63 1/8/88
3-20T- T-63 1/8/88

UHWM 2/LP2

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0015371

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

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# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: I L D 0 4 9 8 1 3 2 5 6
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
PRECOAT METALS
4800 S. Kilbourn Chicago, IL 60632

4. Generator's Phone ( 312 ) 254-3400

A. State Manifest Document Number: IN 047387
B. State Generator's ID: 0 3 1 6 2 8 0 0 1 1

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: 024
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 Griffith, IND
10. US EPA ID Number: I N D 0 1 6 3 6 0 2 6 5
G. State 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) | 12. Containers No. | Type | 13. Total Quantity | 14. Unit Wt/Vol | I. Waste No. |
|---|---|---|---|---|---|
| a. DIRTY SOLVENT RECLAIM WASTE FLAMMABLE LIQUID (WASTE SOLVENT) N.O.S. FLAMMABLE NOS UN 1993 | 20 | D M | 01100 | 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.

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Printed/Typed Name: GAIL REH
Signature: [signature]
Month Day Year: 02 01 88

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Leonard M Strand
Signature: Leonard M Strand
Date: 02 01 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
Month Day Year: 02 01 88

GENERATOR

TRANSPORTER

FACILITY

IN 047387

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

20-126R T-63 2/3/88 T.S.D. DETACH AND RETAIN THIS COPY

0015373

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

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**UNIFORM HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No.: ILD049813256 — Manifest Document No.: 00001
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law

3. Generator's Name: PRECOAT METALS
4800 S. Kilbourn Chicago, IL 60632
4. Generator's Phone (312) 254-3400

A. State Manifest Document Number: IN 047388
B. State Generator's ID: 0316289011

5. Transporter 1 Company Name: STRAND TRUCKING
6. US EPA ID Number: ILD000646810
C. State Transporter's ID: 0024
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 Griffith, IND
10. US EPA ID Number: IND016360265
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. DIRTY SOLVENT RECLAIM WASTE FLAMMABLE LIQUID (WASTE SOLVENT) N.O.S. FLAMMABLE NOS UN 1993 | 36 | DM | 01930 | G | F005 |
| b. | | | | | |
| c. | | | | | |
| d. ACCEPT 35 DR. | 35 | DM | 01875 | G | F005 |

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

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Printed/Typed Name: GAIL REH — Signature: [signature] — Month 02 Day 23 Year 88

17. Transporter 1 Acknowledgement of Receipt of Materials — Date

Printed/Typed Name: [illegible] — Signature: [signature] — Month 02 Day 23 Year 88

18. Transporter 2 Acknowledgement of Receipt of Materials — Date

Printed/Typed Name: THOMAS STRAND — Signature: [signature] — Month 03 Day 11 Year 88

19. Discrepancy Indication Space

REJECT 1 DR - MAT'L DOES NOT MATCH PROCUREMENT SAMPLE. (55 GAL)

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

Printed/Typed Name: JAMES MURPHY — Signature: [signature] — Month 02 Day 23 Year 88

IN 047388

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

(1710) 32-126Z T-63 2/25/88
(165) 3-204Z T-50 2/25/88

T.S.D. DETACH AND RETAIN THIS COPY 55 1-REJECT 3/1/88

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

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# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: ILD049813256 — Manifest Document No.: 00001
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: PRECOAT METALS, 4800 S. Kilbourn Chicago, IL 60632
4. Generator's Phone: 312 254-3400
A. State Manifest Document Number: INA 0220295
B. State Generator's ID: 0316280011
5. Transporter 1 Company Name: STRAND TRUCKINS
6. Use EPA ID Number: ILD000646810
C. State Transporter's ID: 0024
D. Transporter's Phone: 312-385-3440
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, IN
10. Use EPA ID Number: IND016360265
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. DIRTY SOLVENT RECLAIM WASTE FLAMMABLE LIQUID (WASTE SOLVENT) N.O.S. FLAMMABLE NOS UN 1993 | 029 | DM | 01596 | 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

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Printed/Typed Name: GAIL REH — Signature: [signature] — Month: 03 Day: 23 Year: 88

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: THOMAS STRAND — Signature: [signature] — Month: 03 Day: 23 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: 03 Day: 23 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 0220295

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

8-126FCT63 1 MARINE SHALE 12/13/88 78526

0020295

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

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# 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·0·4·9·8·1·3·2·5·6 | 0·0·0·0·1 | | |

3. Generator's Name and Mailing Address
PRECOAT METALS
4800 S. Kilbourn Chicago, IL 60632
4. Generator's Phone (312) 254-3400

A. State Manifest Document Number: INA 0220296
B. State Generator's ID: 0 3 1 6 2 8 0 0 1 1
C. State Transporter's ID: 0024
D. Transporter's Phone: 312-385-3440

5. Transporter 1 Company Name: STRAND TRUCKING
6. Use EPA ID Number: I·L·D·0·0·0·6·4·6·8·1·
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, IN
10. Use EPA ID Number: I·N·D·0·1·6·3·6·0·2·6·5
G. State 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) | 12. Containers No. | Type | 13. Total Quantity | 14. Unit Wt/Vol. | Waste No. |
|---|---|---|---|---|---|---|
| GENERATOR a. | DIRTY SOLVENT RECLAIM WASTE FLAMMABLE LIQUID (WASTE SOLVENT) N.O.S. FLAMMABLE NOS UN 1993 | 040 | DM | 09200 | G | F005 |
| b. | | | | | | |
| c. | | | | | | |
| d. | 39 DRUMS ACCEPTED 1 DRUM REJECTED | 039 | DM | 02.1.43 | G | F005 |

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

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| Printed/Typed Name | Signature | Date Month | Day | Year |
|---|---|---|---|---|
| Gail Reh | | 04 | 01 | 88 |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date Month | Day | Year |
|---|---|---|---|---|
| THOMAS STRAND | | 04 | 04 | 88 |

18. Transporter 2 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date Month | Day | Year |
|---|---|---|---|---|
| Leonard M Strand | Leonard M Strand | 04 | 15 | 88 |

FACILITY

19. Discrepancy Indication Space
1 DRUM REJECTED - MATERIAL DOES NOT MATCH PRESHIPMENT SAMPLE JM

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 |
|---|---|---|---|---|
| HARROLD F SCHMIDT | | 04 | 04 | 88 |

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

INA 0220296

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

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35-126RT63 4/5 M
4-20RT50 4/5 M
1 Rejected 4/15/88

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 9 8 1 3 2 5 6
Manifest Document No.: 0 0 0 0 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
PRECOAT METALS
4800 S. Kilbourn Chicago, IL 60632
4. Generator's Phone (312) 254-3400

A. State Manifest Document Number: INA 0220297
B. State Generator's ID: 0 3 1 6 2 8 0 0 1 1

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: 0024
D. Transporter's Phone: 312-385-3440

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, IN
10. Use EPA ID Number: I N D 0 1 6 3 6 0 2 6 5
G. State 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) | 12. Containers No. | Type | 13. Total Quantity | 14. Unit Wt./Vol. | Waste No. |
|---|---|---|---|---|---|
| a. DIRTY SOLVENT RECLAIM WASTE FLAMMABLE LIQUID (WASTE SOLVENT) N.O.S. FLAMMABLE NOS UN 1993 | 029 | DM | 01575 | 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: Gail Reh
Signature: [signature]
Month: 04 Day: 15 Year: 88

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Leonard M Strand
Signature: Leonard M Strand
Month: 04 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: Harold F Schmidt
Signature: [signature]
Month: 04 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 0220297

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
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PAGE 8 (white) TRANSPORTER 2 COPY

26-123RT63 4/9M
3-204RT53 4/9M

0015277

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.0.4.9.8.1.3.2.5.6 — 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: PRECOAT METALS, 4800 S. KILBOURN CHICAGO, IL 60632

4. Generator's Phone: 312 254-3400

A. State Manifest Document Number: INA 0220298

B. State Generator's ID: 0 3 1 6 2 8 0 0 1 1

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: 0024

D. Transporter's Phone: 312-385-3440

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, IN

10. Use EPA ID Number: I.N.D.0.1.6.3.6.0.2.6.5

G. State 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) | 12. Containers No. | Type | 13. Total Quantity | 14. Unit Wt./Vol. | Waste No. |
|---|---|---|---|---|---|
| a. DIRTY SOLVENT RECLAIM WASTE FLAMMABLE LIQUID (WASTE SOLVENT) N.O.S. FLAMMABLE NOS UN 1993 | 0 4 4 | DM | 0 2 4 2 0 | 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.

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| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| Robert Kilian | Robert Kilian | 05 | 12 | 88 |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| THOMAS STRAND | Thomas Strand | 05 | 12 | 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 |
|---|---|---|---|---|
| HARROLD F Schmidt | Harrold F Schmidt | 05 | 12 | 88 |

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Previous editions are obsolete.
State Form 11865

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PAGE 8 (white) TRANSPORTER 2 COPY

1-204TCT50 5/13 M
37-126TCT63 5/16 M 5-204TCT50 5/17M 1-204TCT50 5/26M

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 0220298

0015378

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

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# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: I.L.D.0.4.9.8.1.3.2.5.6 — Manifest Document No.: 00003
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: PRECOAT METALS, 4800 S. KILBOURN CHICAGO, IL 60632
4. Generator's Phone: 312 254-3400
A. State Manifest Document Number: INA 0220502
B. State Generator's ID: 0316280011

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: 0024
D. Transporter's Phone: 312-385-3440

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, IN
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. | Waste No. |
|---|---|---|---|---|---|
| a. DIRTY SOLVENT RECLAIM WASTE FLAMMABLE LIQUID (WASTE SOLVENT) N.O.S. FLAMMABLE NOS UN 1993 | 029 | DM | 01595 | G | F005 |
| b. SCRAP PAINT N.O.S. FLAMMABLE LIQUID WASTE FLAMMABLE LIQUID UN 1993 | 007 | DM | 00385 | 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, 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: ROBERT KILIAN — Signature: Robert Kilian — Date: Month 06 Day 10 Year 88

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Leonard M Strand — Signature: Leonard M Strand — Date: Month 06 Day 10 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: Norman E Schmidt — Signature: [signature] — Month 1 Day 12 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 0220502

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
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29a - 126 T63 6/16
5b - 126 T63 6/16
2b - 204 T63 6/16

0015380

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

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# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: I·L·D·0·4·9·8·1·3·2·5·6 — Manifest Document No.: 0021
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: PRECOAT METALS, 4800 S. KILBOURN, CHICAGO, IL 60632
4. Generator's Phone: 312 254-3400
A. State Manifest Document Number: INA 0220501
B. State Generator's ID: 0 3 1 6 2 8 0 0 1 1
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: 0024
D. Transporter's Phone: 312-385-3440
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, IN
10. Use EPA ID Number: I·N·D·0·1·6·3·6·0·2·6·5
G. State 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) | 12. Containers No. | Type | 13. Total Quantity | 14. Unit Wt./Vol. | Waste No. |
|---|---|---|---|---|---|
| a. DIRTY SOLVENT RECLAIM WASTE FLAMMABLE LIQUID (WASTE SOLVENT) N.O.S. FLAMMABLE NOS UN 1993 | 35 | D·M | 01925 | 6 | F005 |
| b. ~~SCRAP PAINT N. O. S. FLAMMABLE LIQUID WASTE FLAMMABLE LIQUID UN 1993~~ | | ~~D·M~~ | | ~~8~~ | ~~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, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

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Printed/Typed Name: ROBERT KILIAN — Signature: Robert Kilian — Date: Month 07 Day 08 Year 88

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Leonard M Strand — Signature: Leonard M Strand — Date: Month 07 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: JAMES MURPHY — Signature: James Murphy — Month 07 Day 11 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 0220501

EPA Form 8700-22 (Rev. 9-86)
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14-126RT63 7/11
19-126RT63 7/12 3-204RT50 7/12

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

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# 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 9 8 1 3 2 5 6 | | | |

3. Generator's Name and Mailing Address
PRECOAT METALS
4800 S. KILBOURN CHICAGO, IL 60632

A. State Manifest Document Number: INA 0220504

4. Generator's Phone ( 312 ) 254-3400

B. State Generator's ID: 0 3 1 6 2 8 0 0 1 1

5. Transporter 1 Company Name: Stericycle Trucking

6. US EPA ID Number: I L D 0 0 0 6 4 6 8 1 0

C. State Transporter's ID: 0024

D. Transporter's Phone: 312-385-3440

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

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

G. State Facility's ID: 9 3 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) | 12. Containers No. | Type | 13. Total Quantity | 14. Unit Wt./Vol. | I. Waste No. |
|---|---|---|---|---|---|
| a. DIRTY SOLVENT RECLAIM WASTE FLAMMABLE LIQUID (WASTE SOLVENT) N.O.S. FLAMMABLE NOS UN 1993 | 02 | DM | 110 | G | F005 |
| b. SCRAP PAINT N.O.S. FLAMMABLE LIQUID WASTE FLAMMABLE LIQUID UN 1993 | 01 | DM | 055 | 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

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| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| ROBERT KILIAN | Robert Kilian | 08 | 02 | 88 |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| [illegible] | [illegible] | 08 | 02 | 88 |

18. Transporter 2 Acknowledgement of Receipt of Materials

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

FACILITY

19. Discrepancy Indication Space
20-126 RT 63 88/4
1-254 RT 50 84

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 | James Murphy | 08 | 05 | 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 0220504

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001383

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

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# 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 4 9 8 1 3 2 5 6 / [illegible] | | |

3. Generator's Name and Mailing Address
PRECOAT METALS
4800 S. KILBOURN CHICAGO, IL 60632

A. State Manifest Document Number: INA 0220503

4. Generator's Phone: 312 254-3400

B. State Generator's ID: 0 3 1 6 2 8 0 0 1 1

5. Transporter 1 Company Name: Stroud Trucking

6. US EPA ID Number: I L D 0 0 0 6 4 6 8 1 6

C. State Transporter's ID: 0024

D. Transporter's Phone: 312-385-3440

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

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

G. State Facility's ID: 9 1 3 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. DIRTY SOLVENT RECLAIM WASTE FLAMMABLE LIQUID (WASTE SOLVENT) N.O.S. FLAMMABLE NOS UN 1993 | 001 | DM | 01100 | G | D001 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

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GENERATOR — Printed/Typed Name: ROBERT KILIAN — Signature: [signature] — Date: Month 8 Day 17 Year 88

TRANSPORTER

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

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

FACILITY

19. Discrepancy Indication Space
19-126TC-T63 8/26
1-204TC,TSO 8/26

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: ALVIN WHITAKER — Signature: [signature] — Month 8 Day 18 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 0220503

EPA Form 8700-22 (Rev. 9-86)
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PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

001356-1

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 9.8.1.3.2.5.6 — Manifest Document No.: 00026
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: PRECOAT METALS, 4800 S. Kilbourn, Chicago, IL 60632
4. Generator's Phone: 312 254-3400
A. State Manifest Document Number: INA 0220505
B. State Generator's ID: 0316280011
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: 0024
D. Transporter's Phone: 312-385-3440
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 IN 46319
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. | Waste No. |
|---|---|---|---|---|---|
| a. DIRTY SOLVENT RECLAIM WASTE FLAMMABLE LIQUID (WASTE SOLVENT) N.O.S. FLAMMABLE NOS UN 1993 | 037 | D.M | 01485 | G | F005 |
| b. SCRAP PAINT N.O.S. FLAMMABLE LIQUID WASTE FLAMMABLE LIQUID UN1993 | 001 | D.M | 00055 | 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, 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: Robert Kilian — Signature: Robert Kilian — Date: Month 08 Day 31 Year 88

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: THOMAS STRAND — Signature: [signature] — Date: Month 08 Day 31 Year 88

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

19. Discrepancy Indication Space
24A-126TCT63 9/2
(147 GALS) 3A, B 204TCT50 9/2
(37 GALS)

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: BRIAN PIDA — Signature: [signature] — Date: Month 9 Day 1 Year 1

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 0220505

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

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PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

3 PAILS A (18 GALS) } ASH GROVE 11/15/88 AR 265282
3 PAILS B (18 GALS)

0015385

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 9 8 1 3 2 5 6 — 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
PRECOAT METALS
4800 S. KILBOURN CHICAGO, IL 60632

A. State Manifest Document Number: INA 0220506

4. Generator's Phone (312) 254-3400

B. State Generator's ID: 0 3 1 6 2 8 0 0 1 1

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: 0024
D. Transporter's Phone: 312-385-3440

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, IN 46319

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

G. State 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) | 12. Containers No. | Type | 13. Total Quantity | 14. Unit Wt./Vol. | I. Waste No. |
|---|---|---|---|---|---|
| a. DIRTY SOLVENT RECLAIM WASTE FLAMMABLE LIQUID (WASTE SOLVENT) N.O.S. FLAMMABLE NOS. UN 1993 | 038 | D M | 00090 | G | F005 |
| b. SCRAP PAINT N.O.S. FLAMMABLE LIQUID WASTE FLAMMABLE LIQUID UN 1993 | 003 | D.M | 00165 | 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, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

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Printed/Typed Name: ROBERT KILIAN — Signature: Robert Kilian — Date: Month 09 Day 08 Year 88

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: [illegible] — Signature: [illegible] — Date: Month 09 Day 08 Year 88

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

19. Discrepancy Indication Space
8B PAILS (48 GALS) ASH GROVE 12/5/88 90101

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] — Date: Month 09 Day 08 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 0220506

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

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PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

37A 126TCT63 9/30
1A 204TCT50 9/30
2B 204TCT50 9/30
1B (7 GAL) 204TCT50 11/18/88

0015336

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 9 8 1 3 2 5 6
Manifest Document No.: 00032
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
PRECOAT METALS
4800 S. KILBOURN CHICAGO, IL 60632
4. Generator's Phone (312) 254-3400

A. State Manifest Document Number: INA 0220508
B. State Generator's ID: 0 3 1 6 2 8 0 0 1 1
C. State Transporter's ID: 0024
D. Transporter's Phone: 312-385-3440
E. State Transporter's ID:
F. Transporter's Phone:

5. Transporter 1 Company Name: STRAND TRUCKING
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 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: 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) | 12. Containers No. | Type | 13. Total Quantity | 14. Unit Wt./Vol. | I. Waste No. |
|---|---|---|---|---|---|
| a. DIRTY SOLVENT RECLAIM WASTE FLAMMABLE LIQUID (WASTE SOLVENT) N.O.S. FLAMMABLE NOS UN 1993 | 040 | D M | 02200 | G | F005 |
| b. SCRAP PAINT N.O.S. FLAMMABLE LIQUID WASTE FLAMMABLE LIQUID UN 1993 | | D M | | 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, 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: ROBERT KILIAN
Signature: Robert Kilian
Date: Month 10 Day 26 Year 88

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: THOMAS STRAND
Signature: [signature]
Date: Month 10 Day 26 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
Month 10 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 0220508

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

DISTRIBUTION:
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PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

39-124RT63 1/5/31
1-204RT50 1/5/31

0015366

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 9 8 1 3 2 5 6
Manifest Document No.: 0 1 7 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
PRECOAT METALS
4800 S. KILBOURN CHICAGO, IL 60632

4. Generator's Phone (312) 254-3400

A. State Manifest Document Number: INA 0220509
B. State Generator's ID: 0 3 1 6 2 8 0 0 1 1

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: 0024
D. Transporter's Phone: 312-385-3440

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, IN 46319

10. Use EPA ID Number: I N D 0 1 6 3 6 0 2 6 5
G. State 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) | 12. Containers No. | Type | 13. Total Quantity | 14. Unit Wt./Vol. | I. Waste No. |
|---|---|---|---|---|---|
| a. DIRTY SOLVENT RECLAIM WASTE FLAMMABLE LIQUID (WASTE SOLVENT) N.O.S. FLAMMABLE NOS UN 1993 | 020 | D M | 01100 | G | F005 |
| b. SCRAP PAINT N.O.S. FLAMMABLE LIQUID WASTE FLAMMABLE LIQUID UN 1993 | | D M | | 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

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Printed/Typed Name: ROBERT KILIAN
Signature: Robert Kilian
Date: Month 11 Day 08 Year 88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Leonard M Strand
Signature: Leonard M Strand
Date: Month 11 Day 08 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: A. Whitaker
Signature: Whitaker A
Month 11 Day 8 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 0220509

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

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PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

6-126RT63 11/10
4-126RT63 11/11

0015356

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·0·4·9·8·1·3·2·5·6 — Manifest Document No. 0000 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
PRECOAT METALS
4800 S. KILBOURN CHICAGO, IL 60632

A. State Manifest Document Number INA 0220510

4. Generator's Phone (312) 254-3400

B. State Generator's ID 0 3 1 6 2 8 0 0 11

5. Transporter 1 Company Name STRAND TRUCKING — 6. US EPA ID Number I·L·D·0·0·6·4·6·8·1·1 — C. State Transporter's ID 0024 — D. Transporter's Phone (312) 385-3440

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 I·N·D·0·1·6·3·6·0·2·6·5 — G. State Facility's ID 9 1 8 0 8 9 0 0 0 2 — 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 | Unit Wt./Vol. | 14. Waste No. |
|---|---|---|---|---|---|
| a. DIRTY SOLVENT, RECLAIM WASTE FLAMMABLE LIQUID (WASTE SOLVENT) N.O.S. FLAMMABLE NOS UN 1993 | 035 | DM | 01725 | G | F005 |
| b. SCRAP PAINT N.O.S. FLAMMABLE LIQUID WASTE FLAMMABLE LIQUID UN 1993 | 002 | DM | 00110 | 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, 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 KILIAN — Signature — Date: Month 12 Day 01 Year 88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: [illegible] STRAND — Signature — Date: Month 12 Day 01 Year 88

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

FACILITY

19. Discrepancy Indication Space
35A-126RT63 12/6
2B-204RT50 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 — Date: Month 12 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 0220510

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

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001231

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 L D 0 4 9 8 1 3 2 5 6 | 0 0 0 3 7 | | |

**GENERATOR**

3. Generator's Name and Mailing Address
PRECOAT METALS
4800 S. Kilbourn, Chicago, IL 60632

A. State Manifest Document Number: INA 0220513

4. Generator's Phone (312) 254-3400

B. State Generator's ID: 0316280011

5. Transporter 1 Company Name: Mr. Franks Disposal

6. Use EPA ID Number: I L D 0 6 9 5 0 6 1 6 0

C. State Transporter's ID: IL 0079

D. Transporter's Phone: 312/720-0700

7. Transporter 2 Company Name: MR. FRANKS

8. Use EPA ID Number: I L D 0 6 9 5 0 6 1 6 0

E. State Transporter's ID: IL 0079

F. Transporter's Phone: 312/720-0700

9. Designated Facility Name and Site Address
American Chemical Service
420 S. Colfax
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: 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, UN1993 NOS | 0 0 1 | T T | 05300 | G | D001 |
| b. | | | | | |
| c. | | | | | |
| d. | 0 0 1 | T T | 0 0 9 0 0 | G | D001 |

J. Additional Descriptions for Materials Listed Above
11.A SCRAP PAINT

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
5300
E
900

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of t... proper shipping name and are classified, packed, marked, and labeled ... according to applicable international and national government regulati...
If I am a large quantity generator, I certify that I have a program in ... determined to be economically practicable and that I have selected ... which minimizes the present and future threat to human health and ... effort to minimize my waste generation and select the best waste ma...
...ibed above by ... transport by highway ...
...aste generated to the degree I have ... or disposal currently available to me ... generator, I have made a good faith ... hat I can afford.

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| Robert Kilian | | 12 | 03 | 88 |

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| JACK McCLEVERTY | | 12 | 03 | 88 |

18. Transporter 2 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| JOM POITER | | 01 | 06 | 89 |

**FACILITY**

19. Discrepancy Indication Space
BALANCE OF T/T TOO THICK TO PROCESS; REJECT 4400 GAL 1/6/89

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 | 12 | 05 | 88 |

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

DISTRIBUTION:
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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

400 GAL 204 TT TSO 12/8/88
500 GAL 204 TT TSO 12/20/88
REJECT 4400 GAL 1/6/89

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 0220513

0013355

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·0·4·9·8·1·3·2·5·6 — Manifest Document No. 000 01
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
PRECOAT METALS
4800 S. KILBOURN CHICAGO, IL 60632

A. State Manifest Document Number: INA 0220511

4. Generator's Phone (312) 254-3400

B. State Generator's ID: 0 3 1 6 2 8 0 0 1 1

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: 0024

D. Transporter's Phone: 312-385-3440

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, IN 46319

10. Use EPA ID Number: I·N·D·0·1·6·3·6·0·2·6·5

G. State 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) | 12. Containers No. | Type | 13. Total Quantity | 14. Unit Wt/Vol. | I. Waste No. |
|---|---|---|---|---|---|
| a. DIRTY SOLVENT RECLAIM WASTE FLAMMABLE LIQUID (WASTE SOLVENT) N.O.S. FLAMMABLE NOS UN 1993 | 042 | D·M | 023.10 | G | F005 |
| b. SCRAP PAINT N.O.S. FLAMMABLE LIQUID WASTE FLAMMABLE LIQUID UN 1993 | 027 | D·M | 01485 | 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, 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 KILIAN — Signature: Robert Kilian — Date: Month 01 Day 06 Year 89

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: THOMAS STRAND — Signature: Thomas Strand — Date: Month 01 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
17A-1 26 T 63 X 19 B-20 T 50 X 10 (20)
23A-1 26 T 63 X 10 8B-20 T 50 X 11 (20)
11 A PAILS (66 GAL) ASH (non) 8/15/89 9018

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: Whitaker A — Date: Month 1 Day 9 Year 89

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

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PAGE 8 (white) TRANSPORTER 2 COPY

44 GAL 20 T 50 6/14/89

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 0220511

0016831

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.0.4.9.8.1.3.2.5.6 | Manifest Document No.: 00004
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
Precoat Metals
4800 S. Kilbourn, Chicago, IL 60632

A. State Manifest Document Number: INA 0220514
B. State Generator's ID: 0316280011
4. Generator's Phone (312) 254-3400
5. Transporter 1 Company Name: Strand Trucking | 6. Use EPA ID Number: I.L.D.0.0.0.6.4.5.8.1.0 | C. State Transporter's ID: 0024 | D. Transporter's Phone: 312-385-3440
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 IN 46319
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 Solvent Flammable Liquid N.O.S. UN#1993 | 042 | DM | 02310 | G | F005 |
| b. Waste Flammable Liquid N.O.S. UN#1993 | 015 | DM | 0825 | G | D001 |
| 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
1
11a Solvent - off specification
b Paint - off specification

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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 Killian | Signature | Month: 01 | Day: 27 | Year: 89

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

TRANSPORTER

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

19. Discrepancy Indication Space

FACILITY

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 0220514

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

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42A.126272 1/21 9B-2047250 4B-2047250 2B 2ND MAILING SCALE 8/2/89 9/14/52

0016832

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

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# 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 4 9 8 1 3 2 5 6 | 00007 | | |

**GENERATOR**

3. Generator's Name and Mailing Address
Precoat Metals
4800 S. Kilbourn, Chicago, IL 60632

4. Generator's Phone ( 312 ) 254-3400

A. State Manifest Document Number: INA 0220515
B. State Generator's ID: 0316280011

5. Transporter 1 Company Name: Strand Trucking
6. Use EPA ID Number: I L D 0 0 0 5 4 6 8 1 0
C. State Transporter's ID: 0024
D. Transporter's Phone: 312-385-3440

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, IN 46319

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. | 12. Containers Type | 13. Total Quantity | 14. Unit Wt/Vol. | I. Waste No. |
|---|---|---|---|---|---|
| a. Waste Solvent Flammable Liquid N.O.S. UN#1993 | 026 | D.M | -1430 | G | F005 |
| b. ~~Waste Flammable Liquid N.O.S. UN#1993~~ | | ~~D.M~~ | | ~~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
11a Solvent - off specification
~~b Paint - off specification~~

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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 |
|---|---|---|---|---|
| Robert Kilian | Robert Kilian | 02 | 07 | 89 |

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date Month | Day | Year |
|---|---|---|---|---|
| THOMAS STRAND | Thomas Strand | 02 | 07 | 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 | Date Month | Day | Year |
|---|---|---|---|---|
| Whitaker Quinn | Whitaker Quinn | 02 | 07 | 89 |

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State Form 11865 26-12677 2/9

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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 0220515

0016833

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

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# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I.L.D.0.4.9.8.1.3.2.5.6 — Manifest Document No. 00009

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
PRECOAT METALS
4800 S. KILBOURN CHICAGO IL 60632

4. Generator's Phone (312) 254-3400

A. State Manifest Document Number: INA 0220516
B. State Generator's ID: 0316280011
C. State Transporter's ID: 0024
D. Transporter's Phone: 312/385-3440
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: Strand Trucking
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, Griffith, IN 46319
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 Solvent Flammable Liquid N.O.S. UN#1993 | 038 | DM | 2090 | G | F005 |
| b. ~~Waste Flammable Liquid N.O.S. UN#1993~~ | | ~~DM~~ | | ~~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
11a Solvent - off specification
~~b Paint - off specification~~

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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: Robert Kilian — Signature: Robert Kilian — Date: Month 03 Day 01 Year 89

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: THOMAS STRAND — Signature: Thomas Strand — Date: Month 03 Day 01 Year 89

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

19. Discrepancy Indication Space
36-126TCT63 3/6
2-204TCT50 3/6

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: A Whitaker — Date: Month 3 Day 2 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 0220516

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
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0016834

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

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# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I L D 0 4 9 8 1 3 2 5 6 — Manifest Document No. 6001.3
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
PRECOAT METALS
4800 S. Kilbourn Chicago, IL 60632

A. State Manifest Document Number: INA 0220517
B. State Generator's ID: 0316280011
4. Generator's Phone (312) 254-3400
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: 0024
D. Transporter's Phone: 312-335-3440
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: 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. | 12. Containers Type | 13. Total Quantity | 14. Unit Wt/Vol. | I. Waste No. |
|---|---|---|---|---|---|
| a. Waste Solvent Flammable Liquid N.O.S. UN#1993 | 044 | DM | 2420 | G | F005 |
| b. ~~Waste Flammable Liquid N.O.S. UN#1993~~ | | DM | | 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
11a Solvent-off specification
~~b Paint-off specification~~

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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 Kilian — Signature — Date: Month 04 Day 03 Year 89

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials — Printed/Typed Name: THOMAS STRAND — Signature — Date: Month 04 Day 03 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 — Date: Month 04 Day 04 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 0220517

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

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PAGE 8 (white) TRANSPORTER 2 COPY

16-126TC163 4/6
28-126TC163 4/7

0016835

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

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# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: I.L.D.0.4.9.8.1.3.2.5.6
Manifest Document No.: 00017
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
PRECOAT METALS
4800 S. Kilbourn, Chicago, IL 60632

A. State Manifest Document Number: INA 0220518
B. State Generator's ID: 0316280011

4. Generator's Phone (312) 254-3400

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: 0024
D. Transporter's Phone: 312/385-3440

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, IN 46319
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 Solvent Flammable Liquid N.O.S. UN#1993 | 044 | DM | 2420 | G | F005 |
| b. Waste Flammable Liquid N.O.S. UN#1993 | 006 | DM | 330 | G | D001 |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
11a Solvent-off specification
b Paint-off specification

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: Robert Kilian
Signature: Robert Kilian
Date: Month 05 Day 01 Year 89

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Thomas Strand
Signature: Thomas Strand
Date: Month 05 Day 01 Year 89

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

19. Discrepancy Indication Space
A
43-126TCT63 5/4
1-204TCT50 5/4
B
6-204TCT50 5/4

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 5 Day 2 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 0220518

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

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PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
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PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

0016836

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

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# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I.L.D.0.4.9.8.1.3.2.5.6 Manifest Document No. 00017
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
Precoat Metals
4800 S. Kilbourn, Chicago, IL 60632

A. State Manifest Document Number: INA 0334102

4. Generator's Phone ( 312 ) 254-3400

B. State Generator's ID: 0316280011

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: 0024
D. Transporter's Phone: 312/385-3440

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, IN 46319
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 Solvent Flammable Liquid N.O.S. UN#1993 | 34 | DM | 1870 | G | F005 |
| b. ~~Waste Flammable Liquid N.O.S. UN#1993~~ | | DN | | G | ~~D001~~ |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
11a Solvent-off specification
b Paint-off specification

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: Robert Killian — Signature: [signature] — Date: Month 5 Day 1 Year 89

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: THOMAS STRAIN — Signature: [signature] — Date: Month 5 Day 1 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 A — Signature: [signature] — Date: Month 5 Day 18 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.

INA0334102

0016837

...EPARTMENT OF ENVIRONMENTAL MANAGEMENT
... OF SOLID AND HAZARDOUS WASTE MANAGEMENT
...Box 7035
...dianapolis, 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.: ILD049813256 — Manifest Document No.: 0020
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
Precoat Metals
4800 S. Kilbourn, Chicago, IL 60632

4. Generator's Phone ( 312 ) 254-3400

A. State Manifest Document Number: INA 0334101
B. State Generator's ID: 0316280011

5. Transporter 1 Company Name: Strand Trucking
6. Use EPA ID Number: ILD000646810
C. State Transporter's ID: 0024
D. Transporter's Phone: 312-385-3440

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, IN 46319

10. Use EPA ID Number: IND016360265
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 Solvent Flammable Liquid N.O.S. UN#1993 | 34 | DM | 1870 | G | F005 |
| b. ~~Waste Flammable Liquid N.O.S. UN#1993~~ 212 | | ~~DM~~ | | ~~G~~ | ~~D001~~ |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
11a Solvent-off specification
b Paint-off specification

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.

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Printed/Typed Name: Robert Kilian — Signature: [signature] — Date: Month 06 Day 06 Year 89

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: [illegible] — Signature: [signature] — Date: Month 06 Day 06 Year 89

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

19. Discrepancy Indication Space
33-126TCT63 6/8
1.204TCT50 6/8

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] — Date: Month 06 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.

INA0334101

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY

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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.0.4.9.8.1.3.2.5.6 | Manifest Document No. 00600 | 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
PRECOAT METALS
4800 S. Kilbourn, Chicago, IL 60632
4. Generator's Phone ( 312 ) 254-3400

A. State Manifest Document Number: INA 0334103
B. State Generator's ID: 0316280011

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: 0024
D. Transporter's Phone: 312-385-3440

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, IN 46319
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 Solvent Flammable Liquid N.O.S. UN#1993 | 28 | D.M | 1540 | G | F005 |
| b. Waste Flammable Liquid N.O.S. UN#1993 | 2 | D.M | 110 | G | D001 |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
11a Solvent-off specification
b Paint-off specification

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.

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GENERATOR
Printed/Typed Name: Robert Killian
Signature:
Date: Month 06 Day 03 Year 89

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: INDIANA STRAND
Signature:
Date: Month 06 Day 12 Year 89

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: 9A-212TCT50 7/89 A
Signature:
Date: Month . Day . Year .

FACILITY
19. Discrepancy Indication Space
9A-212TCT50 6/89
9A-204TCT50 6/89
9A-[illegible]TCT50 6/89
2B. 204TCT50 6/89 B

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:
Date: Month 06 Day 26 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 0334103

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

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

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# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: I.L.D.0.4.9.8.1.3.2.5.6
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
PRECOAT METALS
4800 S. Kilbourn, Chicago, IL 60632
4. Generator's Phone ( 312 ) 254-3400

A. State Manifest Document Number: INA 0334104
B. State Generator's ID: 0316280011

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: 0024
D. Transporter's Phone: 312-385-3440

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, IN 46319
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. | 12. Containers Type | 13. Total Quantity | 14. Unit Wt/Vol. | I. Waste No. |
|---|---|---|---|---|---|
| a. Waste Solvent Flammable Liquid N.O.S. UN#1993 | 030 | D.M | 01650 | G | F005 |
| b. Waste Flammable Liquid N.O.S. UN#1993 | | D.M | | G | D001 |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
11a Solvent-off specification
b Paint-off specification

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.

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GENERATOR — Printed/Typed Name: Robert Killian Robert Runtz | Signature: Robert Runtz | Date: Month 05 Day 07 Year 89

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: THOMAS STRAND | Signature: Thomas Strand | Date: Month 05 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 item 19.
Printed/Typed Name: STEVE KULAVICK | Signature: Steve Kulavick | Date: Month 05 Day 08 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 0334104

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY

29-126TC F63 7/12
1 MAGNE SAVE 2/2 1/7 914152

00 6540

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.0.4.9.8.1.3.2.5.6
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
PRECOAT METALS
4800 S. Kilbourn Chicago, IL 60632
4. Generator's Phone ( 312 ) 254-3400

A. State Manifest Document Number: INA 0334106
B. State Generator's ID: 0316280011
C. State Transporter's ID: 0024
D. Transporter's Phone: 312/331-8440
E. State Transporter's ID:
F. Transporter's Phone:

5. Transporter 1 Company Name: Strand Trucking
6. Use EPA ID Number: I.L.D.9.8.4.7.7.4.4.8.9
7. Transporter 2 Company Name:
8. Use EPA ID Number:

9. Designated Facility Name and Site Address
American Chemical Service
420 S. Colfax
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: 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 Solvent Flammable Liquid N.O.S. UN#1993 | 55. | D.M | 1980. | G | F005 |
| b. Waste Flammable Liquid N.O.S. UN#1993 | 6. | D.M | 330. | G | D001 |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
11a Solvent Off-specification
11b Paint Off-specification

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

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

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: ~~Robert Kilian~~ George Kern | Signature: [signature] | Month 8 | Date Day 1 | Year 89

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: Thomas Strand | Signature: [signature] | Month 08 | Date Day 01 | Year 89

19. Discrepancy Indication Space
A
36-126TCF63 9/11
2-204TCF50 9/11
B
3-204TCF50 9/14
3-204TCF50 (20) 9/14

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: Whitaker Alvin | Signature: [signature] | Month 8 | Day 7 | 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 0334106

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

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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.0.4.9.8.1.3.2.5.6 | Manifest Document No.: 00032 | 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
PRECOAT METALS
4800 S. Kilbourn, Chicago, IL 60632

4. Generator's Phone ( 312 ) 254-3400

A. State Manifest Document Number: INA 0334105
B. State Generator's ID: 0316280011
C. State Transporter's ID: 0024
D. Transporter's Phone: 312/331-8440
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: Strand Trucking
6. Use EPA ID Number: I.L.D.9.8.4.7.7.4.4.8.9
7. Transporter 2 Company Name:
8. Use EPA ID Number:
9. Designated Facility Name and Site Address: American Chemical Service, 420 S. Colfax, Griffith, IN 46319
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 Solvent Flammable Liquid N.O.S. UN#1993 | 39 | D.M | 2.145 | G | F005 |
| b. ~~Waste Flammable Liquid N.O.S. UN#1993~~ | | D.M | | G | D001 |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
11a Solvent Off-specification
~~11b Paint Off-specification~~

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

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GENERATOR

Printed/Typed Name: Robert Kilian | Signature: Robert Kilian | Date: Month 08 Day 23 Year 89

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: THOMAS STRAND | Signature: Thomas Strand | Date: Month 8 Day 24 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 19.
Printed/Typed Name: A. WHITAKER | Signature: [signature] | Date: Month 8 Day 24 Year 89

38-1262763 8/30/89
1-2042-T52 8/24/89

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.

INAU334TUC

0016842

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.0.4.9.8.1.3.2.5.6 | Manifest Document No. 0.0.0.0.0 | 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
PRECOAT METALS
4800 S. Kilbourn Chicago, IL 60632
4. Generator's Phone ( 312 ) 254-3400

A. State Manifest Document Number: INA 0334108
B. State Generator's ID: 0316280011

5. Transporter 1 Company Name: Strand Trucking
6. Use EPA ID Number: I.L.D.9.8.4.7.7.4.4.8.9
C. State Transporter's ID: 0024
D. Transporter's Phone: 312-331-8440

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
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: 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. |
|---|---|---|---|---|---|---|
| GENERATOR a. | Waste Solvent Flammable Liquid N.O.S. UN#1993 | 0.5.0 | D.M | 0.2.7.5.0 | G | F005 |
| b. | ~~Waste Flammable Liquid N.O.S. UN#1993~~ | | D.M | | G | D001 |
| c. | | | | | | |
| d. | | | | | | |

J. Additional Descriptions for Materials Listed Above
11a Solvent off-specification
11b Paint off-specification

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.

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Printed/Typed Name: Robert Kilian | Signature | Date: Month 09 Day 22 Year 89

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Leonard M Strand | Signature | Date: Month 09 Day 22 Year 89

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: Leonard M STRAND | Signature | Date: Month 10 Day 09 Year 89

FACILITY

19. Discrepancy Indication Space
1 DRUM 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: WHITAKER A | Signature | Date: Month 09 Day 22 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)

COPY 5. TSD COPY 1-3-2011 CT 50 9/26 1-20 CT 50 9/27

0016843

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.0.4.9.8.1.3.2.5.6
Manifest Document No.: 10028
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
PRECOAT METALS
4800 S. Kilbourn Chicago, IL 60632

A. State Manifest Document Number: INA 0334107

4. Generator's Phone ( 312 ) 254-3400

B. State Generator's ID: 0316280011

5. Transporter 1 Company Name: Strand Trucking
6. Use EPA ID Number: I.L.D.9.8.4.7.7.4.4.8.9
C. State Transporter's ID: 0024
D. Transporter's Phone: 312-331-8440

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
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: 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 Solvent Flammable Liquid N.O.S. UN#1993 | 44 | D.M | 2420 | G | F005 |
| b. ~~Waste Flammable Liquid~~ N.O.S. UN #1993 | | ~~D.M~~ | | ~~G~~ | ~~D001~~ |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
11a Solvent off-specification
~~11b Paint off-specification~~

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: Robert Kilian
Signature: Robert Kilian
Date: Month 7 Day 07 Year 89

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Leonard M Strand
Signature: Leonard M Strand
Date: Month 7 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 Akin
Signature:
Date: Month 7 Day 19 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)

COPY 5. TSD COPY

12.6TCT63 12/11

0016844

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.0.4.9.8.1.3.2.5.6 — Manifest Document No.: 00041

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
Precoat Metals
4800 S. Kilbourn Chicago, IL 60632

4. Generator's Phone ( 312 ) 254-3400

A. State Manifest Document Number: INA 0334109

B. State Generator's ID: 0316280011

5. Transporter 1 Company Name: Strand Trucking

6. Use EPA ID Number: I.L.D.9.8.4.7.7.4.4.8.9

C. State Transporter's ID: 0024

D. Transporter's Phone: 312/331-8440

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, 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: 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 Solvent Flammable Liquid N.O.S. UN#1993 | 42 | DM | 2310 | G | F005 |
| b. ~~Waste Flammable Liquid N.O.S. UN#1993~~ | | ~~DM~~ | | ~~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
11a Solvent off-specification
11b Paint off-specification

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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.

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Printed/Typed Name: Robert Kilian — Signature: [signature] — Date: Month 10 Day 30 Year 89

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Len Strand — Signature: [signature] — Date: Month 10 Day 30 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: STEVE KULIVICK — Signature: [signature] — Date: Month 10 Day 30 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 0334109

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

40126TCT63 11/3

COPY 5. TSD COPY 2-2-04TCT53

0016845

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

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# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I.L.D.0.4.9.8.1.3.2.5.6 — Manifest Document No. 000043
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
Precoat Metals
4800 S. Kilbourn Chicago, IL 60632

A. State Manifest Document Number: INA 0334110

4. Generator's Phone ( 312 ) 254-3400

B. State Generator's ID: 0316280011

5. Transporter 1 Company Name: Strand Trucking
6. Use EPA ID Number: I L D 9 8 4 7 7 4 4 8 9
C. State Transporter's ID: 0024
D. Transporter's Phone: 312-331-8440

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, 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: 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 Solvent Flammable Liquid N.O.S. UN#1993 | 27 | D M | .1485 | G | F005 |
| b. Waste Flammable Liquid N.O.S. UN#1993 | .13 | D M | .715 | 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
11a Solvent off-specification
11b Paint off-specification

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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.

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GENERATOR — Printed/Typed Name: Robert Kilian — Signature: [signature] — Date: Month 11 Day 13 Year 89

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Lew Strand — Signature: [signature] — Date: Month 11 Day 13 Year 89
18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: Lew Strand — Signature: [signature] — Date: Month 11 Day 20 Year 89

FACILITY
19. Discrepancy Indication Space
REJECT 16 DRUMS - MATERIAL DOES NOT MATCH PRESHIPMENT SAMPLE
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: [signature] — Date: Month 11 Day 13 Year 89

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

27A - 204F T50 11/28 3B - 204F T50 11/28/29

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 0334110

0016846

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

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# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: I L D 0 4 9 8 1 3 2 5 6
Manifest Document No.: 00047
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
PRECOAT METALS
4800 S. KILBURN CHICAGO, ILL 60632

4. Generator's Phone ( 312 ) 254-3400

A. State Manifest Document Number: INA 0334111
B. State Generator's ID: 0316280011
C. State Transporter's ID: 0024
D. Transporter's Phone: (312) 331-8440
E. State Transporter's ID:
F. Transporter's Phone:

5. Transporter 1 Company Name: STRAND TRUCKING
6. Use EPA ID Number: I L D 9 8 4 7 7 4 4 8 9
7. Transporter 2 Company Name:
8. Use EPA ID Number:

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
420 S. COLFAX, 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: 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 SOLVENT FLAMMABLE LIQUID UN#1993 | 40 | D M | 2200 | G | F005 |
| b. WASTE FLAMMABLE LIQUID N.O.S UN #1993 | 19 | D M | 1045 | 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
11A SOLVENT OFF-SPECIFICATION
11B PAINT OFF-SPECIFICATION

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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.

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Printed/Typed Name: Robert Kilian
Signature: [signature]
Date: Month 12 Day 05 Year 89

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Len Strand
Signature: [signature]
Date: Month 12 Day 05 Year 89

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

19. Discrepancy Indication Space
A 126TCT63 12/8
B 19-204TCT60 12/8 (20)

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]
Month 12 Day 6 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 0334111

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY

0016847

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

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# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: I L D 0 4 9 8 1 3 2 5 6
Manifest Document No.: 00002
2. Page 1 of 1
Information in the shaded a not required by Federal la items D, F, H and I are requi State law.

3. Generator's Name and Mailing Address
PRECOAT METALS
4800 S. KILBOURN CHICAGO, ILL 60632
4. Generator's Phone ( 312 ) 254-3400

A. State Manifest Document Number: INA 0334112
B. State Generator's ID: 0316280011

5. Transporter 1 Company Name: STRAND TRUCKING
6. Use EPA ID Number: I L D 9 8 4 7 7 4 4 8 9
C. State Transporter's ID: 0024
D. Transporter's Phone: (312) 331-8

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, IN 46319
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 N |
|---|---|---|---|---|---|
| a. WASTE SOLVENT FLAMMABLE LIQUID N.O.S. UN #1993 | 029 | D.M | 1595 | G | F 005 |
| b. WASTE FLAMMABLE LIQUID N.O.S. UN#1993 | 012 | D.M | 660 | G | D001 |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
11A SOLVENT OFF-SPECIFICATION
11B PAINT OFF-SPECIFICATION

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.

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Printed/Typed Name: Robert Kilian
Signature: [signature]
Date: Month 01 Day 10 Y

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Len Strand
Signature: [signature]
Date: Month 01 Day 10 Y

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

19. Discrepancy Indication Space
A: 126TCT63 1/1/90
B: 204TCT50 1/1/90

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 01 Day 10 Ye

GENERATOR

TRANSPORTER

FACILITY

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EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

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0018205

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.0.4.9.8.1.3.2.5.6 — Manifest Document No.: 0.0.0.1.3
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
PRECOAT METALS
4800 S. KILBOURN CHICAGO, IL 60632

4. Generator's Phone ( 312 ) 254-3400

A. State Manifest Document Number: INA 0334114
B. State Generator's ID: 0316280011

5. Transporter 1 Company Name: STRAND TRUCKING
6. Use EPA ID Number: I.L.D.9.8.4.7.7.4.4.8.9
C. State Transporter's ID: 0024
D. Transporter's Phone: 708-331-8440

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, 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: 9180890002
H. Facility's Phone: 708-768-3400

| 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 SOLVENT FLAMMABLE LIQUID N.O.S. UN#1993 | 50 | D M | 2750 | G | F005 |
| b. ~~WASTE FLAMMABLE LIQUID N.O.S. UN#1993~~ | | ~~D M~~ | | ~~G~~ | ~~D001~~ |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
11a SOLVENT OFF - SPECIFICATION
11b PAINT OFF - SPECIFICATION

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.

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Printed/Typed Name: ROBERT KILLAN — Signature: [signature] — Date: Month 04 Day 02 Year 90

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: LEO STRAND — Signature: [signature] — Date: Month 04 Day 02 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 KULAVICE — Signature: Steve Kulavice — Date: Month 04 Day 03 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.

INA0334114

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

47-126TCT63 4/5
3-204K TSD 4/5

COPY 5. TSD COPY

0013209

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 L D 0 4 9 8 1 3 2 5 6 — Manifest Document No.: 0 0 0 0 4
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
PRECOAT METALS
4800 S. Kilbourn Chicago, IL 60632

4. Generator's Phone ( 312 ) 254-3400

A. State Manifest Document Number: INA 0334115
B. State Generator's ID: 0316280011

5. Transporter 1 Company Name: Strand Trucking
6. Use EPA ID Number: I L D 9 8 4 7 7 4 4 8 9
C. State Transporter's ID: 0024
D. Transporter's Phone: 312-331-8440

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
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: 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 Solvent Flammable Liquid N.O.S. UN#1993 | 5.0 | D.M | 27.50 | G | F005 |
| b. ~~Waste Flammable Liquid N.O.S. UN#1993~~ RK | | ~~D.M~~ | | ~~G~~ | ~~D001~~ |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
11a Solvent Off-Specification
11b Paint Off-Specification

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.

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Printed/Typed Name: Robert Kilian — Signature: Robert Kilian — Date: Month 01 Day 26 Year 90

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Len Strand — Signature: Len Strand — Date: Month 01 Day 26 Year 90

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

19. Discrepancy Indication Space
49-204TCTSO 1/30
1-204TCTSO 1/30 (20)

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 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.

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY

0018296

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. Exp*

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: I.L.D.0.4.9.8.1.3.2.5.6
Manifest Document No.:
2. Page 1 of 1
Information in the shade not required by Federa items D, F, H and I are r State law.

3. Generator's Name and Mailing Address
PRECOAT METALS
4800 S. Kilbourn Chicago IL 60632
4. Generator's Phone ( 312 ) 254-3400

A. State Manifest Document Number: INA 0334116
B. State Generator's ID: 0316280011

5. Transporter 1 Company Name: Strand Trucking
6. Use EPA ID Number: I.L.D.9.8.4.7.7.4.4.8.9
C. State Transporter's ID: 0024
D. Transporter's Phone: 312-331-8

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 IN 46319
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. | Was |
|---|---|---|---|---|---|
| a. Waste Solvent Flammable Liquid N.O.S. UN#1993 | 39 | D.M | 2145 | G | F00 |
| b. ~~Waste Flammable Liquid N.O.S. UN#1993~~ | | ~~D.M~~ | | ~~G~~ | ~~D00~~ |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
11a Solvent Off-Specification
~~11b Paint Off-Specification~~

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 determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available 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 goo 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 Kilian — Signature: [signature] — Date Month 02 Day 12

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Ken Strand — Signature: [signature] — Date Month 02 Day 12

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 Item 19.
Printed/Typed Name: Whitfa Kil A — Signature: [signature] — Date Month 2 Day 13

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)

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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 L D 0 4 9 8 1 3 2 5 6 — Manifest Document No. 000.10
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
PRECOAT METALS
4800 S. Kilbourn Chicago IL 60632

4. Generator's Phone ( 312 ) 254-3400

A. State Manifest Document Number: INA 0334118
B. State Generator's ID: 0316280011

5. Transporter 1 Company Name: Strand Trucking
6. Use EPA ID Number: I L D 9 8 4 7 7 4 4 8 9
C. State Transporter's ID: 0024
D. Transporter's Phone: 312-331-8440

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
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: 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 Solvent Flammable Liquid N.O.S. UN#1993 | 4 | DM | 0.18.70 | G | F005 |
| b. Waste Flammable Liquid N.O.S. UN#1993 | 14 | DM | 00770 | G | D001 |
| c. Waste Flammable Liquid NOS. UN#1993 | 2 | DM | 00110 | G | D001 |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
11a Solvent Off-Specification
11b Paint Off-Specification
11c. Nonhazardous Paint Solids

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: Robert Kilian — Signature: Robert Kilian — Date: Month 03 Day 16 Year 90

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Len STRAND — Signature: Len Strand — Date: Month 03 Day 17 Year 90
18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: Len STRAND — Signature: Len Strand — Date: Month 03 Day 20 Year 90

FACILITY
19. Discrepancy Indication Space
2C 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: WHITAKER A — Signature: [signature] — Date: Month 3 Day 19 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.

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

33A-1267 T63 3/20/90 14B-2047 TSO 3/22/90
1A-2047 T63 3/20/90

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

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# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I L D 0 4 9 8 1 3 2 5 6 — Manifest Document No. 0018
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
PRECOAT METALS
4800 S. KILBOURN CHICAGO, IL 60632
4. Generator's Phone ( 312 ) 254-3400

A. State Manifest Document Number: INA 0334119
B. State Generator's ID: 0316280011

5. Transporter 1 Company Name: STRAND TRUCKING
6. Use EPA ID Number: I L D 9 8 4 7 7 4 4 8 9
C. State Transporter's ID: 0024
D. Transporter's Phone: 708-331-8440

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, 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: 9180890002
H. Facility's Phone: 708-768-3400

| 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 SOLVENT FLAMMABLE LIQUID N.O.S. UN#1993 | 47 48 | D M | 2585 | G | F005 |
| b. ~~WASTE FLAMMABLE LIQUID N.O.S. UN#1993~~ | | ~~D M~~ | | ~~G~~ | ~~D001~~ |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
11a SOLVENT OFF - SPECIFICATION
11b PAINT OFF _ SPECIFICATION

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: ROBERT KILIAN — Signature — Date: 4 4 90

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials — Printed/Typed Name: LEN STRAND — Signature — Date: 4 4 90
18. Transporter 2 Acknowledgement of Receipt of Materials — Printed/Typed Name — Signature — 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: STEVE KULAVICK — Signature — Date: 4 5 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.

INA0334119

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

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

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# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: ILD049813256 — Manifest Document No.: 00001
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
PRECOAT METALS
4800 S. KILBOURN CHICAGO, IL 60632

4. Generator's Phone ( 312 ) 254-3400

A. State Manifest Document Number: INA 0334120
B. State Generator's ID: 0316280011

5. Transporter 1 Company Name: STRAND TRUCKING
6. Use EPA ID Number: ILD984774489
C. State Transporter's ID: 0024
D. Transporter's Phone: 708-831-8440

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, GRIFFITH, IN 46319

10. Use EPA ID Number: IND016360265
G. State Facility's ID: 9180890002
H. Facility's Phone: 708-768-3400

| 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 SOLVENT FLAMMABLE LIQUID N.O.S. UN#1993 | 26 | DM | 1430 | G | F005 |
| b. ~~WASTE FLAMMABLE LIQUID N.O.S. UN#1993~~ | | ~~DM~~ | | ~~G~~ | ~~D001~~ |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
11a. SOLVENT OFF-SPECIFICATION
~~11b. PAINT OFF-SPECIFICATION~~

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: ROBERT KILIAN — Signature: Robert Kilian — Date: Month 05 Day 08 Year 90

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Len Strand — Signature: Len Strand — Date: Month 05 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: Whitaker A — Signature: A Whitaker — Date: Month 5 Day 8 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.

INA0334120

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

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0018301

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

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# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: MOD088703764
Manifest Document No.: 103
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
Precoat Metals
4301 S. Spring Avenue
St. Louis, MO 63116
4. Generator's Phone (314) 352-8000

A. State Manifest Document Number: INA 0117704
B. State Generator's ID: 01127

5. Transporter 1 Company Name: Mr. Frank, Inc.
6. Use EPA ID Number: ILD069506160
C. State Transporter's ID: IN9505-0000-21
D. Transporter's Phone: (212) 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 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. | Waste No. |
|---|---|---|---|---|---|
| a. Waste Paint Related Material NOS Flammable Liquid, UN 1263 | 001 | TT | 04000 | G | 0001 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
Waste Paint MO # H-1203

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
If waste in item 11a. 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.

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 06 Day 16 Year 87

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: RON BRIDGEWATER Signature: [illegible] Date: Month 06 Day 16 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 in item 18.
Printed/Typed Name: FRUNFEE Signature: [illegible] Date: Month 06 Day 17 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 0117704

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 E TSD

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

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# 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·O·D·0·8·8·7·0·3·7·6·4 | 1·2·2 | | |

**3. Generator's Name and Mailing Address**
Precoat Metals
4301 S. Spring Avenue
St. Louis, MO 63116

**4. Generator's Phone** ( 314 ) 352-8000

**A. State Manifest Document Number** INA 0160133

**B. State Generator's ID** 01127

**C. State Generator's Site ID** [illegible]

| 5. Transporter 1 Company Name | 6. Use EPA ID Number | D. Transporter's Phone |
|---|---|---|
| Mr. Frank, Inc. | I·L·D·0·6·9·5·0·6·1·6·0 | (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 | 10. Use EPA ID Number | G. State Facility's ID / H. Facility's Phone |
|---|---|---|
| American Chemical Service<br>420 S. Colfax Avenue<br>Griffith, IN 46319-0190 | I·N·D·0·1·6·3·6·0·2·6·5 | (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<br>NOS Flammable Liquid, UN 1263 | 0·0·1 | T·T | 0.5275 | G | D001 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above: Waste Paint NO 8A-1203

K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information
If waste in item 11a. 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.
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] | | | | |

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date Month | Day | Year |
|---|---|---|---|---|
| CARL E. MILBURN | | 2 | 18 | 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 | 10 | 02 | 87 |

**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 0160133

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

DISTRIBUTION:
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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

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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.: MOB088703764
Manifest Document No.: 146
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
Precoat Metals
4301 S. Spring Avenue
St. Louis, MO 63116

A. State Manifest Document Number: INA 0177655

4. Generator's Phone: 314 352-8000

B. State Generator's ID: MO 01127

5. Transporter 1 Company Name: Mr. Frank, Inc.
6. Use EPA ID Number: ILD069506160
C. State Transporter's ID: IN9505-000-21
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 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. | Waste No. |
|---|---|---|---|---|---|
| a. Waste Paint Related Material, NOS Flammable Liquid, UN1263, [illegible] | 0 8 1 7 7 | | 0 3 5 0 0 | G | [illegible] |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
Waste Paint MO #H-1203

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
If waste in item 11a. 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.

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 Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Miguel Garcia Signature: [illegible] Date: Month Day Year: 03 22 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: [illegible] Date: 03 22 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 0177655

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

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PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
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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 TOOM

0015379

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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 O D 0 8 8 7 0 3 7 6 4 — Manifest Document No. 0 0 1 6 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
Precoat Metals
4301 S. Spring Avenue
St. Louis, MO 63116
4. Generator's Phone ( 314 ) 352-8000

A. State Manifest Document Number: INA 0160132
B. State Generator's ID: MO 01127

5. Transporter 1 Company Name: Bruce Frank, Inc.
6. US EPA ID Number: I L D 0 6 9 5 0 8 1 6 0
C. State Transporter's ID: 2079
D. Transporter's Phone: 352-2708
E. State Transporter's ID:
F. Transporter's Phone:

7. Transporter 2 Company Name
8. US EPA ID Number
G. State Facility's ID: 4182500202
H. Facility's Phone: (219) 972-4370

9. Designated Facility Name and Site Address
American Chemical Service
420 E. Colfax Avenue
Griffith, IN 46319-0190
10. US EPA ID Number: IND016360265 / 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. | Waste No. |
|---|---|---|---|---|---|
| a. Waste Paint Related Material, Flammable Liquid, NA 1263 | 01 | DM | 02000 | G | D001 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
Waste Paint — MO 88-1203

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
If waste in item 11a. 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.

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: Nancy A. Irwin — Signature: Nancy A Irwin — Date: Month 01 Day 30 Year 88

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials — Printed/Typed Name: Miguel Garcia — Signature: Miguel Garcia — Date: Month 02 Day 3.0 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: P DUNFEE — Signature: P Dunfee — Date: Month 02 Day 01 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.

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 FCT 50 7/1/88

INA 0160132

00153S1

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 088737364 — Manifest Document No. 111X1

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: PRECOAT METALS, 4300 S SPRING ST LOUIS MO 63116

A. State Manifest Document Number: INA 0162904

B. State Generator's ID: MO 0127

4. Generator's Phone (314) 664-1900

5. Transporter 1 Company Name: MR FRANK INC — 6. US EPA ID Number: ILD069586160 — C. State Transporter's ID: 6075 — D. Transporter's Phone (812) 477-1078

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, 2601 S COUNTY AVE, GRIFFITH IND 46319 — 10. US EPA ID Number: IND 000 823 765 — 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 | Unit Wt/Vol | 14. Waste No. |
|---|---|---|---|---|---|
| a. WASTE PAINT RELATED MATERIAL, FLAMMABLE LIQUID, NA 1263 | 001 | TT | 3455 | G | |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

G = Gallons (liquids only) T = Tons (2,000 lbs.)

J. Additional Descriptions for Materials Listed Above: WASTE PAINT WITH SOLVENTS

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information: IF WASTE IS ITEM 11 IS UNACCEPTABLE 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.

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: JONI MESSARGE — Signature — Date Month 10 Day 17 Year 88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials — Printed/Typed Name: CARL E. MILBURN — Signature — Date Month 10 Day 17 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: F DUNFEE — Signature — Date Month 10 Day 18 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 202/126-2675.

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

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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

210R/212R TSD 10/18

INA 0162904

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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. 1.0.D.0.8.5.7.0.3.7.6.4 | Manifest Document No. [illegible]

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: Precoat Metals, 4301 S. [illegible] St. Louis, Mo [illegible]

4. Generator's Phone (314) [illegible]

A. State Manifest Document Number: INA 0177651

B. State Generator's ID: [illegible]

5. Transporter 1 Company Name: [illegible]

6. Use EPA ID Number: [illegible]

C. State Transporter's ID: [illegible]

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: American Chemical Service, [illegible] IND

10. Use EPA ID Number: IND 16360265

G. State Facility's ID: [illegible]

H. Facility's Phone: [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. | Waste No. |
|---|---|---|---|---|---|
| [illegible] | 01 | T | 4840 | G | |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above: Waste Paint Mo # H-1203

K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information: [illegible]

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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 7 Year 88

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Carl E. Russell | Signature: [illegible] | Date: Month 11 Day 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: FDUNFEE | Signature: FDunfee | Date: Month 11 Day 8 Year 88

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/233-0144 (night) and the National Response Center at 800/424 8802 or 202/126-2675.

INA 0177651

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

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PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

0015380

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. MOD082703764 — Manifest Document No. 00000

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: Precoat Metals Div, 4301 South Spring, St. Louis Mo 63116

4. Generator's Phone (314) 352-8000

A. State Manifest Document Number: INA 0247930

B. State Generator's ID: MO 11[illegible]

5. Transporter 1 Company Name: Mr. Frank Inc.

6. Use EPA ID Number: ILD01950[illegible]

C. State Transporter's ID: [illegible]

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: American Chemical Service, 420 South Colfax, Griffith Indiana

10. Use EPA ID Number: IND1636026[illegible]

G. State Facility's ID: [illegible]

H. Facility's Phone: [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 Paint Related Material Flammable Liquid UN 1263 | 001 | TT | 3000 | G | [illegible] |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above: Waste Paint Mo # H-1203

K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information: If waste in item 11a is undeliverable ~~Waste Paint Mo # H-1203~~ 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.

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: K. Halloran — Signature: [signature] — Date: Month 12 Day 14 Year 88

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Peter C. Rauen — Signature: Peter C. Rauen — Date: Month 12 Day 14 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: F Dunfee — Signature: F Dunfee — Date: Month 12 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 0247930

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

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PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

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0015[illegible]

# STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0298357

BE COMPLETED BY WASTE GENERATOR

Authorization Number 998499

PREMIER COATINGS INC. (Company Name) | 2250 ARTHUR (Address)
ELK GROVE VILLAGE (City) | ILL (State) | 60007 (Zip)
0314400012 G (Generator Number)
ILD005019577

WASTE HAULER(S)

MR. FRANK INC (Hauler Name) | 201 WISS ST HOLLAND, ILL (Hauler Address)
S.W.H. Registration Number 0079009
ILD067506160

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) | IND (State) | 46319 (Zip)
IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINT SOLVENT 995
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: REDUCING, THINNING LIQ
HAZARD CLASS: FLAMMABLE LIQUID
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
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: 6-25-81 Richard E. Sullivan (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 Martin (Authorized Signature) DATE: 06 25 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: 06/25/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO WEST AGIT T-50 6/25/81 JPM

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

000668

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

0298359 (1–7)

Authorization Number 998499 (8–13)

PREMIER COATINGS INC (Company Name) | 2250 ARTHUR (Address)
ELK GROVE VILLAGE (City) | ILL (State) | 60007 (Zip)

ILD005099577
0314400012 (14–24 Generator Number)

WASTE HAULER(S)

MR. FRANK INC (Hauler Name) | 201 WISS S. HOLLAND, ILL (Hauler Address)
S.W.H. Registration Number 0079018 (25–31)
ILD 069506160

Hauler Name | Hauler Address
S.W.H. Registration Number (32–38)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | 420 S. COLFAX (Address)
GRIFFITH (City) | IND (State) | 46319 (Zip)
91808902 (39–46 Site Number)
IND016360265

**TO BE COMPLETED BY WASTE GENERATOR**

WASTE NAME: WASTE 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: | HAZARD CLASS: |
|---|---|
| REDUCING, THINNING LIQ | FLAMMABLE LIQUID |

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: 005060 (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: 11-13-81
Richard E. Sullivan (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: 11/13/81 (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: 11/13/81 (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 210 K T-50 GPM 11/13/81

SITE COPY - PART 3

000669

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. ILD007001741 | Manifest Document No. 8219 H | 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
Press Tank and Equipment
7635 Lawndale Aveneu, Summit, IL 60501
4. Generator's Phone ( 312 ) 594-3040

A. State Manifest Document Number: INA 0335008
B. State Generator's ID:

5. Transporter 1 Company Name: ABOOM EXPRESS
6. Use EPA ID Number: ILD047267364
C. State Transporter's ID: 0367
D. Transporter's Phone: 312-429-1660

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: IND016360265
G. State Facility's ID:
H. Facility's Phone: 219-024-4370

| 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 PRINT RELATED MATERIAL (F003) FLAMMABLE LIQUID NA 1268 | 003 | d.m | 00.165 | 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: [signature] | Date: Month 8 Day 25 Year 89

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: VINCENT E. AGUILAR | Signature: [signature] | Date: Month 08 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: WHITAKER A | Signature: [signature] | Date: Month 8 Day 25 Year 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.

INA0335008

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY

0016826

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. ED 110002149 | 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: PRES ON Products Co. 1020 [illegible] St. [illegible] IL 60101

4. Generator's Phone ( 312 ) 543-9270

A. State Manifest Document Number: INA 0117776

B. State Generator's ID

5. Transporter 1 Company Name: [illegible]

6. Use EPA ID Number

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: [illegible]

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 Solvents | 005 | | 00275 | G | F005 |
| b. #113 | | | | | |
| c. | | | | | |
| d. 05-02 | | | | | |

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: KEN HASHISAKA | Signature: [signature] | Date: Month 05 Day 02 Year 88

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: FRED KOSELKE | Signature: Fred Koselke | Date: Month 05 Day 02 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] | 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 0117776

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

123KT63 5/4M

0015367

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. [illegible] | 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: Pres ON Product Co. 1020 Waste [illegible] Addison IL 60101

4. Generator's Phone ([illegible]) [illegible]

A. State Manifest Document Number: INA 0117777

B. State Generator's ID

5. Transporter 1 Company Name | 6. Use EPA ID Number | 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: [illegible] | 10. Use EPA ID Number | G. State Facility's ID | H. Facility's Phone: [illegible]-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 [illegible] | 005 | | 0275 | | 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 | Signature | Month | Date Day | Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: [illegible] | Signature: [illegible] | 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: Alvin Whitaker | Signature: [illegible] | 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 0117777

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

DISTRIBUTION:
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PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

123KT63 8/29/88

0015368

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

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# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: [illegible]
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: Preston Products Co. 1820 Westgate Drive Addison IL 60101
4. Generator's Phone: (312) [illegible]-4370
A. State Manifest Document Number: INA 0159664
B. State Generator's ID:
C. State Transporter's ID: 1875
D. Transporter's Phone: [illegible]
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: [illegible]
6. Use EPA ID Number:
7. Transporter 2 Company Name:
8. Use EPA ID Number:
9. Designated Facility Name and Site Address: [illegible] Chemical Co. 4201 S. Colfate Ave Griffith IN
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 N.S. A Solvent UN 1993 | 005 | [illegible] | [illegible] | | 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: KEN HUCHIZAKA
Signature: [illegible]
Date: Month 10 Day 20 Year 88

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: STEVEN WYPYSZCZAK / LMT
Signature: [illegible] / LMT
Date: Month 10 Day 20 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: A Whitaker
Signature: [illegible] Whitaker
Date: Month 10 Day 21 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 0159664

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

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PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

123RT63 10/24

0015309

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P.O. Box 7035
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MTP80-701528

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# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. | Manifest Document No. 000001
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
Pres-on Products Co.
1520 Westgate Dr addison IL 60101
4. Generator's Phone ( 312 ) 543-6310

A. State Manifest Document Number INA 0159665
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone
E. State Transporter's ID
F. Transporter's Phone 312-842-3121
G. State Facility's ID
H. Facility's Phone 219-924-8370

5. Transporter 1 Company Name
6. Use EPA ID Number ILD 005 484 282
7. Transporter 2 Company Name
8. Use EPA ID Number
9. Designated Facility Name and Site Address
Envirochemical Co.
4201 S. Harlem
Illinois
10. Use EPA ID Number ILD 006 306 015

| 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. Hot Flammable Liquid n.o.s. | 05 | DM | 275 | | 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.

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| Printed/Typed Name | Signature | Date Month | Day | Year |
|---|---|---|---|---|
| KEN HASHISAKA | | 12 | 27 | 88 |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date Month | Day | Year |
|---|---|---|---|---|
| LMT (5) DR | | 12 | 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 Item 19.

| Printed/Typed Name | Signature | Date Month | Day | Year |
|---|---|---|---|---|
| WHITAKER A | | 12 | 28 | 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 0159665

EPA Form 8700-22 (Rev. 9-86) Previous editions are obsolete.
State Form 11865 4-123R T63 12/27/38 1-RCAL-20YR-TSO 1/28/39

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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

PAILS (YDGAL) ASHCROFT 3/13/91 SC/CA

001537

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

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# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. | 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
Praxair Products Co
10 [illegible] Indiana IN 46101

A. State Manifest Document Number: INA 0324553

B. State Generator's ID

4. Generator's Phone ( 312 ) 45-4310

5. Transporter 1 Company Name: [illegible] Logistics Motor Transport | 6. Use EPA ID Number: IND 000 782 822

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 (317) 642-3161

9. Designated Facility Name and Site Address
Envirite of Ohio Co.
[illegible]

10. Use EPA ID Number: OHD 048 626 245

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 to Flammable liquid NOS Flash Pt 113 | 005 | | 00275 | | 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.

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GENERATOR

Printed/Typed Name: K-11 Nishiaka | Signature | Date: Month 2 Day 1 Year 89

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: KEE GUSTAFSON | Signature | Date: Month 2 Day 1 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: WALKER A | Signature | Date: Month 2 Day 1 Year 89

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

12 4 TCT 63 2/1

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 0324553

001682

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

PRES-ON PRODUCTS

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. |
| | | A. State Manifest Document Number: INA 0324554 | |

3. Generator's Name and Mailing Address: Pres-on Products Co. 1000 Northgate Dr. Salem IL. 62801
4. Generator's Phone ( 312 ) 243-9370
5. Transporter 1 Company Name: Lewis Motor Freight
6. Use EPA ID Number: IND 000 542 832
7. Transporter 2 Company Name
8. Use EPA ID Number
9. Designated Facility Name and Site Address: Universal Chemical Co. 4201 S. Calumet Ave. Whiting, IN
10. Use EPA ID Number: IND 000 604 611
B. State Generator's ID
C. State Transporter's ID 1975
D. Transporter's Phone (312) 421-1121
E. State Transporter's ID
F. Transporter's Phone (312) 842-3121
G. State Facility's ID
H. Facility's Phone (219) 924-4300

| 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. (Paint Waste) UN1993 | 005 | DM | 002.75 | | 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.

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GENERATOR

| Printed/Typed Name | Signature | Date Month | Day | Year |
|---|---|---|---|---|
| J. Hallak | | | | |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date Month | Day | Year |
|---|---|---|---|---|
| STEVEN WYPYSZCZAK | Steven P Wypyszczak | 04 | 11 | 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 | Date Month | Day | Year |
|---|---|---|---|---|
| STEVE KULAVICK | Steve Kulavick | 04 | 12 | 89 |

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

124T63 4/12

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.

INA0324554

0016828

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# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. ILD990002149 | Manifest Document No. 00004 | 2. Page 1 of 2 | 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
Pres-ON Products Co
1020 Westgate Dr Addison IL, 60101

A. State Manifest Document Number: INA 0324555

B. State Generator's ID:

4. Generator's Phone ( 312 ) 543-9370

5. Transporter 1 Company Name: LANDGREBE INTERTRANSPORT | 6. Use EPA ID Number: ILD000984282 | C. State Transporter's ID: 1875 | D. Transporter's Phone: 462-4181

7. Transporter 2 Company Name | 8. Use EPA ID Number | E. State Transporter's ID | F. Transporter's Phone: (219) 838-3928

9. Designated Facility Name and Site Address
American Chemical Co
4281 So. Colfax Ave
Griffith, IN

10. Use EPA ID Number: IND 063602652

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. 4 Solvent UN 1993 | 006 | DR | 00300 | 1 | F005 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above

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.

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GENERATOR

| Printed/Typed Name | Signature | Date Month | Day | Year |
|---|---|---|---|---|
| KEN HASLUCKA | | 12 | 14 | 89 |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date Month | Day | Year |
|---|---|---|---|---|
| Carl Coulter | Carl Coulter | 01 | 14 | 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 19.

| Printed/Typed Name | Signature | Date Month | Day | Year |
|---|---|---|---|---|
| WHITAKER ALUND | Allen Whitaker | 1 | 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.

INA 0324555

EPA Form 8700-22
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17,370 CT 63 3/16

0016829

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OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
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# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: I.L.D.9.9.0.0.0.2.1.4.9 — Manifest Document No.: 0.0.0.0.5
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: Pres-ON Products Co. 1020 Westgate Dr. Addison IL. 60101
4. Generator's Phone (312) 543-4370

A. State Manifest Document Number: INA 0345023
B. State Generator's ID: 762244

5. Transporter 1 Company Name: LANDGREBE MOTOR TRANSPORT
6. Use EPA ID Number: I.N.D.0.0.9.8.4.2.8.2
C. State Transporter's ID: 1875
D. Transporter's Phone: 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: [illegible] CO 4201 S. OLFAT AVE Griffith. IN.
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. A Solvent UN 1993 | 0.0.5 | D.R | 0.0.2.7.5 | | F005 |
| b. | | | | | [illegible] |
| 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: KEN HASHISAKA - PRES-ON — Signature: [signature] - PRES-ON — Month: [illegible] Day: [illegible] Year: [illegible]

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: [illegible] - Landgrebe — Signature: [signature] - Landgrebe — 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: HARROID F. SCHMIDT — Signature: [signature] — Month: 11 Day: 21 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.

INA0345023

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY

1251063 11/22

0016830

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.: ILD99.00.021.49 — Manifest Document No.: 00006
2. Page 1 of 8 — 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: Pus-on Products Co. 1020 Westgate Dr. Addison IL 60101
4. Generator's Phone (708) 543-9370

A. State Manifest Document Number: INA 0345024
B. State Generator's ID:

5. Transporter 1 Company Name: LAW Dg REBE MOTOR TRANSPORT
6. Use EPA ID Number: IND 0098.4282
C. State Transporter's ID: 1875
D. Transporter's Phone:

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone: (312) 824-

9. Designated Facility Name and Site Address: AMERICAN Chemical Co 4201 S Colfax Ave GRIFFITH, IN.
10. Use EPA ID Number: IND 01.6360265
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 a Solvent UN 1993 | 005 | DR | 00250 | 1 | F005 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above:

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: KEN Hashisaka — Signature: [signature] — Date: Month [illegible] Day [illegible] Year [illegible]

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: LMT RL 9105 LLC — Signature: [signature] LMT — 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 Item 19
Printed/Typed Name: STEVE KUMVICK — Signature: [signature] — Date: 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.

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

**COPY 5. TSD COPY**

204TCT55 5/23

0010293

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.I.D.9.9.0.0.0.2.1.4.9 — Manifest Document No.: 00001
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: Preson Product Co, 1020 Westgate Dr, Addison IL 60101
4. Generator's Phone (708) 543-9370

A. State Manifest Document Number: INA 0407333
B. State Generator's ID: 0430055030

5. Transporter 1 Company Name: Landgrebe Motor Transport
6. Use EPA ID Number: IND000984282
C. State Transporter's ID: 1875
D. Transporter's Phone: 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 Co, 420 S. Cal Pt Ave, Griffith, IN
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 NOS a Solvent UN 1993 | 006 | D.R | 00330 | 1 | F005 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above:

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: KEN HASHISAKA — Signature: [signature] — Date: Month 02 Day 07 Year 90

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Landgrebe Fred Koselke — Signature: Landgrebe Fred Koselke — Date: Month 02 Day 07 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 KULAVICK — Signature: Steve Kulavick — 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 0407333

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY

123K763 2/8

0018292

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.: I.L.D.9.9.0.0.0.2.1.4.9 — Manifest Document No.: 0.0.0.0 — 2. Page 1 of 8 — 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: Pres-On Products Co 1020 Westgate Dr addison IL. 60101
4. Generator's Phone (708) 543-9370

A. State Manifest Document Number: INA 0407338
B. State Generator's ID:

5. Transporter 1 Company Name: LANDGREBE MOTOR TRANSPOT
6. Use EPA ID Number: I.N.D.0.0.9.8.4.2.8.2.
C. State Transporter's ID: 1875
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: AMRICAN Chemical Co. 4201 S CALFAT AVE Griffith IN.
10. Use EPA ID Number: IND.0.0.1.6.3.6.0.2.6.5
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 a Solvent UN 1993 | 0.0.7 | OR | 00350 | 1 | F005 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above:

K. Handling Codes for Wastes Listed Above: 1 = Gd.

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 fait 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] Hashisaka — Signature: [illegible] — Date: Month [illegible] Day [illegible] Year 92

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: MICHAEL YURECHKO — Signature: Michael Yurechko — Date: Month 07 Day 31 Year 90

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: [illegible] — Signature: [illegible] — Date: Month [illegible] Day [illegible] Year [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: [illegible] A — Date: Month 7 Day 3 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.

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY

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0018204

General Electric Co.

1983

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 9-80

MANIFEST NUMBER
A 52307

002437

## GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: [illegible]
2. EPA IDENTIFICATION NO.: [illegible]
3. COMMENTS/SPECIAL INSTRUCTIONS:
4. P.O. BOX OR STREET ADDRESS: [illegible]
5. CITY, STATE, ZIP CODE: [illegible]
6. TELEPHONE NUMBER: ( )-

| 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) |
|---|---|---|---|---|---|---|---|
| [illegible] | 50 | [illegible] | [illegible] | UN 1993 | 1. Solid 3. Mixture 2. Liquid [2] | D001 | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |
| | | | | | 1. Solid 3. Mixture 2. Liquid [ ] | | |

This is to certify that the information contained herein is t[illegible] above named materials are properly classified, described, pa[illegible] condition for transportation according to the applicable reg[illegible] tation and the Wis. Department of Natural Resources or th[illegible]

Pressed Steel Tank Co. Inc.

15. AUTHORIZED SIGNATURE: [signature]
16. NAME (Print): N. J. GOETZ
17. DATE SHIPPED M D Y: 2/28/82

## TRANSPORTER SECTION

18. COMPANY NAME: ABC Services Inc.
20. P.O. BOX OR STREET ADDRESS: 5700 49th Street
21. CITY, STATE, ZIP CODE: Kenosha, Wisconsin 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: [signature]
25. NAME (Print): Kip Nelson
26. Date Accepted M D Y: 2/26/82

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, Inc.
33. EPA IDENTIFICATION NO.: IND016360265
34. P.O. BOX OR STREET ADDRESS: 420 S. Colfax Avenue
35. CITY, STATE, ZIP CODE: Griffith, Indiana
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): Alvin Whitaker
40. Date Accepted M D Y: 3/3/82

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 53707

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

FOR DNR USE ONLY

To 204K T-50
GRM 3/6/82

HAZARDOUS WASTE FACILITY

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 Quanity Exempt
Manifest Document No.:
2. Page 1 of
Information in the shaded areas is not required by Federal law

3. Generator's Name
Prestige Auto
410 No. G Street, Lake Worth, Fla. 33460

4. Generator's Phone ( 305 ) 585-8604

A. State Manifest Document Number: IN 034109
B. State Generator's ID:

5. Transporter 1 Company Name: ABC Services
6. US EPA ID Number: WID076159839
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 So. Colfax Street
Griffith, Ind. 46319
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 | I. Waste No. |
|---|---|---|---|---|---|
| a. Flammable Liquid NOS Iguitable- UN 1993 | 04 | DF | 220 | 1 | 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: RONALD IPPOLITI
Signature: Ronald Ippoliti
Month Day Year: 9 19 86

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: LENNY RAMONEZ
Signature: Leonard Ramonez
Date: Month Day Year: 9 19 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: [signature]
Month Day Year: 9 23 86

GENERATOR / TRANSPORTER / FACILITY

IN 034109

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

T.S.D. DETACH AND RETAIN THIS COPY

123K767
012009

# 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 | | Presto Corp. 3918 W. Shakespeare Chgo Il 60647 312 384 6500 | |
| TRANSPORTER # 1 | ILD045695715 | H. Roskin 4710 W Roosevelt Chgo Il 60650 312 261 7236 | |
| TRANSPORTER # 2 (If required) | IND016360265 | American Chemical Service Griffith In 46319 312 768 3400 | 6/6/83 |
| 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) |
|---|---|---|---|---|---|---|---|---|---|---|
| 2dr | | F001 | Trichlor | 1710 | | None | 55g | 100g | | |

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

To 120 T-63 6PM 6-3-83

TSDF COPY

005390

# 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 | | Presto Corp.3918 Shakespeare Chgo Il 60647 384 6500 | |
| TRANSPORTER # 1 | ILD045695715 | Roskin Motor 4710 Roosevelt Chgo Il 60650 2617236 | |
| TRANSPORTER # 2 (if required) | | | |
| TSDF TREATMENT STORAGE OR DISPOSAL FACILITY | IND016360265 | American Chemical Griffith In 46319 312 768 3400 | 9/29/83 |
| 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) |
|---|---|---|---|---|---|---|---|---|---|---|
| 1dr | | F001 | Trichlor ORMA | 1710 | | None | 55g | ~~100g~~ 50 | | |

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.

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.

5

GENERATOR'S SIGNATURE DATE TSDF SIGNATURE DATE

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TSDF COPY

T0118K T-63 OPM 10-31-83 DN VLOCK

005388

# HAZARDOUS WASTE MANIFEST

2 Presto
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 | | Presto Corp. 3918 W Shakespeare Chgo Il 60647 384 6500 | |
| TRANSPORTER # 1 | ILD045695715 | Roskin Motor 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 | 3.6 |
| 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 | | F001 | Trichlor | 1710 | | none | 55g | 50g | | |

**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

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TSDF COPY

005391

# HAZARDOUS WASTE MANIFEST

3

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 | | Presto Corp 3918 W Shakespeare Chgo Il 60647 384 6500 | |
| TRANSPORTER # 1 | LLD045695715 | H Roskin 4710 W Roosevelt Chgo Il 60650 2617236 | |
| TRANSPORTER # 2 (If required) | | | |
| TSDF TREATMENT STORAGE OR DISPOSAL FACILITY | IND016360265 | Amer Chem Serv Griffith In 46319 3127683400 | 1/23/84 |
| 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) |
|---|---|---|---|---|---|---|---|---|---|---|
| 3dr | | F001 | Trichlor | 1710 | | None | 55g | 150g | | |

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.

5

GENERATOR'S SIGNATURE DATE TSDF SIGNATURE DATE

STYLE F-50 © LABELMASTER CHICAGO, IL 60646

TSDF COPY

To 122R T-63 GRM 1.23.84

CJ5385

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**

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

**GENERATOR**

3. Generator's Name and Mailing Address
Prices Autobody
403 W. Mission Bellevue, NE 68005
4. Generator's Phone ( 402 ) 291-3413

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

5. Transporter 1 Company Name: Strand Trucking
6. US EPA ID Number: ILD000646810
C. State Transporter's ID: IL SWB 0311
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, Ind. 46319
10. US EPA ID Number: IND016360265
G. State Facility's ID: IL Site# 9180890002
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. FLAMMABLE LIQUID NOS IGNITABLE UN1993 | x | 1 | DM | 55 | 1 | D0001 |
| b. | | | | | | |
| c. | | | | | | |
| d. | | | | | | |

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

GENERATOR WILL DELIVER TO: J.D. CASEY WAREHOUSE - 10828 'J' ST. - OMAHA, NE.
FOR PICKUP BY STRAND TRUCKING.

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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: Thomas Rice | Signature | Month 3 Day 11 Year 86

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: THOMAS BATTEN | Signature | Month 3 Day 11 Year 86

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: Michael O Burke | Signature | Month 3 Day 11 Year 86

Style F15R-6 Labelmaster, Div. of American Labelmark Co. Inc. 60646

EPA Form 8700-22 (Rev. 4-85) Previous edition is obsolete.

204TT-50

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011973

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.: ILD087157251 — Manifest Document No.: 90006

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

3. Generator's Name and Mailing Address: PRIMER TIME BODY WORKS, 23403 WALL ST., LAKE VILLA, ILL

4. Generator's Phone (708) 395-9444

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: ADCOM EXPRESS

6. US EPA ID Number: ILD047267364

C. State Transporter's ID: 0367

D. Transporter's Phone: 708-424-3013

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, 440 GRIFFITH-COLFAX, GRIFFITH, IND. 46319

10. US EPA ID Number: IND014340465

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. | X | RQ WASTE PAINT RELATED MATERIAL F003 FLAMMABLE LIQUID NA1263 | 002 | DM | 110 | 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: Tom Podock — Signature: Tom Podock — Month Day Year: 04 18 90

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: RONALD R. BULLARD — Signature: Ronald R. [signature] — Month Day Year: 04 18 90

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: STEVE KUMNICK — Signature: Steve Kumnick — Month Day Year: 04 19 90

GENERATOR — TRANSPORTER — FACILITY

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 4/20

0013200

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.: ILD087157251 — Manifest Document No.: 90006

2. Page 1 of 1

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

3. Generator's Name and Mailing Address: PRIMER TIME BODY WORKS, 23403 WALL ST., LAKE VILLA, IL

4. Generator's Phone (708) 395-9444

A. State Manifest Document Number

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

| | 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 FOOD FLAMMABLE LIQUID NA 1263 | X | 002 | DM | 00110 | | 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: [illegible] — Signature: [illegible] — Month Day Year: 07 03 90

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: STEVE KULAVICK — Signature: Steve Kulavick — Month Day Year: 07 11 90

GENERATOR — TRANSPORTER — FACILITY

Style F15 REV-6 LABELMASTER, Div. of AMERICAN LABELMARK CO., CHICAGO, IL 60646

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

12 DCT 63 7/13

TSDF COPY

0018221

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

0335282

FID# ILD 082954504

Authorization Number 998763

PRINT FLEX INC. (Company Name) | 2375 DELTA LANE (Address)

ELK GROVE VILLAGE (City) | ILL (State) | 60007 (Zip)

03144 00033 G (Generator Number)

WASTE HAULER(S)

LINDGREBE (Hauler Name) | STATE RD 130 (Hauler Address) | ICC 2450 IND 009842824 (S.W.H. Registration Number)

(Hauler Name) | VALPARAISO, IN 46383 (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) | IND. (State) | 46319 (Zip) | IND 001636065

**TO BE COMPLETED BY WASTE GENERATOR**

WASTE NAME: WASTE INK SOLVENTS

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

F003

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: WASTE SOLVENT

HAZARD CLASS:

WEIGHT FOR D.O.T. USE 17,600 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 2420

1 (GALLONS) (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One) 44 (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: 6-23-81

Paul R Addison (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: 6/23/81

(2) [signature] (Authorized Signature) DATE: 6/24/81

**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: 6/24/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 2047 T-50 6/24/81 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

000666

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

0335284

FID# ILD 082954504

Authorization Number 998763

Print Flex Inc (Company Name) — 2375 Delta Lane (Address)

Elk Grove Village (City) — Ill (State) — 60007 (Zip)

03144000033 (Generator Number)

WASTE HAULER(S)

Landgrebe (Hauler Name) — State Rd 130 W (Hauler Address) — ICC 2980 IND 009842824 (S.W.H. Registration Number)

(Hauler Name) — Valparaiso, Ind 46373 (Hauler Address) — S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) — 420 S. Colfax (Address) — 918089 02 (Site Number)

Griffith (City) — Ind. (State) — 46319 (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste 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: Waste Solvent

HAZARD CLASS: Flamable

WEIGHT FOR D.O.T. USE 9,600 LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 1 1320

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One) 24 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: 10-1-81

Paul R. Addison (Authorized Signature)

PREPAID

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) Mitchell E. Mullins (Authorized Signature) DATE: 10/1/81

(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: 10/2-81

COMMENTS OR SPECIAL INSTRUCTIONS: UNLOADED AT DOCK 10/2/81
TO 20¼ T-50 10/13/81 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

000667

TO BE COMPLETED BY WASTE GENERATOR

# STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0146616

FID # ILD 052954504

Authorization Number 992763

Print Flex Inc. (Company Name) | 2375 Delta Lane (Address)

Elk Grove Village (City) | Illinois (State) | 60007 (Zip)

0314460033 Generator Number

WASTE HAULER(S)

(1) Landgrebe (Hauler Name) | State Rt. 102 W (Hauler Address) | ICC 2980 Ind. 009842824 S.W.H. Registration Number

(2) _____ (Hauler Name) | Valparaiso, Ind. 46393 (Hauler Address) | S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | 420 S. Colfax (Address) | 918089024 Site Number

Griffith (City) | Indiana (State) | 46319 (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste 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: 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: 4-8-82

Paul R Addison (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 1815 (1 GALLONS / 2 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) _____ (Authorized Signature) DATE: 4/9/82

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

_____ (Authorized Signature) DATE: 4/14/82

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 210 R - 750 GRM 4/15/82

003107

TO BE COMPLETED BY
W STE GENERATOR

# STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0146617

FID# ILD 082954504

Authorization Number ~~998763~~

PRINT FLEX (Company Name) | 2375 DELTA LANE (Address)

ELK GROVE VILLAGE (City) | IL (State) | 60007 (Zip)

03144 00033 G (Generator Number)

WASTE HAULER(S)

ICC 2980

(1) LAWDGREEN (Hauler Name) | STATE RD. 130 W (Hauler Address)

IND. 009842824 S.W.H. Registration Number

(2) _____ (Hauler Name) | VALPARAISO IND. 46393 (Hauler Address)

S.W.H. Registration Number

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | 4205 S. COLFAX (Address)

GRIFFITH (City) | INDIANA (State) | 46319 (Zip)

91808902 Site Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: WASTE INK SOLVENTS

F003

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 | UN1993 | 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: 9-23-82

Paul R Addison (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 275 0 | (1) GALLONS / 2 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) [signature] (Authorized Signature) DATE: 9/24/82

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

Frank Pair (Authorized Signature) DATE: 9/24/82

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 IERA PART - 6 GENERATOR

SITE COPY - PART 3

To 2042 7-50 GM 9-24-82 GM

003708

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

0335285

FID # ILD 082954504

Authorization Number 998763

PRINT FLEX, INC (Company Name) | 2375 DELTA LANE (Address)
ELK GROVE VILLAGE (City) | ILL (State) | 60007 (Zip)

03144000033 G (Generator Number)

WASTE HAULER(S)

LANDGREBE (Hauler Name) | STATE RD 130 W (Hauler Address)
ICC 2980
IND 009842824 (S.W.H. Registration Number)

(Hauler Name) | VALPARAISO, IND. 46383 (Hauler Address)
S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | 420 S. COLFAX (Address)
918 089 021 (Site Number)
GRIFFITH (City) | IND. (State) | 46319 (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE 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: WASTE SOLVENT
HAZARD CLASS: FLAMMABLE
WEIGHT FOR D.O.T. USE: 12,000 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS OR GAL

QUANTITY OF WASTE DELIVERED: 1650
(1) GALLONS (Circle One) (2) CU. YDS.

METHOD OF SHIPMENT (Circle One) 30 (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: 2-9-82 Paul R Oldwin (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: 2/9/82

(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:

(Authorized Signature) DATE:

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

On dock 2/10/82 GRM
To 210 R T-50 GRM

SITE COPY - PART 3

003105

TO BE COMPLETED BY WASTE GENERATOR

**STATE OF ILLINOIS**
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0146618

FID# ILD 082954504

Authorization Number

WASTE GENERATOR

PRINT FLEX INC (Company Name) — 2375 DELTA LANE (Address)

ELK GROVE VILLAGE (City) — IL (State) — 60007 (Zip)

0314400033 G (Generator Number)

WASTE HAULER(S)

ICC 2980
IND. 009842824

(1) LANDGREBE (Hauler Name) — STATE RD. 130 W (Hauler Address) — S.W.H. Registration Number

(2) (Hauler Name) — VALPARAISO, INDIANA 46393 (Hauler Address) — S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

3127683400

AMERICAN CHEMICAL SERVICE (Facility Name) — 420 S. COLFAX (Address) — 91808902 (Site Number)

GRIFFITH (City) — INDIANA (State) — 46319 (Zip)

IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE INK SOLVENTS — WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

F003
UN1993

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: 1-26-83 — Paul R. Addison (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 2750 (1 GALLONS / 2 CU. YDS.) (Circle One)

METHOD OF SHIPMENT (Circle One) 50 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] 50 (Authorized Signature) — DATE: 1/27/83

(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: 1/28/83

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 204 KT-50 GRM 1-28-83

005372

**TO BE COMPLETED BY WASTE GENERATOR**

**STATE OF ILLINOIS**
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0146619

FID# ILD 082954504

WASTE GENERATOR

Authorization Number ____

PRINT FLEX, INC. (Company Name) | 2375 Delta Lane (Address)

ELK GROVE Village (City) | IL. (State) | 60007 (Zip)

03144 00033 G (Generator Number)

WASTE HAULER(S)

(1) LANDGREBE (Hauler Name) | STATE RD. 130 W (Hauler Address)

ICC 2980
IND. 009842824 (S.W.H. Registration Number)

(2) ____ (Hauler Name) | VALPARAISO, INDIANA 46383 (Hauler Address)

S.W.H. Registration Number ____

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERKAN CHEMICAL SERVICE (Facility Name) | 420 S. COLFAX (Address)

918 089 02 (Site Number)

GRIFFITH (City) | INDIANA (State) | 46319 (Zip)

IND. 016360265

**TO BE COMPLETED BY WASTE GENERATOR**

WASTE NAME: WASTE INK SOLVENTS

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

F003

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: UN 1993

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: 5-13-83

Paul R Addison (Authorized Signature)

**WASTE HAULER***

QUANTITY OF WASTE RECEIVED: 2750 (1 GALLONS / 2 CU. YDS.) (Circle One)

METHOD OF SHIPMENT (Circle One) 50 (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: 5/13/83

(2) ____ (Authorized Signature) DATE: __/__/__

**DISPOSAL, STORAGE, OR TREATMENT FACILITY***

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED

JW Mayfield (Authorized Signature) DATE: 5/16/83

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**

TO204 RT-50 GRM 5-16-83

005373

TO BE COMPLETED BY WASTE GENERATOR

# STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0146620

FID # ILD 082954504

WASTE GENERATOR

Authorization Number

PRINT FLEX INC. (Company Name) — 2375 DELTA LANE (Address)

ELK GROVE VILLAGE (City) — IL (State) — 60007 (Zip)

031 44 00 033 G (Generator Number)

WASTE HAULER(S)

ICC 2980
IND. 009842824

(1) LANDGREBE (Hauler Name) — STATE RD. 130 W. (Hauler Address) — S.W.H. Registration Number

(2) [illegible] (Hauler Name) — VALPARAISO, INDIANA 46393 (Hauler Address) — S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) — 420 S. COLFAX (Address) — 918 08 902 (Site Number)

GRIFFITH (City) — INDIANA (State) — 46319 (Zip)

IND. 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE INK SOLVENTS

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

F003
UN 1993

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: 12-13-83 — [signature] (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 2750 (47–52) — 1 GALLONS / 2 CU. YDS. (Circle One) (53)

METHOD OF SHIPMENT (Circle One) 50 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) Fred L. Kaselka (Authorized Signature) — DATE: 12 / 13 / 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: 12 / 14 / 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

TO204KT-50 GRM 12.14.83

005376

TO BE COMPLETED BY WASTE GENERATOR

# STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0146629

FID-ILD 082954504

WASTE GENERATOR

PRINT FLEX INC. (Company Name)
2375 DELTA LANE (Address)
ELK GROVE VILLAGE (City) IL, (State) 60007 (Zip)

Authorization Number

031440 00033 G
Generator Number

WASTE HAULER(S)

(1) LANDGREBE (Hauler Name) STATE RD. 130 W, (Hauler Address)
ICC 2980
EPA IND. 009842824
S.W.H. Registration Number

(2) (Hauler Name) VALPARAISO, INDIANA 46393 (Hauler Address)
S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) 420 S. COLFAX (Address)
9 18 08 902 Site Number
GRIFFITH (City) INDIANA (State) 46319 (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE 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: WASTE SOLVENT
HAZARD CLASS: FLAMMABLE
F003
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: 7-29-83
Paul R Addison (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 2750 (1 GALLONS / 2 CU. YDS.) (Circle One)

METHOD OF SHIPMENT (Circle One) 50 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) Landgrebe Dan Eqt (Authorized Signature) DATE: 8 / 4 / 83

(2) _____ (Authorized Signature) DATE: ___ / ___ / ___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

Frank Price (Authorized Signature) DATE: 8 / 4 / 83

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 204E T-50 ERM 8.4.83

05374

TO BE COMPLETED BY WASTE GENERATOR

172

# STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0146630

FID# ILD 082954504

Authorization Number

WASTE GENERATOR

Print Flex (Company Name) — 2375 Delta Lane (Address)

Elk Grove Village (City) — Ill. (State) — 60007 (Zip)

03144 00033 G (Generator Number)

WASTE HAULER(S)

(1) Landgrebe (Hauler Name) — State Rd. 130W (Hauler Address) — ICC 2980 IND 009842824 S.W.H. Registration Number

(2) _____ (Hauler Name) — Valparaiso, Indiana (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) — 46319 (Zip) — IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Ink Solvents

WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

F003

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: UN 1993

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: 10-7-83

Paul R Addison (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 2750 (47–52) — 1 GALLONS / 2 CU. YDS. (Circle One) (53)

METHOD OF SHIPMENT (Circle One) 50 — 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 / 7 / 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 10 / 10 / 83 (60–66)

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

TO204ET-50GRM 10-11-83

005375

**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. ILD082954504 | 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
PRINT FLEX INC.
1045 Entry Dr. BENSENVILLE IL 60106
4. Generator's Phone ( 312 ) 595-3610

A. Illinois Manifest Document Number IL 1149735

B. Illinois Generator's ID 0314405033

C. Illinois Tranporter's ID 12980

D. (312) 842-3121 Transporter's Phone

5. Transporter 1 Company Name: LANDGREBE
6. US EPA ID Number: ILD069842824

E. Illinois Transporter's ID 18795

F. ( ) Transporter's Phone

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

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL
420 South Colfax
Griffith Ind. 46319
10. US EPA ID Number: ILD016360265

G. Illinois Facility's ID 9118089D002

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 Nos |
|---|---|---|---|---|---|---|---|
| a. | UN 1993 Waste Solvent-Flamable | Y | 16 | DM | 935 | | EPA HW Number D001 / Authorization Number |
| b. | | | | | | | EPA HW Number / Authorization Number |
| c. | | | 18 | | | | EPA HW Number / Authorization Number |
| d. | | | | | | | EPA HW Number / Authorization Number |

J. Additional Descriptions for Materials Listed Above
BL# 6699

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: MIRIAM FINKELSTEIN | Signature | Date: Month 10 Day 31 Year 85

| TRANSPORTER | 17. Transporter 1 Acknowledgement of Receipt of Materials | Printed/Typed Name: Landgrebe Motor - Philip Lyon | Signature | Date: Month 1 Day 8 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 1 Day 8 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

To 204 RT-50

08714

**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 099545041 — Manifest Document No.

2. Page 1 of — 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
PRINT FLEX INC
1045 ENTRY DR. BENSENVILLE, IL 60106
4. Generator's Phone ( 312 ) 595-3610

A. Illinois Manifest Document Number IL 1120167

B. Illinois Generator's ID 03144050 3B

C. Illinois Tranporter's ID 1875

D. (312) 342-5131 Transporter's Phone

E. Illinois Transporter's ID 1895 1291

F. ( ) Transporter's Phone

5. Transporter 1 Company Name LAIDCREBE

6. US EPA ID Number ILD 099 843 284

7. Transporter 2 Company Name

8. US EPA ID Number

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL
400 SOUTH CLIFFORD
GRIFFITH IND 46319

10. US EPA ID Number ILD 063 602 625

G. Illinois Facility's ID 9718490042

H. Facility's Phone (219) 838-3190

| | 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. | UN 1993 Waste Solvent | X | | DM | 1650 | L | EPA HW Number D001 / Authorization Number |
| b. | | | | | | | EPA HW Number / Authorization Number |
| c. | | | | | 171 | | EPA HW Number / Authorization Number |
| d. | | | | | | | EPA HW Number / Authorization Number |

J. Additional Descriptions for Materials Listed Above
BL # 6832

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: MIRIAM FINKELSTEIN — Signature: Miriam Finkelstein — Date: Month 10 Day 31 Year 89

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: FRED Schmidt — Signature: Fred Schmidt — Date: Month 2 Day 1 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: K. MURPHY — Signature — Date: Month 2 Day 14 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

204 KT-50 ✓ 9300 BTU 1/1. CL.

038115

**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/

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# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: ILD082954504 11 — 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: Print Flex Inc, 1045 Entry Dr, Bensenville, Il 60106
4. Generator's Phone (312) 595-3610
5. Transporter 1 Company Name: LANDGREBE
6. US EPA ID Number: IND 000984 2324
7. Transporter 2 Company Name:
8. US EPA ID Number:
9. Designated Facility Name and Site Address: American Chemical, 420 South Colfax, Griffith Ind 46319
10. US EPA ID Number: IND016360265

A. Illinois Manifest Document Number: IL 1294922
B. Illinois Generator's ID: 031440503 3
C. Illinois Tranporter's ID: 2930
D. (312) 842-3121 Transporter's Phone
E. Illinois Transporter's ID: 1875
F. Transporter's Phone
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. | V | Waste Solvent UN 1993 | 5 | DM | 825 | | 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: BL #6929

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 | Signature | Date (Month Day Year) |
|---|---|---|
| Miriam Finkelstein | Miriam Finkelstein | 03 15 85 |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| FRED Schlundt | Fred Schlundt | 3 15 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) |
|---|---|---|
| | Price | 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

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FACILITY COPY - PART 3

204 TC T-50 ✓

038716

**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

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# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: ILD0829545041 — 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: Print Flex Inc, 1045 Entry Dr. Bensenville Il 60106

4. Generator's Phone (312) 595-3610

A. Illinois Manifest Document Number: IL 1120168

B. Illinois Generator's ID: 0314405033

5. Transporter 1 Company Name: LANDGREDE

6. US EPA ID Number: IND009842824

C. Illinois Tranporter's ID: 29701875

D. (312) 842-3121 Transporter's Phone

7. Transporter 2 Company Name:

8. US EPA ID Number:

E. Illinois Transporter's ID: 1875

F. (312) Transporter's Phone

9. Designated Facility Name and Site Address: American Chemical, 420 South Colfax, Griffith Ind 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. | ✓ | UN waste solvent 1993 | | DM | 660 | 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: BL# 6859

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 |
|---|---|---|
| Miriam Finkelstein | Miriam Finkelstein | 02 21 85 |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date Month Day Year |
|---|---|---|
| Fred L. Koselke | Fred L. Koselke | 2 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 |
|---|---|---|
| | | |

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.

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204 RT-50 ✓

038717

**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

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# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. ILD082954504 | Manifest Document No. 1 | 2. Page 1 of | 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
PRINT FLEX INC
1045 ENTIY DR. BENSENVILLE, IL 60106
4. Generator's Phone (312) 595-3610

A. Illinois Manifest Document Number IL 1294923
B. Illinois Generator's ID 031405033
C. Illinois Tranporter's ID 2985
D. (312) 843-313 Transporter's Phone
E. Illinois Transporter's ID 1875
F. (USA) Transporter's Phone

5. Transporter 1 Company Name: LAIDLAWBE
6. US EPA ID Number: IND000984224
7. Transporter 2 Company Name:
8. US EPA ID Number:

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL
4220 S. COLFAX
GRIFFITH IND 46319
10. US EPA ID Number: IND016360265

G. Illinois Facility's ID 9180890002
H. Facility's Phone (219) 768-3100

| | 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. | V | WASTE SOLVENT UN 1993 | | DM | 1320 | 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
BLF 7007

K. Handling Codes for Wastes Listed Above
In Item #14: 1 = Gallons, 2 = Cubic Yards
5 76

15. Special Handling Instructions and Additional Information
4778

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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 |
|---|---|---|
| MIRIAM FINKELSTEIN | Miriam Finkelstein | 04 11 85 |

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date Month Day Year |
|---|---|---|
| FRED SCHLUNDT | Fred Schlundt | 4 4 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 | 4 15 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

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FACILITY COPY - PART 3

204 F-T-50

08776

**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.: ILD082954504 11 — 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: Print Flex Inc, 1045 Entry Dr. Bensenville, Il 60106

4. Generator's Phone (312) 595 3610

A. Illinois Manifest Document Number: IL 1294924

B. Illinois Generator's ID: 0314405033

5. Transporter 1 Company Name: Landgrebe

6. US EPA ID Number: IND0009842824

C. Illinois Tranporter's ID: 2985

D. (312) 342-3121 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, 420 Scolfax, Griffith Ind. 46319

10. US EPA ID Number: IND016360265

G. Illinois Facility's ID: 9180890002

H. Facility's Phone: (312) 768-768-3400

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. | V | Waste Solvent UN 1993 | | DM | 1100 | 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

BL# 7100

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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) |
|---|---|---|
| Miriam Finkelstein | Miriam Finkelstein | 4 30 85 |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| FRED Schlundt | Fred Schlundt | 4 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 | Signature | Date (Month Day Year) |
|---|---|---|
| FRANK PRICE | Frank Price | 5 1 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

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FACILITY COPY - PART 3

204R T-50

008119

**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 0829 5450 411 — 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: Point Plex Inc, 1045 Entry Dr, Bensenville Il

4. Generator's Phone (312) 595-3610

A. Illinois Manifest Document Number: IL 1294925

B. Illinois Generator's ID: 031 440 5633

5. Transporter 1 Company Name: Landgrebe — 6. US EPA ID Number: IND 000 984 284

C. Illinois Tranporter's ID: 2985

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, 4205 Colfax, Griffith Ind 46319 — 10. US EPA ID Number: IND 001 636 0215

G. Illinois Facility's ID: 918 089 0002

H. Facility's Phone: (312) 768-3100

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. | V | Waste Solvent UN1993 | 1 | DM | 1100 | 1 | EPA HW Number: D001 / Authorization Number |
| b. | | Flamable 285 | | | | | EPA HW Number / Authorization Number |
| c. | | 23300 | | | | | EPA HW Number / Authorization Number |
| d. | | | | | | | EPA HW Number / Authorization Number |

J. Additional Descriptions for Materials Listed Above: BL#7N3

K. Handling Codes for Wastes Listed Above — In Item #14: 1 = Gallons, 2 = Cubic Yards

15. Special Handling Instructions and Additional Information: 5512

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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.

Miriam Finkelstein — Printed/Typed Name — Signature: Miriam Finkelstein — Date: Month 05 Day 16 Year 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials — Printed/Typed Name: Fred Koselke — Signature: Fred Koselke — Date: Month 5 Day 16 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: FRANK PRICE — Signature: Frank Price — Date: Month 5 Day 17 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

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FACILITY COPY - PART 3

204E 7-50

008720

**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.: ILD119664043 — 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: Print Flex Inc, 1045 Entry Dr. Bensenville Il 60106

4. Generator's Phone (312) 595-3610

A. Illinois Manifest Document Number: IL 1120169

B. Illinois Generator's ID: 0314145013

5. Transporter 1 Company Name: Landgrebe Motor — 6. US EPA ID Number: IND000924284

C. Illinois Tranporter's ID: 11875

D. (312) 842-3121 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 S Colfax, Griffith Ind 46319 — 10. US EPA ID Number: IND000136026

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. | V | Waste Solvent Un1993 | 35 | DM | 1925 | 1 | EPA HW Number: D001 / Authorization Number |
| b. | | 117 27018 | | | | | EPA HW Number / Authorization Number |
| c. | | | | | | | EPA HW Number / Authorization Number |
| d. | | | | | | | EPA HW Number / Authorization Number |

J. Additional Descriptions for Materials Listed Above: BL# 7382, 15,750#

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 |
|---|---|---|
| Miriam Finkelstein | Miriam Finkelstein | 07 01 85 |

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date Month Day Year |
|---|---|---|
| Landgrebe Motor | Philip L. Lyons | 07 01 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 | Signature | Date Month Day Year |
|---|---|---|
| Frank Price | Frank Price | 7 2 85 |

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

204 KT-50

008721

**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.: ILD119664043 — 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: Print Flex Inc, 1045 Entry Dr. Bensenville Il. 60106

4. Generator's Phone (312) 595-3610

A. Illinois Manifest Document Number: IL 1294926

B. Illinois Generator's ID: 0314145013

5. Transporter 1 Company Name: Landgrebe Motor

6. US EPA ID Number: IND000984284

C. Illinois Tranporter's ID: 1875

D. (312) 842-3121 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, 4205 Colfax, Griffith Ind 46319

10. US EPA ID Number: IND001636026

G. Illinois Facility's ID:

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. | V | Waste Solvent, UN1993 | 13 | DH | 715 | 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: BL# 7415 5850#

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 | Signature | Date Month Day Year |
|---|---|---|
| Miriam Finkelstein | Miriam Finkelstein | 07 15 85 |

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date Month Day Year |
|---|---|---|
| Fred. Koselke | Fred Koselke | 7 15 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 | Signature | Date Month Day Year |
|---|---|---|
| GR Murphy | [signature] | 7 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

204 KT-50

008122

**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

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## UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I L D 1 1 9 6 6 4 0 4 3 1 — 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
PRINT FLEX INC
1045 Entry Dr. BENSENVILLE IL 60106
4. Generator's Phone ( 312 ) 595-3610

A. Illinois Manifest Document Number IL 129427

B. Illinois Generator ID 0 3 1 4 1 4 5 0 1 3

5. Transporter 1 Company Name: LANDGREBE MOTOR — 6. US EPA ID Number: I N D 0 0 0 9 8 4 3 7 4

C. Illinois Tranporter's ID 1 1 8 7 5

D. (312) 842-3 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 S. Colfax
GRIFFITH IN 46319 — 10. US EPA ID Number: I N D 0 0 1 1 3 6 0 2 6 5

G. Illinois Facility's ID 9 1 8 0 8 9 0 0 9 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. V WASTE SOLVENT UN1993 | | 15 | DM | 225 | 1 | EPA HW Number D001 / Authorization Number |
| b. MANIFEST 392 | | | | | | EPA HW Number / Authorization Number |
| c. | | | | | | EPA HW Number / Authorization Number |
| d. | | | | | | EPA HW Number / Authorization Number |

J. Additional Descriptions for Materials Listed Above
BULK 504
WT 6750#

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: MIRIAM FINKELSTEIN — Signature: Miriam Finkelstein — Date: Month 10 Day 29 Year 85

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Landgrebe Motors — Signature: Phillip L Lyons — Date: Month 10 Day 29 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: FRANK PRICE — Signature: Frank Price — Date: Month 10 Day 31 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

204K T-50 UJ8120

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. IL D119664043 — 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
PRINT FLEX INC
1045 ENTRY DR. BENSENVILLE, IL. 60106
4. Generator's Phone ( 312 ) 595-3610

A. Illinois Manifest Document Number IL 1294928
B. Illinois Generator's ID 0311141501 3
C. Illinois Tranporter's ID 1875
D. (312) 842-3121 Transporter's Phone

5. Transporter 1 Company Name: LADDGREBE MOTOR — 6. US EPA ID Number: IND000994284
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
AMERICHEM CHEMICAL
420 S. COLFAX
GRIFFITH IND. 46319
10. US EPA ID Number: IND001636245
G. Illinois Facility's ID 9180890002
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. V WASTE SOLVENT UN1993 II | V | 12 | DM | 660 | 1 | EPA HW Number D001 |
| b. | | 25 | | | | EPA HW Number |
| c. | | | | | | EPA HW Number |
| d. | | | | | | EPA HW Number |

Authorization Number

J. Additional Descriptions for Materials Listed Above
BL# 7577
5400#

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 | Signature | Date (Month Day Year) |
|---|---|---|
| HIRIAM FINKELSTEIN | Miriam Finkelstein | 08 11 85 |

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| F. Schlundt | F Schlundt | 8 14 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) |
|---|---|---|
| FRANK PRICE | Frank Price | 8 15 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

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FACILITY COPY - PART 3

204 E T-50

038124

**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. ILD119664043 Manifest Document No. 0901

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: PRINT FLEX INC, 1045 ENTRY DR. BENSENVILLE, IL. 60106

4. Generator's Phone (312) 595 3610.

A. Illinois Manifest Document Number: IL 1294929

B. Illinois Generator's ID: 0314145013

5. Transporter 1 Company Name: LAND GREBE MOTOR

6. US EPA ID Number: IND000984284

C. Illinois Tranporter's ID: 1845

D. (312) 842-3121 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 S. COLEAX, GRIFFITH INDIANA 46319

10. US EPA ID Number: IND001636026 5

G. Illinois Facility's ID: 4469780890002

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. | | V WASTE SOLVENT UN1993 | 12 | DM | 1660 | 11 | 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: BL # 7672, 5400#

K. Handling Codes for Wastes Listed Above — In Item #14: 1 = Gallons, 2 = Cubic Yards: 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 | Signature | Date (Month Day Year) |
|---|---|---|
| MIRIAM FINKELSTEIN | Miriam Finkelstein | 09 04 85 |

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| F Schlundt | F Schlundt | 9 4 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 | Signature | Date (Month Day Year) |
|---|---|---|
| R P MURPHY | [signature] | 9 5 85 |

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

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FACILITY COPY - PART 3

204 TCT-50

008125

**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. ILD119640431 Manifest Document No. 10902

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
PRINT FLEX INC
1045 Entry Drive, BENSENVILLE, Il. 60106

4. Generator's Phone (312) 595-3610

A. Illinois Manifest Document Number IL 1294931

B. Illinois Generator's ID 0314145013

5. Transporter 1 Company Name LANDGREBE MOTOR

6. US EPA ID Number IND000984284

C. Illinois Tranporter's ID 1875

D. (312) 842-3121 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 S. COLFAX
Griffith Ind. 46319

10. US EPA ID Number IND001636026 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. |
|---|---|---|---|---|---|---|---|
| a. | | V | WASTE SOLVENT UN1993 | 12 | DM | 660 | 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
BL# 7694
5400#

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 | Signature | Date Month Day Year |
|---|---|---|
| MIRIAM FINKELSTEIN | Miriam Finkelstein | 09 12 85 |

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date Month Day Year |
|---|---|---|
| F. W. Schlundt | F W Schlundt | 9 12 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 | Signature | Date Month Day Year |
|---|---|---|
| A R MURPHY | [signature] | 9 13 85 |

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

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FACILITY COPY - PART 3

204 K T-E 50
008120

**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.: ILD119664043 Manifest Document No.: 10903

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: Print Flex Inc, 1045 Entry Dr. Bensenville Il 60106

4. Generator's Phone (312) 595 3610

A. Illinois Manifest Document Number: IL 1410951

B. Illinois Generator's ID: 0311474501B

5. Transporter 1 Company Name: LANDGREBE Motor

6. US EPA ID Number: IND 000984284

C. Illinois Tranporter's ID: 11875

D. (312) 842-3121 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 S Colfax, Griffith Ind. 46319

10. US EPA ID Number: IND 001636026 5

G. Illinois Facility's ID: 9180890002

H. Facility's Phone: (312) 768-3940

| | 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. | | V WASTE SOLVENT UN1993 | 15 | DH | 825 | 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: BL 7821 6750# UN1993 45

K. Handling Codes for Wastes Listed Above: 1 = Gallons 2 = Cubic Yards

15. Special Handling Instructions and Additional Information: UNLESS I AM A SMALL QUANITY GENERATOR WHO HAS BEEN EXEMPT by statute I certify I have a program in place to reduce the volume & toxicity of waste

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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: Miriam Finkelstein — Signature: Miriam Finkelstein — Date: Month 09 Day 21 Year 85

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: F. W. Schlundt — Signature: F. W. Schlundt — Date: Month 9 Day 20 Year 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: FRANK PRICE — Signature: Frank Price — Date: Month Day Year

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. #6

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 RT-50

008727

**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.: ILD119664043 — Manifest Document No.: 10903

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: Print Flex Inc, 1045 Entry Dr, Bensenville Il 426

4. Generator's Phone: (312) 595-3610

A. Illinois Manifest Document Number: IL 1410952

B. Illinois Generator's ID: 0314145013

5. Transporter 1 Company Name: LANGREBE Motor

6. US EPA ID Number: IND000984284

C. Illinois Tranporter's ID: 18175

D. (312) 542-3151 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 S COLFAX, GRIFFITH IND 46319

10. US EPA ID Number: IND000636605

G. Illinois Facility's ID: 9180890002

H. Facility's Phone: (312) 792-3560

| 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. | V | WASTE SOLVENT UN1993 | 12 | DM | 660 | 1 | EPA HW Number: D001 / Authorization Number |
| b. | | | | | | | EPA HW Number / Authorization Number |
| c. | | | | | | | EPA HW Number / Authorization Number |
| d. | | BL# 7583 SYLU# | | | | | 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 redude the volume and toxicity of waste

K. Handling Codes for Wastes Listed Above: 1 = Gallons 2 = Cubic Yards

15. Special Handling Instructions and Additional Information: generated to the degree I have determined to be conomically 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 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 | Signature | Date (Month Day Year) |
|---|---|---|
| MIRIAM FINKELSTEIN | [signature] | 10 08 85 |

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| F. Schlundt | F. Schlundt | 10 8 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) |
|---|---|---|
| STEVE KULAVICK | Steve Kulavick | 10 9 85 |

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. #6

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

204R T-50

008120

**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. ILD119664043 Manifest Document No. 17007

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
PRINT FLEX INC
1045 Entry Drive BENSENVILLE, IL 60106
4. Generator's Phone ( 312 ) 595-3610

A. Illinois Manifest Document Number IL 1410953
B. Illinois Generator's ID 0314145073
C. Illinois Tranporter's ID 1875
D. (312) 842-3[illegible] Transporter's Phone
E. Illinois Transporter's ID
F. ( ) Transporter's Phone
G. Illinois Facility's ID 9118089000[illegible]
H. Facility's Phone (31[illegible]) 768-3400

5. Transporter 1 Company Name LANDGREBE MOTOR 6. US EPA ID Number IND001636021[illegible]

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

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL
420 S. Colfax
Griffith Ind. 46319
10. US EPA ID Number IND001636021[illegible]

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 UN1993 | 1 | DM | 990 | EPA HW Number D001 |
| b. | | 49 | 55 | 123 | | EPA HW Number |
| c. | | | | | | EPA HW Number |
| d. | | 8100# BL# 7969 | | 1 | | EPA HW 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 certifieation under section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste**

K. Handling Codes for Wastes Listed Above
1 = Gallons 2 = Cubic Yards

15. Special Handling Instructions and Additional Information
**generated to the degfee 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 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.

GENERATOR — Printed/Typed Name: MIRIAM FINKELSTEIN — Signature: Miriam Finkelstein — Date (Month Day Year): 10 25 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials — Printed/Typed Name: Fred L. Koselke — Signature: Fred L. Koselke — Date: 10 25 85

18. Transporter 2 Acknowledgement of Receipt of Materials — Printed/Typed Name: — Signature: — Date:

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: 10 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. #6

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FACILITY COPY - PART 3

204E T-50 ✓

UJ8127

**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. ILD119620403 Manifest Document No. 1101

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
PRINT FLEX INC
1045 E NIY Dr. BENSENVILLE IL

A. Illinois Manifest Document Number IL 1410955

B. Illinois Generator's ID 1031149450/3

4. Generator's Phone ( 312 ) 595-3610

5. Transporter 1 Company Name — 6. US EPA ID Number
LANDGRAFF Motor — IND 1 1 1 3 1 0 2 6 4 5

C. Illinois Tranporter's ID 11975

D. (312) 847-3151 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 — 10. US EPA ID Number
AMERICAN CHEMICAL
420 S. Colfax
GRIFFITH IND 46319 — IND 0 0 1 6 3 6 0 2 5 5

G. Illinois Facility's ID 9 1 8 0 8 9 0 0 0 2

H. Facility's Phone (312) 768-3150

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 UN1993 | 12 | DM | 660 | L | D001 |
| b. | | | | | | | |
| c. | | | | | | | |
| d. | | BL 8010 SLUG # | | | | | |

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
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 | Signature | Date Month Day Year |
|---|---|---|
| MIRIAM FINKELSTEIN | Miriam Finkelstein | 11 16 85 |

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date Month Day Year |
|---|---|---|
| F.W. Schlundt | F.W. Schlundt | NA 11 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 |
|---|---|---|
| FRANK PRICE | Frank Price | 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. #6

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FACILITY COPY - PART 3

204 F T-50

U8150

**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. ILD119664043 — Manifest Document No. 1102 — 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
Print Flex, Inc.
1045 Entry Drive, Bensenville, Ill 60106
4. Generator's Phone ( 312 ) 595-3610

A. Illinois Manifest Document Number IL 1437991
B. Illinois Generator's ID 0 3 1 4 1 4 5 0 1 3
C. Illinois Tranporter's ID 1 8 7 5
D. (312) 842-3121 Transporter's Phone
E. Illinois Transporter's ID
F. ( ) Transporter's Phone
G. Illinois Facility's ID 9 1 8 0 8 9 0 0 0 2
H. Facility's Phone (312) 768-3400

5. Transporter 1 Company Name: Landgrebe Motor — 6. US EPA ID Number: IND000984284
7. Transporter 2 Company Name — 8. US EPA ID Number
9. Designated Facility Name and Site Address: American Chemical, 420 S. Colfax, Griffith, IN 46319 — 10. US EPA ID Number: IND0016360265

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. | V Waste Solvent UN1993 | 15 | DM | 825 | P | 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

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. BL# 1070 6750#

K. Handling Codes for Wastes Listed Above: 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.

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| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| Miriam Finkelstein | Miriam Finkelstein | 11 15 85 |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| F.W Schlundt | F.W Schlundt | 11 15 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) |
|---|---|---|
| FRANK PRICE | Frank Price | 11 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. #6

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FACILITY COPY · PART 3

204R7-50 ✓

UJ8132

**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.: ILD119664043
Manifest Document No.: 12001
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
**Print Flex, Inc.**
**1045 Entry Drive, Bensenville, Ill 60106**
4. Generator's Phone ( 312 ) 595-3610

A. Illinois Manifest Document Number: IL 1437992
B. Illinois Generator's ID: 0 3 1 4 1 4 5 0 1 3

5. Transporter 1 Company Name: **Landgrebe Motor**
6. US EPA ID Number: IND000984284
C. Illinois Tranporter's ID: 1 8 7 5
D. (312) 842-3121 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 S. Colfax**
**Griffith, IN 46319**
10. US EPA ID Number: IND0016360265
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) | 12. Containers No. | Type | 13. Total Quantity | 14. Unit Wt/Vol | I. Waste No. |
|---|---|---|---|---|---|
| a. HM V **Waste Solvent UN1993** | 1 5 | DM | 825 | 1 | EPA HW Number D001 |
| b. | | | | | EPA HW Number |
| c. | | | | | EPA HW Number |
| d. BL#913'7 6750# | | | | | 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**

K. Handling Codes for Wastes Listed Above
1 = Gallons 2 = Cubic Yards

15. Special Handling Instructions and Additional Information
**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.**

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GENERATOR

| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| Miriam Finkelstein | Miriam Finkelstein | 11 24 85 |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| Landgrebe Motors Philip L. Lyons | Philip L Lyons | 11 25 1985 |

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) |
|---|---|---|
| FRANK PRICE | Frank Price | 11 27 1985 |

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

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FACILITY COPY - PART 3

204K T-50✓

038133

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. ILD119664043 — Manifest Document No. 8501

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
Print Flex, Inc.
1045 Entry Drive, Bensenville, Ill 60106
4. Generator's Phone ( 312 ) 595-3610

A. Illinois Manifest Document Number IL 1437994

B. Illinois Generator's ID 0 3 1 4 1 4 5 0 1 3

5. Transporter 1 Company Name: Landgrebe Motor — 6. US EPA ID Number: IND000984284

C. Illinois Tranporter's ID 1 8 7 5

D. (312) 842-3121 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 S. Colfax
Griffith, IN 46319
10. US EPA ID Number IND0016360265

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 Solvent UN1993 | V | 2 | DM | 110 | 1 | EPA HW Number D001 / Authorization Number |
| b. | | | | | | EPA HW Number / Authorization Number |
| c. | | | | | | EPA HW Number / Authorization Number |
| d. BL# 8278 - 900# | | | | | | 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

K. Handling Codes for Wastes Listed Above
1 = Gallons 2 = Cubic Yards

15. Special Handling Instructions and Additional Information
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| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| Miriam Finkelstein | Miriam Finkelstein | 10 | 9 | 86 |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| Fred Koseke | Fred Koseke | 10 | 10 | 86 |

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 |
|---|---|---|---|---|
| STEVE KULAVICK | | 10 | 10 | 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

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FACILITY COPY - PART 3

204RT-50 011963

STATE OF ILLINOIS ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

178

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. ILD119664043 Manifest Document No. X10002

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
PRINT FLEX, INC.
1045 ENTRY DRIVE, BENSENVILLE, IL 60106

4. Generator's Phone ( 312 ) 595-3610

A. Illinois Manifest Document Number IL 1467301

B. Illinois Generator's ID 0 3 1 4 1 0 4 5 0 1 3

5. Transporter 1 Company Name
LANDGREBE MOTOR

6. US EPA ID Number
IND000984284

C. Illinois Transporter's ID 1 8 7 5

D. (312) 842-3121 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 S. COLFAX
GRIFFITH, IN 46319

10. US EPA ID Number
IND0016360265

G. Illinois Facility's ID 9 1 8 0 8 9 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 SOLVENT UN1993 | V | 18 | DM | 990 | 1 | EPA HW Number: Authorization Number: D001 |
| 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
BL# 8313
8100#

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 | Signature | Date Month Day Year |
|---|---|---|
| MIRIAM FINKELSTEIN | Miriam Finkelstein | 01 13 86 |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date Month Day Year |
|---|---|---|
| Al Schlendt | Al Schlendt | 1 13 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 |
|---|---|---|
| David Henry | David Henry | 1 16 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

209 FT 70

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. ILD119664043 — Manifest Document No. 96163

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
Print Flex, Inc.
1045 Entry Drive, Bensenville, Ill 60106
4. Generator's Phone ( 312 ) 595-3610

A. Illinois Manifest Document Number IL 1467302

B. Illinois Generator's ID 0 3 1 4 1 4 5 6 1 3

5. Transporter 1 Company Name: Landgrebe Motor — 6. US EPA ID Number: IND000984284

C. Illinois Transporter's ID 1 8 7 5

D. 312 842-3121 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 S. Colfax
Griffith, IN 46319

10. US EPA ID Number: IND0016360265

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. | 12. Containers Type | 13. Total Quantity | 14. Unit Wt/Vol | I. Waste No. |
|---|---|---|---|---|---|---|---|
| GENERATOR a. | Waste Solvent, UN1993 | V | 15 | DM | 825 | 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
BLH 8389 6750 #

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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: Miriam Finkelstein — Signature: Miriam Finkelstein — Date: Month 01 Day 30 Year 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Landgrebe Motor Philip Lyons — Signature: Philip Lyons — Date: Month 01 Day 30 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: WHITAKER — Signature — Date: Month 1 Day 31 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

204RT-50 011965

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. **ILD119664043** Manifest Document No. 816004

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
**Print Flex, Inc.**
**1045 Entry Drive, Bensenville, Ill 60106**
4. Generator's Phone ( 312 ) 595-3610

A. Illinois Manifest Document Number **IL 1467303**

B. Illinois Generator's Designation **0 3 1 4 1 4 5 0 1 3**

5. Transporter 1 Company Name **Landgrebe Motor** — 6. US EPA ID Number **IND000984284**

C. Illinois Transporter's ID **1 8 7 5**

D. **312 842-3121** 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 S. Colfax**
**Griffith, IN 46319**
10. US EPA ID Number **IND0016360265**

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. | V Waste Solvent UN1993 | 15 | DM | 825 | 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
1600#

K. Handling Codes for Wastes Listed Above In Item #14
1 = Gallons 2 = Cubic Yards

15. Special Handling Instructions and Additional Information
BLF 8434 UN1993 D001

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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.

GENERATOR

Printed/Typed Name: **Miriam Finkelstein** — Signature: Miriam Finkelstein — Date: Month 2 Day 07 Year 86

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Landgrebe Motor Philip L Lyons — Signature: Philip L Lyons — Date: Month 02 Day 07 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: FDUNFEE — Signature: FDunfee — Date: Month 2 Day 10 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 T-50 ✓

011960

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. ILD119664043 — 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
Print Flex, Inc.
1045 Entry Drive, Bensenville, Illinois 60106
4. Generator's Phone ( 312 ) 595-3610

A. Illinois Manifest Document Number IL 1467304
B. Illinois Generator's ID 0 3 1 4 1 4 5 0 1 3
C. Illinois Transporter's ID 1 8 7 5
D. (312) 842-3121 Transporter's Phone

5. Transporter 1 Company Name: Landgrebe Motor — 6. US EPA ID Number: IND000984284
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 S. Colfax
Griffith, IN 46319
10. US EPA ID Number: IND0016360265
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 Solvent UN1993 | V | 15 | DM | 825 | 1 | EPA HW Number D001 / Authorization Number |
| b. | | | | | | | EPA HW Number / Authorization Number |
| c. | BL#8483 | | | | | | EPA HW Number / Authorization Number |
| d. | 6750# | | | | | | 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.

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Printed/Typed Name: Miriam Finkelstein — Signature: Miriam Finkelstein — Date (Month Day Year): 02 25 86

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: F.W. Schluntz — Signature: F.W. Schluntz — Date (Month Day Year): 2 26 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: STEVE KULNICK — Signature: Steve Kulnick — Date (Month Day Year): 02 27 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.

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FACILITY COPY - PART 3

204 R T-50

011967

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.: ILD119664043 — Manifest Document No.: [illegible]

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
Print Flex, Inc.
1045 Entry Drive, Bensenville, Ill 60106

4. Generator's Phone ( 312 ) 595-3610

A. Illinois Manifest Document Number: IL 1467306

B. Illinois Generator's ID: 0 3 1 4 1 4 5 0 1 3

5. Transporter 1 Company Name: Landgrebe Motor

6. US EPA ID Number: IND000984284

C. Illinois Transporter's ID: 1 8 7 5

D. (312) 842-3121 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 S. Colfax
Griffith, IN 46319

10. US EPA ID Number: IND0016360265 — 13500

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) | 12. Containers No. | Type | 13. Total Quantity | 14. Unit Wt/Vol | I. Waste No. |
|---|---|---|---|---|---|---|
| a. | HM V Waste Solvent UN1993 | 2 | 24 | [illegible] | | 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: 13500 II

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.

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Printed/Typed Name: Miriam Finkelstein — Signature: Miriam Finkelstein — Date (Month Day Year): 04 22 86

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Landgrebe Motor Philip Lhyons — Signature: Philip L Lyons — Date (Month Day Year): 04 22 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 in item 19.

Printed/Typed Name: STEVE KULAVICK — Signature: Steve Kulavick — Date (Month Day Year): 04 23 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 #6 GENERATOR COPY – PART 1 - DO NOT REMOVE PART 1 FROM SET UNTIL COMPLETED.

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FACILITY COPY - PART 3

204 K T50 311 05

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. **ILD119664043** 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
**Print Flex, Inc.**
**1045 Entry Drive, Bensenville, Ill 60106**
4. Generator's Phone ( **312** ) **595-3610**

A. Illinois Manifest Document Number **IL 1467307**

B. Illinois Generator's ID **0 3 1 4 1 4 5 0 1 3**

5. Transporter 1 Company Name **Landgrebe Motor** 6. US EPA ID Number **IND000984284**

C. Illinois Transporter's ID **1 8 7 5**

D. **(312) 842-3121** 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 S. Colfax**
**Griffith, IN 46319**
10. US EPA ID Number **IND0016360265**

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 UN1993** | **V** | 2 | DM | 1100 | | 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.

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| Printed/Typed Name | Signature | Date Month Day Year |
|---|---|---|
| **Miriam Finkelstein** | Miriam Finkelstein | 10 07 86 |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date Month Day Year |
|---|---|---|
| FRED Schlundt | Fred Schlundt | 10 7 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 |
|---|---|---|
| Harold F. Schmidt | Harold F. Schmidt | 10 10 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.**

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FACILITY COPY - PART 3

118E T63

011969

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. ILD119664043 — 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
Print Flex, Inc.
1045 Entry Drive, Bensenville, Ill 60106
4. Generator's Phone ( 312 ) 595-3610

A. Illinois Manifest Document Number IL 1467308

B. Illinois Generator's ID 0 3 1 4 1 4 5 0 1 3

5. Transporter 1 Company Name: Strand Truck — 6. US EPA ID Number: ILD000646810

C. Illinois Transporter'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 S. Colfax
Griffith, IN 46319
10. US EPA ID Number: IND0016360265

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. FLAMMABLE LIQ Waste Solvent UN1993 THINNER | V | 80 | DM | 4400 | 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 | Signature | Date Month Day Year |
|---|---|---|
| ~~MIRIAM FINKELSTEIN~~ | Miriam Finkelstein | 10 15 86 |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date Month Day Year |
|---|---|---|
| JAMES BATICH | James Batich | 10 16 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 |
|---|---|---|
| HAROLD F Schmidt | Harold F Schmidt | 10 17 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

118-T63

011970

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. ILD119664043 Manifest Document No. [illegible]

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

Print Flex, Inc.
1045 Entry Drive, Bensenville, Ill 60106

4. Generator's Phone (312) 595-3610

A. Illinois Manifest Document Number: IL 1467309

B. Illinois Generator's ID: 0 3 1 4 1 4 5 0 1 3

5. Transporter 1 Company Name: Strand Truck

6. US EPA ID Number: ILD000646810

C. Illinois Transporter'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 S. Colfax
Griffith, IN 46319

10. US EPA ID Number: IND0016360265

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 Solvent UN1993 | V | 38 | DM | 2090 | 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: BL 11C9979

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.

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Printed/Typed Name: Miriam Finkelstein Signature: Miriam Finkelstein Date: Month Day Year 11 13 86

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: STAN STRAND Signature: Stan Strand Date: Month Day Year 11 13 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: HARROLD F Schmidt Signature: Harold F Schmidt Date: Month Day Year 11 13 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

EMI - 38 - 11 - 24 - 7 - 63

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.: ILD119664043 — Manifest Document No.: 16008

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:
Print Flex, Inc.
1045 Entry Drive, Bensenville, Ill 60106

4. Generator's Phone: (312) 595-3610

A. Illinois Manifest Document Number: [redacted]

B. Illinois Generator's ID: [redacted]

5. Transporter 1 Company Name: Strand Truck

6. US EPA ID Number: ILD000646810

C. Illinois Transporter's ID: [redacted]

D. Transporter's Phone: 312 385-8440

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 S. Colfax
Griffith, IN 46319

10. US EPA ID Number: IND0016360265

G. Illinois Facility's ID: [redacted]

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. | V | Waste Solvent UN1993 | 24 | DM | 1320 | 1 | EPA HW Number: [redacted] 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: [redacted]

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.

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| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| MIRIAM FINKELSTEIN | Miriam Finkelstein | 12 09 86 |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| Stan Strand | [signature] | 12 09 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) |
|---|---|---|
| Harrow F. Schmidt | [signature] | 12 [illegible] |

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.

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FACILITY COPY - PART 3

MRK 24-119K 563 6

011972

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

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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 |
|---|---|---|
| ILD119664043701 | | |

3. Generator's Name
Print Flex, Inc.
1045 Entry Drive, Bensenville, Ill 60106

4. Generator's Phone ( 312 ) 595-3610

A. State Manifest Document Number: IN 100735

B. State Generator's ID: 0314145013

5. Transporter 1 Company Name: Strand Truck

6. US EPA ID Number: ILD000646810

C. State Transporter's ID: 0311

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
420 D. Colfax
Griffith, IN 46319

10. US EPA ID Number: INDO01636026 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 | Waste No. |
|---|---|---|---|---|---|
| a. WASTE SOLVENT | 1 | DM | 1 | DR | 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.

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| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| MIRIAM FINKELSTEIN | | 01 | 14 | 87 |

**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 | Month | Day | Year |
|---|---|---|---|---|
| Wayne F. Schmidt | | 01 | 14 | 87 |

IN 100735

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

T.S.D. DETACH AND RETAIN THIS COPY

MAR 21-116R T63b

012560

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 LD 1 1 96 64 0 4 3 — Manifest Document No.: 87002

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

3. Generator's Name: Print Flex, Inc.
1045 Entry Dr. Bensenville, IL. 60106

4. Generator's Phone:

A. State Manifest Document Number: IN 100734

B. State Generator's ID: 0514145013

5. Transporter 1 Company Name: Standard Truck

6. US EPA ID Number: LL D 0 0 0 6 4 6 8 1 0

C. State Transporter's ID: 0311

D. Transporter's Phone: 312-385-8400

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 D. Colfax Griffith IN

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

G. State Facility's ID:

H. Facility's Phone: 312-766-3400

| 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. Liquid Waste Solvent UN1993 | 34 | DM | 1870 | 1 | D001 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above: [illegible]

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: Miriam Finkelstein — Signature: Miriam Finkelstein — Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials — Date

Printed/Typed Name: Stan Stand — Signature: Stan St — 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: Harold F. Schmidt — Month Day Year: 02 04 87

IN 100734

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

T.S.D. DETACH AND RETAIN THIS COPY

MRK 34-116 T636

012561

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 1 1 9 6 6 4 0 4 3
Manifest Document No.: 8 7 0 0 3
2. Page 1 of 1
Information in the shaded areas is not required by Federal law

3. Generator's Name: Print Flex, Inc.
1045 Entry Dr., Bensenville IL. 60106

A. State Manifest Document Number: IN 100726

4. Generator's Phone: 312 595-3610

B. State Generator's ID: 0314145013

5. Transporter 1 Company Name: Strand Truck
6. US EPA ID Number: I L D 0 0 6 4 6 8 1 0

C. State Transporter's ID: 0311
D. Transporter's Phone: 312 385-8400

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
Griffith, IN. 60106

10. US EPA ID Number: I N D 0 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 | Waste No. |
|---|---|---|---|---|---|
| a. FLAMMABLE LIQ. Liquid Waste Solvent UN1993 | 25 | D M | 1 37 5 | 1 | 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.

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Printed/Typed Name: Donna Forbes
Signature: [signature]
Month Day Year: 0 8 0 4 8 0

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JAMES BATTON
Signature: [signature]
Date: 0 8 0 4 8 0

18. Transporter 2 Acknowledgement of 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 manifest except as noted Item 19.
Printed/Typed Name: HARROLD F. Schmidt
Signature: [signature]
Month Day Year: 0 8 0 4 8 0

GENERATOR

TRANSPORTER

FACILITY

IN 100726

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

T.S.D. DETACH AND RETAIN THIS COPY

GRW 25-116R TG3 B

012562

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

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Form Approved OMB No. 2000 0404 Expires 7 31 86

# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. / Manifest Document No.: ILD119664043870 05

2. Page 1 of

Information in the shaded areas is not required by Federal law

3. Generator's Name: Print Flex, Inc.] Inc.

A. State Manifest Document Number: IN 100727

1045 Entry Drive Bensenville, IL. 60106

4. Generator's Phone: 312 595-3610

B. State Generator's ID: 0314145013

5. Transporter 1 Company Name: Strand Truck

6. US EPA ID Number: ILD006446800

C. State Transporter's ID: 0311

D. Transporter's Phone: 385-8400

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, Griffith, IN.

10. US EPA ID Number: IND016360265

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. Flamable Liquid Liquid Waste Solvent UN1993 | 2 5 | D M | 133 7 5 | 1 | 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.

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GENERATOR

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| Donna Forbes | | | | |

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 | Month | Day | Year |
|---|---|---|---|---|
| HAROLD F. SCHMIDT | | | | |

IN 100727

EPA Form 8700-22A (Rev. 11-85)

UHWM 2/LP2

T.S.D. DETACH AND RETAIN THIS COPY

MAR 25-204R 150 13

012563

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

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# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. ILD119664043870 06 — Manifest Document No.

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

3. Generator's Name: Print Flex, Inc.
1045 Entry Drive
Bensenville, IL. 60106 (312) 595-3610

4. Generator's Name

A. State Manifest Document Number: IN 100728

B. State Generator's ID: 0314145013

C. State Transporter's ID: 0311

D. Transporter's Phone: 312 385-8400

E. State Transporter's ID

F. Transporter's Phone

5. Transporter 1 Company Name: Strand Truck

6. US EPA ID Number: ILD000646810

7. Transporter 2 Company Name

8. US EPA ID Number

9. Designated Facility Name and Site Address: American Chemical
420 S. Colfax
Griffith IN. 60106

10. US EPA ID Number: IND016360265

G. State Facility's ID: 9180890002
(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 | 15. Waste No. |
|---|---|---|---|---|---|
| a. Flamable Liquid Waste Solvent UN1993 | 026 | DM | 1430 | 1 | 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.

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Printed/Typed Name: Donna Forbes — Signature: [signature] — Month 0 Day 1 Year 87

17. Transporter 1 Acknowledgement of Receipt of Materials — Date

Printed/Typed Name: JAMES BATTEY — Signature: [signature] — Month 05 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: HARRIED F. Schmidt — Signature: [signature] — Month 05 Day 01 Year 87

IN 100728

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

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MNL 26-204R T50 B

012564

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

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**UNIFORM HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. / Manifest Document No.: I L D1 1 9 6 6 4 0 4 3 8 7 0 0 7

2. Page 1 of

Information in the shaded areas is not required by Federal law

A. State Manifest Document Number: IN 100729

3. Generator's Name: Print Flex, Inc.
4. Generator's Address: 1045 Entry Drive
Bensenville, ILL. 60106 (312)595-3610

B. State Generator's ID: 0314145013

5. Transporter 1 Company Name: Strand Truck
6. US EPA ID Number: I L 0 0 0 6 4 6 8 1 0
C. State Transporter's ID: 0311
D. Transporter's Phone: (312)-385-8400

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
Griffith, IN. 46319
10. US EPA ID Number: I N D 0 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. | 12. Containers Type | 13. Total Quantity | 14. Unit Wt/Vol | Waste No. |
|---|---|---|---|---|---|
| a. Flammable Liquid Waste Solvent | 3 0 | D M | 1 6 5 0 | 1 | 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 | Signature | Month | Day | Year |
|---|---|---|---|---|
| Donna Forbes | | | | |

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 |
|---|---|---|---|---|
| Harold F. Schmidt | Harold F. Schmidt | 05 | 12 | 87 |

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

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IN 100729

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

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Form Approved OMB No. 2000 0404 Expires 7 31 86

**UNIFORM HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. / Manifest Document No.: ILD119664043870 08

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

A. State Manifest Document Number: IN 100730

3. Generator's Name: Print Flex, Inc.
4. Generator's Address: 1045 Entry Drive, Bensenville, IL. 60106
Generator's Phone: (312) 595-3610

B. State Generator's ID: 0311145013

5. Transporter 1 Company Name: Strand Truck
6. US EPA ID Number: ILD006468107
C. State Transporter's ID: 0311
D. Transporter's Phone: (312) 385-8400

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, Griffith, IN. 46319
10. US EPA ID Number: IND010360265
G. State Facility's ID: 9160890002
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 | 15. Waste No. |
|---|---|---|---|---|---|
| a. Flammable Liquid Waste Solvent UN1993 | 08 | DM | 154 | 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

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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.

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GENERATOR

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| Donna Forbes | | 6 | 12 | 87 |

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 |
|---|---|---|---|---|
| Harold F. Schmidt | Harold F. Schmidt | 6 | 12 | 87 |

IN 100730

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

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

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**UNIFORM HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. / Manifest Document No.: I L D 1 1 9 5 6 4 0 4 3 8 7 0 0 9

2. Page 1 of

Information in the shaded areas is not required by Federal law

3. Generator's Name: Print Flex, Inc.
1045 Entry Drive Bensenville, IL. 60106

A. State Manifest Document Number: IN 100731

4. Generator's Phone ( ): 312 595-3610

B. State Generator's ID: 031414013

5. Transporter 1 Company Name: Strand Truck

6. US EPA ID Number: I L D 0 0 0 6 4 5 8 1 0

C. State Transporter's ID: (312) 385-0311

7. Transporter 2 Company Name

8. US EPA ID Number

D. State Transporter's ID

E. Transporter's Phone

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

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

F. State Facility's ID: 91808900002

G. Facility's Phone: (312) 769-3400

| 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 Waste Solvent UN1993 | 2-5 | DM | 10700 11-15-0 | 1 | D001 |
| b. NOS 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.

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: Donna Forbes
Signature:
Month Day Year: 07 08 87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: James Batey
Signature:
Date: 07 08 87

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
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 Day Year: 07 08 87

IN 100731

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

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012567

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

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**UNIFORM HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. / Manifest Document No.: ILD 118648488 / 00984 3 87010 1 0
2. Page 1 of
Information in the shaded areas is not required by Federal law

**GENERATOR**

3. Generator's Name: Print Flex, Inc.
1015 Entry Drive Bensenville, IL. 60106
4. Generator's Phone: 312 595-3610
A. State Manifest Document Number: IN 100732
B. State Generator's ID: 0314145013
C. State Transporter's ID: 0311
D. Transporter's Phone: (312) 385-0311

5. Transporter 1 Company Name: Strand Truck
6. US EPA ID Number: ILD 000 646 810
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
Griffith, IN. 46319
10. US EPA ID Number: IND 016 360 265
G. State Facility's ID: 9180890002
H. Facility's Phone: (219) 924-9393

| 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 Flamable Liquid NOS UN1993 | 25 | DM | 11250 | 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.

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| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| Donna Forbes | | 07 | 22 | 87 |

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date: Month | Day | Year |
|---|---|---|---|---|
| Donna Forbes | | | | |

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 |
|---|---|---|---|---|
| Harold F. Schmidt | | 07 | 22 | 87 |

IN 100732

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

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

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Form Approved OMB No. 2000 0404 Expires 7 31 86

**UNIFORM HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. / Manifest Document No.: ILD119664043870 11

2. Page 1 of

Information in the shaded areas is not required by Federal law

3. Generator's Name: Print flex, Inc.
1045 Entry Drive Bensenville, IL. 60106

4. Generator's Phone: ( 312 ) 595-3610

A. State Manifest Document Number: IN 100733

B. State Generator's ID: 0314145013

5. Transporter 1 Company Name: Strand Truck

6. US EPA ID Number: ILD000646810

C. State Transporter's ID: 0311

D. Transporter's Phone: 3128385-8400

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
Griffith, IN 46319

10. US EPA ID Number: IND016360265

G. State Facility's ID: 9180890002

H. Facility's Phone: (219) 924-7587

| 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 Waste NOS UN1993 | 01 | DM | 00550 | 1 | D001 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above: BL#12629

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.

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| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| Donna Forbesx | | 08 | 12 | 87 |

**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 | Month | Day | Year |
|---|---|---|---|---|
| Harrold F Schmidt | | 08 | 14 | 87 |

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

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1-204TT T50

IN 100733

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

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# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. IN·D·0·9·8·1·5·3·2·3·1·0 Manifest Document No. 6·1·8·8·5
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
Pintco, Inc.
1321 Van Deinse Ave., Greenville, Mich 48838
4. Generator's Phone ( 616 ) 754-3672

A. State Manifest Document Number INA 0161885
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 219-924-9570

5. Transporter 1 Company Name A&B Industrial Services
6. US EPA ID Number IN·D·0·1·7·1·4·7·2·2·2
7. Transporter 2 Company Name
8. US EPA ID Number

9. Designated Facility Name and Site Address
American Chemical
420 S. Colfax Ave
Griffith, IN 46319
10. US EPA ID Number IN·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. | Waste No. |
|---|---|---|---|---|---|
| a. Waste Propane UN 1274 | 006 | DM | 01810 | 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: Gary Wigle — Signature: Gary Wigle — Month 12 Day 28 Year 87

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: RAYMOND BRAGG — Signature: Raymond Bragg — Month 12 Day 28 Year 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: HAROLD FISHMAN — Signature — Month 12 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 0161885

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865 6-204RT-50 12/30/87

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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

012559

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

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# 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. |
|---|---|---|---|
| IND084581578 | 8169 | | |

**3. Generator's Name and Mailing Address**
Printco
1321 sVan Dines Ave. Greenville, MI 48838
4. Generator's Phone ( 616 ) 754-3672

**A. State Manifest Document Number**
INA 0117169

B. State Generator's ID

C. State Transporter's ID

D. Transporter's Phone (616)375-8595

E. State Transporter's ID

F. Transporter's Phone

**5. Transporter 1 Company Name** A&B Industrial Services
**6. Use EPA ID Number** IND017163222

**7. Transporter 2 Company Name**
**8. Use EPA ID Number**

**9. Designated Facility Name and Site Address**
American Chemical
420 S. 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. | Waste No. |
|---|---|---|---|---|---|
| a. Waste Combustible Liquid, N.O.S. NA 1993 | 3 | DM | 165 | G | D001 |
| b. Waste Propanol UN1274 | 6 | DM | 180 | 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

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GENERATOR

| Printed/Typed Name | Signature | Date Month | Day | Year |
|---|---|---|---|---|
| Belinda S. Lutke | Belinda S Lutke | 09 | 03 | 87 |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date Month | Day | Year |
|---|---|---|---|---|
| Wayne Briguence | Wayne Briguence | 09 | 03 | 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 | Signature | Date Month | Day | Year |
|---|---|---|---|---|
| Warren F Schmidt | | 09 | 09 | 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 0117169

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

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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

9-204R-T-50 9/9/87 AM

012558

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

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# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MID084581578 Manifest Document No. 613631

2. Page 1 of 1

Information in the shaded areas is not required by Federal law

3. Generator's Name
Printco
1321 Van Dines Ave. Greenville, MI 48838

4. Generator's Phone (616) 754-3672

A. State Manifest Document Number IN 091837

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
420 S. 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 Combustible Liquid, N.O.S. NA 1993 | 8 | DM | 410 | G | D001 |
| b. Waste Propanol UN1274 | 5 | DM | 150 | 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, 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 | 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 | Signature | Month Day Year

IN 091837

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

MRK T.S.D. DETACH AND RETAIN THIS COPY

8-117R T63 B
5-204R T50 B

012557

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·0·9·8·1·5·3·2·3·1·D | 2·8·2·1·0
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: Printco, Inc. 1321 Van Deinse Ave.; Greenville, MI 48838
4. Generator's Phone ( 616 ) 754-3672
A. State Manifest Document Number: INA 0228210
B. State Generator's ID
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 420 S. Colfax Ave Griffith, IN 46319 | 10. Use EPA ID Number: I·N·D·0·1·4·3·6·0·2·6·5
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 Picric acid UN 1274 | 009 | DM | 00270 | G | D001 |
| b. Waste Combustible Liquid NOS UN1993 | 006 | DM | 00330 | 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, 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 Wigle | Signature: Gary Wigle | Date: Month 08 Day 15 Year 88

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials — Printed/Typed Name: Will De Smit | Signature | Date: Month 08 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 this manifest except as noted in Item 19. — Printed/Typed Name: ALVIN WHITAKER | Signature | Date: Month 8 Day 17 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 0228210

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

203 TC TSD 3/4

001566

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.: MID991532310 — Manifest Document No.: 72266
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: Printco, 1321 Von Dines Ave, Greenville, MI 48838
4. Generator's Phone (616) 754-3672
5. Transporter 1 Company Name: Terra Environmental
6. Use EPA ID Number: MID017117222
7. Transporter 2 Company Name:
8. Use EPA ID Number:
9. Designated Facility Name and Site Address: American Chemical, 470 S. Colfax Ave, Griffith, IND 41319
10. Use EPA ID Number: IND016360265

A. State Manifest Document Number: INA 0172266
B. State Generator's ID:
C. State Transporter's ID:
D. Transporter's Phone: 616-375-7555
E. State Transporter's ID:
F. Transporter's Phone:
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 Combustible Liquid NOS NA 1993~~ | ~~5~~ | ~~DM~~ | ~~00275~~ | ~~G~~ | ~~D001~~ |
| b. Waste Combustible Liquid NOS NA 1993 | 004 | DM | 00.220 | 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, 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. Miller — Signature: D. Miller — Date: Month 08 Day 04 Year 89

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Ricardo P. Bryant — Signature: [signature] — Date: Month 08 Day 04 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: STEVE KULAVICK — Signature: [signature] — Date: Month 08 Day 08 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 0172266

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

3-204 TCT 50 8/10 1 204 TCT 50 8/11

0016825

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.: I L D 0 8 9 8 2 5 7 8 0
Manifest Document No.: 0 0 1 1 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
PRINTPACK, INC.
1400 ABBOTT DRIVE
ELGIN, ILL. 60123
4. Generator's Phone ( 708 ) 888-7150

A. State Manifest Document Number: INA 0341569
B. State Generator's ID: 0 8 9 4 3 8 0 0 0 9

5. Transporter 1 Company Name: MR. FRANK, INC.
6. Use EPA ID Number: I L D 9 8 4 3 7 7 5 0 4 9
C. State Transporter's ID: 0 0 7 9
D. Transporter's Phone: (708) 720-070(

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 AVENUE
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: 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) | 12. Containers No. | Type | 13. Total Quantity | 14. Unit Wt/Vol. | I. Waste No. |
|---|---|---|---|---|---|
| a. WASTE FLAMMABLE LIQUID N.O.S. (F003 AND F005) FLAMMABLE LIQUID UN 1993 R.Q. (ETHYL ACETATE, MEK) | 0 0 1 | T T | 05200 | G | F005 F003 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
a) MIXED SOLVENTS F003
F005

K. Handling Codes for Wastes Listed Above
T06/T07

15. Special Handling Instructions and Additional Information
1 = GALLONS P.O.# 13-33852

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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: FRED W WATTS
Signature: Fred W. Watts
Date Month Day Year: 8 12 90

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JOSEPH L. KOOINGA
Signature: Joseph L Kooinga
Date Month Day Year: 8 12 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 ALVIN
Signature:
Date Month Day Year: 8 22 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

00183?9

TO BE COMPLETED BY WASTE GENERATOR

# STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0144707

Authorization Number 997140

STAN PAK INC. (Company Name) | 1400 ABBOTT DRIVE (Address)

ELGIN (City) | ILL. (State) | 60120 (Zip)

0894380011 G (Generator Number)

WASTE HAULER(S)

(1) AMERICAN CHEMICAL (Hauler Name) | 420 S. COLFAX AVE. (Hauler Address) | S.W.H. Registration Number 0024002

(2) (Hauler Name) | (Hauler Address) | S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 S. COLFAX AVE. (Address) | 91808902 (Site Number)

GRIFFITH (City) | IND. (State) | 46319 (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: INK & ADHESIVE SOLVENT WASTE | 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: Flammable | HAZARD CLASS: None

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: 1/11/80 | M. J. Morse (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 004180 (47–52) | (1 GALLON / 2 CU. YDS.) (Circle One) 1 (53)

METHOD OF SHIPMENT (Circle One) 76 (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) John Hazlewood (Authorized Signature) | DATE: 01/11/80 (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:

M. Richard Briggs (Authorized Signature) | DATE: 1-14-80 (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

00000016

BE COMPLETED BY
WASTE GENERATOR

# STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0144708

Authorization Number 997140

STAN PAK INC. (Company Name) | 1400 ABBOTT DRIVE (Address)

ELGIN (City) | ILL. (State) | 60120 (Zip)

0894380011 G (Generator Number)

WASTE HAULER(S)

(1) AMERICAN CHEMICAL (Hauler Name) | 420 S. COLFAX AVE. (Hauler Address) | S.W.H. Registration Number 0024007

(2) (Hauler Name) | (Hauler Address) | S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 S. COLFAX AVE. (Address) | 91808902 (Site Number)

GRIFFITH (City) | IND. (State) | 46319 (Zip)

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: INK & ADHESIVE SOLVENT WASTE | 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: FLAMMABLE | HAZARD CLASS: NONE

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: 3/4/80 | M. D. Morse (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 003905 | 1 GALLONS 2 CU. YDS. (Circle One) 1

METHOD OF SHIPMENT (Circle One) 71 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) John Haywood (Authorized Signature) DATE: 03/04/80

(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: 3/4/80

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

00053

TO BE COMPLETED BY WASTE GENERATOR

# STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0144709

Authorization Number 997140

STAN PAK INC. (Company Name) | 1400 ABBOTT DRIVE (Address)

ELGIN (City) | ILL. (State) | 60120 (Zip)

0894380011 G (Generator Number)

WASTE HAULER(S)

(1) AMERICAN CHEMICAL (Hauler Name) | 420 S. COLFAX AVE. (Hauler Address) | S.W.H. Registration Number 0024001

(2) (Hauler Name) | (Hauler Address) | S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 S. COLFAX AVE. (Address) | 91808902 (Site Number)

GRIFFITH (City) | IND. (State) | 46319 (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: INK & ADHESIVE SOLVENT WASTE | 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: FLAMMABLE | HAZARD CLASS: NONE

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: 4/18/80 | M.L. Morse (Authorized Signature)

WASTE HAULER*

55 QUANTITY OF WASTE RECEIVED: 003025 (1 GALLON / 2 CU. YDS.) (Circle One) 1

METHOD OF SHIPMENT (Circle One) (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) John Hayward (Authorized Signature) DATE: 04/18/80

(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: 4/18/80

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

0000057

TO BE COMPLETED BY WASTE GENERATOR

# STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0144710 (1–7)

Authorization Number 997140 (8–13)

STAN PAK INC. (Company Name) | 1400 ABBOTT DRIVE (Address)

ELGIN (City) | ILL. (State) | 60120 (Zip)

0894380011 G (14–24) Generator Number

WASTE HAULER(S)

(1) AMERICAN CHEMICAL (Hauler Name) | 420 S. COLFAX AVE. (Hauler Address) | S.W.H. Registration Number 0024001 (25–31)

(2) (Hauler Name) | (Hauler Address) | S.W.H. Registration Number (32–38)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 S. COLFAX AVE. (Address) | 91808902 (39–46) Site Number

GRIFFITH (City) | IND. (State) | 46319 (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: INK & ADHESIVE SOLVENT WASTE | 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: FLAMMABLE | HAZARD CLASS: NONE

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: 6/2/80 | M. L. Morse (Authorized Signature)

WASTE HAULER*

77

QUANTITY OF WASTE RECEIVED: 004235 (47–52) | 1 GALLON / 2 CU. YDS. (Circle One) 1 (53)

METHOD OF SHIPMENT (Circle One) (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) J. Haywood (Authorized Signature) DATE: 06/02/80 (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:

Michael A. Bridge (Authorized Signature) DATE: 6/2/80 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424 3802

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

MPLETED BY
WASTE GENERATOR

# STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0144711

Authorization Number 997140

WASTE GENERATOR

PRINTPACK, INC. (STAN PAK INC.) — (Company Name)
1400 ABBOTT DRIVE — Address
ELGIN — City
ILL. — State
60120 — Zip

0894380011 G — Generator Number

WASTE HAULER(S)

(1) AMERICAN CHEMICAL — Hauler Name
420 S. COLFAX AVE. — Hauler Address
S.W.H. Registration Number 0024001

(2) Hauler Name
Hauler Address
S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL — (Facility Name)
420 S. COLFAX AVE. — Address
GRIFFITH — City
IND. — State
46319 — Zip

91808902 — Site Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: INK & ADHESIVE SOLVENT WASTE

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: FLAMMABLE

HAZARD CLASS: NONE

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: 7/18/80

M. J. Morse (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 004400 (47–52)

1 GALLONS (Circle One) 2 CU. YDS. 1 (53)

METHOD OF SHIPMENT (Circle One): DRUMS 80 — 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) John Hargwood (Authorized Signature) DATE 07/18/80

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

Michael C. Bulz (Authorized Signature) DATE: 7/18/80

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

0000038

TO BE COMPLETED BY WASTE GENERATOR

# STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0144712

WASTE GENERATOR

Authorization Number 997140

PRINTPACK, INC. (STAN PAK INC.) (Company Name)

1400 ABBOTT DRIVE (Address)

ELGIN (City) ILL. (State) 60120 (Zip)

0894380011 G (Generator Number)

WASTE HAULER(S)

(1) AMERICAN CHEMICAL (Hauler Name) 420 S. COLFAX AVE (Hauler Address) S.W.H. Registration Number 0024001

(2) (Hauler Name) (Hauler Address) S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) 420 S. COLFAX AVE. (Address) 91808902 (Site Number)

GRIFFITH (City) IND. (State) 46319 (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: INK & ADHESIVE SOLVENT WASTE

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: FLAMMABLE

HAZARD CLASS: NONE

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: 9/2/80 M. L. Morse (Authorized Signature)

WASTE HAULER*

80

QUANTITY OF WASTE RECEIVED: 004400 (1 GALLONS / 2 CU. YDS.) (Circle One) 1

METHOD OF SHIPMENT (Circle One) 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) (Authorized Signature) DATE: 09/02/80

(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: ___/___/___

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

000032

TO BE COMPLETED BY WASTE GENERATOR

# STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0144713

Authorization Number 997140

PRINTPACK, INC. (STAN PAK INC.) (Company Name)
1400 ABBOTT DRIVE (Address)
ELGIN (City) ILL. (State) 60120 (Zip)

0894380011 G (Generator Number)

WASTE HAULER(S)

(1) AMERICAN CHEMICAL (Hauler Name) 420 S. COLFAX AVE. (Hauler Address) S.W.H. Registration Number 0024001

(2) (Hauler Name) (Hauler Address) S.W.H. Registration Number

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) 420 S. COLFAX AVE. (Address) 9180890 2 (Site Number)
GRIFFITH (City) IND. (State) 46319 (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: INK & ADHESIVE SOLVENT WASTE

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: FLAMMABLE

HAZARD CLASS: NONE

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 M. P. Morse (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 004400 (1 GALLONS / 2 CU. YDS.) (Circle One) 1

METHOD OF SHIPMENT (Circle One) (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) [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

0000012

TO BE COMPLETED BY WASTE GENERATOR

# STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0144714

WASTE GENERATOR

Authorization Number 997140

PRINTPACK, INC. Tel. No. 312-888-7150 (STAN PAK INC.) (Company Name)

1400 ABBOTT DRIVE (Address)

FED ILD 089825780

ELGIN (City) ILL. (State) 60120 (Zip)

0894380011 G (Generator Number)

WASTE HAULER(S)

(1) STRAND TRUCKING C/O AMERICAN CHEMICAL (Hauler Name)

13642 KENTON CRESTWOOD, ILL. 60445
420 S. COLFAX AVE. (Hauler Address)

S.W.H. Registration Number 00 24 002

FED. ILT000646810

(2) (Hauler Name) (Hauler Address) S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

FED IND 016360265

AMERICAN CHEMICAL (Facility Name)

420 S. COLFAX AVE. (Address)

918081902 (Site Number)

GRIFFITH (City) IND. (State) 46319 (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: INK & ADHESIVE SOLVENT WASTE

WASTE PHASE: ~~LIQUID~~ (Liquid, Gaseous, Solid)

DOT ID NO. NA 9189

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: R Q . HAZARDOUS WASTE LIQ. N. O. S.

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. & THE E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 12-18-80 FWO-3

(Authorized Signature)

WASTE HAULER* ~~FED IND 016360265~~ 80

FED. ILT 000646810

QUANTITY OF WASTE RECEIVED 04400 (1 GALLON / 2 CU. YDS.) (Circle One)

METHOD OF SHIPMENT (Circle One) DRUM 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) William J. Sylvester (Authorized Signature) DATE: 12/18/80

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY* FED IND 016360265

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

Michael T. Burg (Authorized Signature) DATE: 12/18/80

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

000653

TO BE COMPLETED BY WASTE GENERATOR

# STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0144717

WASTE GENERATOR

Authorization Number 99 71 40

Tel. No. 312-888-7150
PRINTPACK, INC. (Company Name)
1400 ABBOTT DRIVE (Address)
FED ILD 089825780
08 94 38 00 11 (Generator Number)
ELGIN (City) ILL. (State) 60120 (Zip)

WASTE HAULER(S)

(1) STRAND TRUCKING C/O AMERICAN CHEMICAL (Hauler Name)
13642 KENTON CRESTWOOD, ILL. 60445
420 S. COLFAX AVE. (Hauler Address)
S.W.H. Registration Number 0 02 40 02
FED ILT 000646810

(2) (Hauler Name) (Hauler Address) S.W.H. Registration Number

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

FED IND 016360265

AMERICAN CHEMICAL (Facility Name)
420 S. COLFAX AVE. (Address)
91 80 89 02 (Site Number)
GRIFFITH (City) IND. (State) 46319 (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: INK & ADHESIVE SOLVENT WASTE
WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)
DOT ID NO. NA 9189

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

| SHIPPING DESCRIPTION: | HAZARD CLASS: |
|---|---|
| R.Q. HAZARDOUS | |
| WASTE LIQ. N.O.S. | 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. & THE E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 4/2/81 (Authorized Signature)

WASTE HAULER* FED. ILT 000646810

QUANTITY OF WASTE RECEIVED: 004400 (1 GALLONS / 2 CU YDS. — Circle One)

METHOD OF SHIPMENT (Circle One) 80 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) (Authorized Signature) DATE: 04/02/81

(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: 4/2/81

COMMENTS OR SPECIAL INSTRUCTIONS: TRAILER SPOTTED 4/2/81
PUMPED TO 124 x T-63 4/7/81 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

000657

TO BE COMPLETED BY WASTE GENERATOR

# STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0144718

WASTE GENERATOR

Authorization Number 997140

Tel. No. 312-888-7150

PRINTPACK, INC. (Company Name) | 1400 ABBOTT DRIVE (Address) | FED ILD 089825780

ELGIN (City) | ILL. (State) | 60120 (Zip)

089438 00 11 G (Generator Number)

WASTE HAULER(S)

(1) STRAND TRUCKING C/O AMERICAN CHEMICAL (Hauler Name) | 13642 KENTON CRESTWOOD, ILL. 60445 420 S. COLFAX AVE. (Hauler Address) | S.W.H. Registration Number 00240 02 | FED ILT 000646810

(2) (Hauler Name) | (Hauler Address) | S.W.H. Registration Number

DESTINATION -- DISPOSAL STORAGE OR TREATMENT SITE

FED IND 016360265

AMERICAN CHEMICAL (Facility Name) | 420 S. COLFAX AVE. (Address) | 918089 02 (Site Number)

GRIFFITH (City) | IND. (State) | 46319 (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: INK & ADHESIVE SOLVENT WASTE 403

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

DOT ID NO. NA 9189

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

| SHIPPING DESCRIPTION: | HAZARD CLASS: |
|---|---|
| R Q, HAZARDOUS | |
| WASTE LIQ. N.O.S. | 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. & THE E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 5/5/81 (Authorized Signature)

WASTE HAULER* FED. ILT 000646810

QUANTITY OF WASTE RECEIVED: 004070 (1 GALLONS / 2 CU. YDS.) (Circle One)

METHOD OF SHIPMENT (Circle One) 74 (DRUMS) TANK TRUCK OPEN TRUCK (OTHER) VAU (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) William A. Depuster (Authorized Signature) DATE 05/05/81

(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 5/5/81

COMMENTS OR SPECIAL INSTRUCTIONS: TRAILER SPOTTED 5/5/81 2000 GALS TO 124X T-63 5/6/81
2070 GALS TO 125X T-63 5/6/81 JJM

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

000656

TO BE COMPLETED BY WASTE GENERATOR

# STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0144719

Authorization Number 9 9 7 1 4 0

Tel. No. 312-888-7150

PRINTPACK, INC. (Company Name) | 1400 ABBOTT DRIVE (Address) | FED ILD 089825780

ELGIN (City) | ILL. (State) | 60120 (Zip)

0 S 9 4 3 8 0 0 1 1 G (Generator Number)

WASTE HAULER(S)

STRAND TRUCKING C/O

(1) AMERICAN CHEMICAL (Hauler Name) | 13642 KENTON CRESTWOOD, ILL. 60445 / 420 S. COLFAX AVE. (Hauler Address) | S.W.H. Registration Number 0 0 2 4 0 0 1

FED ILT 000646810

(2) (Hauler Name) | (Hauler Address) | S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

FED IND 016360265

AMERICAN CHEMICAL (Facility Name) | 420 S. COLFAX AVE. (Address) | 9 1 8 0 8 9 0 2 (Site Number)

GRIFFITH (City) | IND. (State) | 46319 (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: INK & ADHESIVE SOLVENT WASTE 9203 | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid) | DOT ID NO. NA 9189

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

| SHIPPING DESCRIPTION: | HAZARD CLASS. |
|---|---|
| R. Q. HAZARDOUS | |
| WASTE LIQ. N.O.S. | 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 & THE E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 6-2-81 James D. Hartsfield (Authorized Signature)

WASTE HAULER* FED. ILT 000646810

QUANTITY OF WASTE RECEIVED: 0 0 4 3 4 5 | (1) GALLONS (2) CU. YDS. | (Circle One) 1

METHOD OF SHIPMENT (Circle One) 79 DRUM | 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: 6/2/81

(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: 6-3-81

COMMENTS OR SPECIAL INSTRUCTIONS: TRAILER SPOTTED 6/2/81
TO 142K T-63 6/3/81

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

000658

TO BE COMPLETED BY WASTE GENERATOR

# STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0144720

WASTE GENERATOR

Authorization Number 9 9 7 1 4 0

Tel. No. 312-888-7150

PRINTPACK, INC. (Company Name) — 1400 ABBOTT DRIVE (Address) — FED ILD 089825780

0 S 9 4 3 8 0 0 1 1 G (Generator Number)

ELGIN (City) — ILL. (State) — 60120 (Zip)

WASTE HAULER(S)

(1) STRAND TRUCKING C/O AMERICAN CHEMICAL (Hauler Name) — 13642 KENTON CRESTWOOD, ILL. 60445 420 S. COLFAX AVE. (Hauler Address) — S.W.H. Registration Number 0 0 2 4 0 0 2

FED ILT 000646810

(2) (Hauler Name) — (Hauler Address) — S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

FED IND 01636026S

AMERICAN CHEMICAL (Facility Name) — 420 S. COLFAX AVE. (Address) — 9 1 8 0 8 9 0 2 (Site Number)

GRIFFITH (City) — IND. (State) — 46319 (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: INK & ADHESIVE SOLVENT WASTE

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

DOT ID NO. NA 9189

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: R. Q. HAZARDOUS WASTE LIQ. N.O.S.

F003

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 & THE E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 7-17-81 — (Authorized Signature) James D. Hunterfield

WASTE HAULER* FED. ILT 000646810

QUANTITY OF WASTE RECEIVED: 0 0 4 4 0 0 (47–52) — 1 GALLONS (Circle One) 2 CU. YDS. 1 (53)

METHOD OF SHIPMENT (Circle One) DRUMS 80 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: 7 / 17 / 81 (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: 7 / 17 / 81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TRAILER SPOTTED 7/17/81 - 44 TO 124R T-63 7/20/81 JTM
36 TO 126R T-63 7/21/81 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

000659

TO B[illegible]PLETED BY
WASTE GE[illegible]ATOR

# STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0334014

Authorization Number 997 140

Tel. No. 312-888-7150

PRINTPACK, INC. (Company Name) — 1400 ABBOTT DRIVE (Address) — FED ILD 089825780

ELGIN (City) — ILL. (State) — 60120 (Zip) — Generator Number 0S 943 800 11 G

WASTE HAULER(S)

STRAND TRUCKING C/O AMERICAN CHEMICAL (Hauler Name) — 13642 KENTON CRESTWOOD, ILL. 60445 — 420 S. COLFAX AVE. (Hauler Address) — S.W.H. Registration Number 0 024 007

FED ILT 000646810

Hauler Name — Hauler Address — S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

FED IND 016360265

AMERICAN CHEMICAL (Facility Name) — 420 S. COLFAX AVE (Address) — Site Number 9 180 890 2

GRIFFITH (City) — IND. (State) — 46319 (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: INK & ADHESIVE SOLVENT WASTE

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

DOT ID NO. NA 9189

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: R. Q. HAZARDOUS WASTE LIQ. N.O.S.

HAZARD CLASS: 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: 004400 (47–52)

1 GALLONS (Circle One) 2 CU. YDS. (53)

METHOD OF SHIPMENT (Circle One) 80 DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify) VAN

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. & THE E.P.A.

43

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 8-6-81 — James D. Hartsfield (Authorized Signature)

WASTE HAULER FED. ILT 000646810

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) James Batton (Authorized Signature) — DATE: 8/6/81 (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:

M. Chad Burg (Authorized Signature) — DATE: 8/6/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TRAILER SPOTTED 8/6/81 — 43 DRUMS (2400) TO 125K T-63 8/7/81 JTM
37 TO 125K T-63 8/10/81 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

000660

**STATE OF ILLINOIS**

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0334015

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 99714 0

Tel. No. 312-888-7150
PRINTPACK, INC. (Company Name) | 1400 ABBOTT DRIVE (Address) | FED ILD 089825780
ELGIN (City) | ILL. (State) | 60120 (Zip) | OS9 438 00 11 G Generator Number

STRAND TRUCKING C/O AMERICAN CHEMICAL (Hauler Name) | 13642 KENTON WAY, CRESTWOOD, ILL. 60445 / 420 S. COLFAX AVE. (Hauler Address) | S.W.H. Registration Number 0 02 4002
FED ILT 000646810

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

FED IND 01636026S

AMERICAN CHEMICAL (Facility Name) | 420 S. COLFAX AVE. (Address) | 91 80 89 02 Site Number
GRIFFITH (City) | IND. (State) | 46319 (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: INK & ADHESIVE SOLVENT WASTE | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid) | DOT ID NO. NA 9189

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 |
|---|---|---|
| R. Q. HAZARDOUS WASTE LIQ. N.O.S. | FLAMMABLE | LBS / TONS (circle one) |

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 00335 (1 GALLONS / 2 CU. YDS. (Circle One))

61

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify) VAN

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. & THE E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 9/9/81 Michael Morse FJ03 (Authorized Signature)

WASTE HAULER

FED ILT 000646810

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) James Batten (Authorized Signature) DATE: 9 9 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:

Michael O'Dea (Authorized Signature) DATE: 9 9 81

COMMENTS OR SPECIAL INSTRUCTIONS: To DCF T-43 9/10/81

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

000661

# 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

0334016

SPECIAL WASTE HAULING MANIFEST

Authorization Number 9 9 7 1 4 0

Tel. No. 312-888-7150
PRINTPACK, INC. (Company Name) | 1400 ABBOTT DRIVE (Address) | FED ILD 089825780
ELGIN (City) | ILL. (State) | 60120 (Zip) | 0 S 9 4 3 8 0 0 1 1 G Generator Number

STRAND TRUCKING C/O AMERICAN CHEMICAL (Hauler Name) | 13642 KENTON (WAS CREST) WOOD, ILL. 60445 / 420 S. COLFAX AVE. (Hauler Address) | S.W.H. Registration Number 0 0 2 4 0 0 2
FED ILT 000646810

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

FED IND 01636026S

AMERICAN CHEMICAL (Facility Name) | 420 S. COLFAX AVE. (Address) | 9 1 8 0 8 9 0 2 Site Number
GRIFFITH (City) | IND. (State) | 46319 (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: INK & ADHESIVE SOLVENT WASTE | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid) | DOT ID NO. NA 9189

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 ____ LBS / TONS (circle one) |
|---|---|---|
| R. Q. HAZARDOUS WASTE LIQ. N.O.S. | FLAMMABLE | |

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 0 0 4 4 0 0 (47–52) | 1 GALLONS (Circle One) 2 CU. YDS. ____ (53)

METHOD OF SHIPMENT (Circle One) 8 DRUMS | TANK TRUCK | OPEN TRUCK | OTHER (Specify) VAN

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 & THE E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 9/30/91 | Michael D Morse (Authorized Signature)

WASTE HAULER

FED ILT 000646810

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) James Ball (Authorized Signature) | DATE: 9/30/91 (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:

Michael E Burge (Authorized Signature) | DATE: 9/30/91 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: To 126R T-63 10/7/91 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

000662

**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

0334017

Authorization Number 9 9 7 1 4 0

Tel. No. 312-888-7150

PRINTPACK, INC. (Company Name) — 1400 ABBOTT DRIVE (Address)

FED ILD 089825780

0 S 9 4 3 8 0 0 1 1 G (Generator Number)

ELGIN (City) — ILL. (State) — 60120 (Zip)

STRAND TRUCKING C/O AMERICAN CHEMICAL (Hauler Name) — 13642 KENTON WASTE HAULER (6) CROSS WOOD, ILL. 60445 — 420 S. COLFAX (Hauler Address)

S.W.H. Registration Number 0 0 2 4 0 0 2

FED ILT 000646810

Hauler Name — Hauler Address — S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

FED IND 01636025

AMERICAN CHEMICAL (Facility Name) — 420 S. COLFAX AVE. (Address) — 9 1 8 0 8 9 0 2 (Site Number)

GRIFFITH (City) — IND. (State) — 46319 (Zip)

**TO BE COMPLETED BY WASTE GENERATOR**

WASTE NAME: INK & ADHESIVE SOLVENT WASTE

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

DOT ID NO. NA 9189

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: R. O. HAZARDOUS WASTE LIQ. N.O.S.

HAZARD CLASS: FLAMMABLE

WEIGHT FOR D.O.T. USE 32000 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 4 0 0

1 GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) 80 DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify) VAN

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. & THE E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 10-30-81 — James D. Hartsfield (Authorized Signature)

**WASTE HAULER** FED ILT 000646810

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) Thomas Strand Bud (Authorized Signature) — DATE: 10 / 30 / 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: 10 / 30 / 81

COMMENTS OR SPECIAL INSTRUCTIONS: Trailer spotted 11/2/81
To 125 K T-63 GRM 11/3/81

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

000663

**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

0334018
1 7

Authorization Number 997 140
8 13

Tel. No. 312-888-7150

PRINTPACK, INC. (Company Name) — 1400 ABBOTT DRIVE (Address)

FED ILD 089825780

0 S 9 4 3 8 0 0 1 1 G
14 Generator Number 24

ELGIN (City) — ILL. (State) — 60120 (Zip)

STRAND TRUCKING C/O AMERICAN CHEMICAL (Hauler Name) — 13642 KENTON OVERLOOD, ILL. 60445 — 420 S. COLFAX (Hauler Address)

S.W.H. Registration Number 0 0 2 4 0 0 1
25 31

FED ILT 000646810

Hauler Name — Hauler Address — S.W.H. Registration Number
32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

FED IND 0163602S

AMERICAN CHEMICAL (Facility Name) — 420 S. COLFAX AVE. (Address)

9 1 8 0 8 9 0 2
39 Site Number 46

GRIFFITH (City) — IND. (State) — 46319 (Zip)

**TO BE COMPLETED BY WASTE GENERATOR**

WASTE NAME: INK & ADHESIVE SOLVENT WASTE

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

DOT ID NO. NA 9189

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

| SHIPPING DESCRIPTION: | HAZARD CLASS: |
|---|---|
| R. Q. HAZARDOUS | |
| WASTE LIQ. N.O.S. | FLAMMABLE |

WEIGHT FOR D.O.T. USE 42,000 LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 4800 (47 52)

1 GALLONS (Circle One)
2 CU. YDS. (53)

METHOD OF SHIPMENT (Circle One) DRUMS 80 TANK TRUCK OPEN TRUCK OTHER (Specify) VAN

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. & THE E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 11/16/81 — [signature] (Authorized Signature)

**WASTE HAULER** FED ILT 000646810

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) Thomas Strand Driver (Authorized Signature) — DATE: 11 16 81 (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:

[signature] (Authorized Signature) — DATE: 11 17 81 (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

Trailer at dock 11/17/81 GRM
To 124 K T 63 GRM 11/19/81

SITE COPY - PART 3

000664

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

0334019

Authorization Number 9 97140

Tel. No. 312-888-7150
PRINTPACK, INC. (Company Name) | 1400 ABBOTT DRIVE (Address) | FED ILD 089825780
ELGIN (City) | ILL. (State) | 60120 (Zip)
0894380011G Generator Number

STRAND TRUCKING C/O (Hauler Name) | 13642 KENTON CRESTWOOD, ILL. 60445 (Hauler Address)
AMERICAN CHEMICAL | 420 S. COLFAX | S.W.H. Registration Number 0 0 2 4 0 0 2
Hauler Name | Hauler Address | FED ILT 000646810

Hauler Name | Hauler Address | S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

FED IND 016360285

AMERICAN CHEMICAL (Facility Name) | 420 S. COLFAX AVE. (Address) | 918089028 Site Number
GRIFFITH (City) | IND. (State) | 46319 (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: INK & ADHESIVE SOLVENT WASTE | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid) | DOT ID NO. NA 9189

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

| SHIPPING DESCRIPTION: | HAZARD CLASS: |
|---|---|
| R. Q. HAZARDOUS WASTE LIQ. N.O.S. | FLAMMABLE |

WEIGHT FOR D.O.T. USE 20800 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 004235 (1) GALLONS (2) CU. YDS. (Circle One) 1

METHOD OF SHIPMENT (Circle One) DRUMS 77 TANK TRUCK OPEN TRUCK OTHER (Specify) VAN TRAILER

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. & THE E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 12-8-81 Michael O Morse (Authorized Signature)

WASTE HAULER FED ILT 000646810

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) Thomas Paul Strand (Authorized Signature) DATE 12/05/81

(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:

Michael O Morse (Authorized Signature) DATE 12/8/81

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

Ondeck 12/8/81 6PM
To 125 Tk T-63 6PM 12/10/81

SITE COPY - PART 3

000665

TO BE COMPLETED BY WASTE GENERATOR

# STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0144715

WASTE GENERATOR

Authorization Number 9 9 7 1 4 0

PRINTPACK, INC. Tel.No. 312-888-7150 (STAN PAK INC.) (Company Name)
1400 ABBOTT DRIVE (Address)
FED ILD 089825780
ELGIN (City) ILL. (State) 60120 (Zip)
0 8 9 4 3 8 0 0 1 1 G Generator Number

WASTE HAULER(S)

(1) STRAND TRUCKING C/O AMERICAN CHEMICAL (Hauler Name)
13642 KENTON CRESTWOOD, ILL. 60445
420 S. COLFAX AVE. (Hauler Address)
S.W.H. Registration Number 0 0 2 4 0 0 1
FED ILT 000646810

(2) (Hauler Name) (Hauler Address)
S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

FED IND 016360265

AMERICAN CHEMICAL (Facility Name)
420 S. COLFAX AVE. (Address)
9 1 8 0 8 9 0 2 Site Number
GRIFFITH (City) IND. (State) 46319 (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: INK & ADHESIVE SOLVENT WASTE
WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)
DOT ID NO. NA 9189

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: R Q , HAZARDOUS WASTE LIQ. N. O. S.
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. & THE E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION.

DATE: 2-13-81 FOD (Authorized Signature)

WASTE HAULER*

FED. ILT 000646810 20

QUANTITY OF WASTE RECEIVED: 0 0 1 1 0 0 (1 GALLON / 2 CU. YDS.) (Circle One)

METHOD OF SHIPMENT (Circle One) (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) (Authorized Signature) DATE: 02/12/81

(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: 2/13/81

COMMENTS OR SPECIAL INSTRUCTIONS: TRAILER SPOTTED 2/13/81
UNLOADED 2/16/81 AT DOCK - DUMPED TO 12#32 2/16/81 T-63
Jim Murphy

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

000654

TO BE COMPLETED BY WASTE GENERATOR

Att. Mike Morse

Tel. No. 312-888-7150

# STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0144716

Authorization Number 997140

PRINTPACK, INC. (Company Name) | 1400 ABBOTT DRIVE (Address) | FED ILD 089825780

ELGIN (City) | ILL. (State) | 60120 (Zip)

08943800 11 G (Generator Number)

WASTE HAULER(S)

(1) STRAND TRUCKING C/O AMERICAN CHEMICAL (Hauler Name) | 13642 KENTON CRESTWOOD, ILL. 60445 420 S. COLFAX AVE. (Hauler Address) | S.W.H. Registration Number 0024001 | FED ILT 000646810

(2) (Hauler Name) | (Hauler Address) | S.W.H. Registration Number

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 S. COLFAX AVE. (Address) | FED IND 016360265 | 91808902 (Site Number)

GRIFFITH (City) | IND. (State) | 46319 (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: INK & ADHESIVE SOLVENT WASTE F003 | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

DOT ID NO. NA 9189

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: R Q, HAZARDOUS WASTE LIQ. N.O.S. | 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: 3/17/81 | James D. Fairfield (Authorized Signature) 3-17-81

WASTE HAULER*

FED. ILT 000646810 80

QUANTITY OF WASTE RECEIVED: 04400 (1 GALLONS / 2 CU. YDS.) (Circle One)

METHOD OF SHIPMENT (Circle One) 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) [signature] (Authorized Signature) DATE 03/17/81

(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 3/17/81

COMMENTS OR SPECIAL INSTRUCTIONS TRAILER SPOTTED 3/17/81 PUMPED TO 12/K T-63 3/18/81

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

000655

# STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0334020

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 997140

Tel. No. 312-888-7150

PRINTPACK, INC. (Company Name) | 1400 ABBOTT DRIVE (Address) | FED ILD 089825780

ELGIN (City) | ILL. (State) | 60120 (Zip) | 08 94 38 00 11 G (Generator Number)

STRAND TRUCKING C/O AMERICAN CHEMICAL (Hauler Name) | 13642 KENTON CRESTWOOD, ILL. 60445 (Hauler Address) | 420 S. COLFAX (Hauler Address) | S.W.H. Registration Number 00 24 001 | FED ILT 000646810

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

FED IND 0163602S

AMERICAN CHEMICAL (Facility Name) | 420 S. COLFAX AVE. (Address) | 918 089 02 (Site Number)

GRIFFITH (City) | IND. (State) | 46319 (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: INK & ADHESIVE SOLVENT WASTE | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid) | DOT ID NO. NA 9189

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 |
|---|---|---|
| R. Q. HAZARDOUS WASTE LIQ. N.O.S. | FLAMMABLE | 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: 1100 | (4) GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) (DRUMS) TANK TRUCK OPEN TRUCK (OTHER) Specify: VAN

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 & THE E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 1/14/81 | (Authorized Signature)

WASTE HAULER FED ILT 000646810

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) Thomas Paul Strand (Authorized Signature) | DATE: 01 14 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:

(Authorized Signature) | DATE: 1/14/82

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

On dock GRM 1/15/82
To 125 R ~~T-50~~ T-63 GRM 1/15/82

SITE COPY - PART 3

003109

# STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0334023 (1–7)

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 9 9 7 1 4 0 (8–13)

Tel. No. 312-888-7150

PRINTPACK, INC. (Company Name) | 1400 ABBOTT DRIVE (Address) | FED ILD 089825780

ELGIN (City) | ILL. (State) | 60120 (Zip)

0 8 9 4 3 8 0 0 1 1 G (14–24) Generator Number

STRAND TRUCKING CO. (Hauler Name) | 13642 KENTON CRESTWOOD, IL. 60445 (Hauler Address)

AMERICAN CHEMICAL | 420 S. COLFAX | FED ILT 000646810

S.W.H. Registration Number 0 0 2 4 0 0 1 (25–31)

Hauler Name | Hauler Address

S.W.H. Registration Number (32–38)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

FED IND 0163602S

AMERICAN CHEMICAL (Facility Name) | 420 S. COLFAX AVE. (Address) | 9 1 8 0 8 9 0 2 (39–46) Site Number

GRIFFITH (City) | IND. (State) | 46319 (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: INK & ADHESIVE SOLVENT WASTE | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

DOT ID NO. NA 9189

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

| SHIPPING DESCRIPTION: | HAZARD CLASS: |
|---|---|
| R. Q. HAZARDOUS WASTE LIQ. N. O. S. | FLAMMABLE |

WEIGHT FOR D.O.T. USE 32,000 (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 4 4 0 0 (47–52) ~~GALLONS~~ (Circle One) 2 CU. YDS. (53)

METHOD OF SHIPMENT (Circle One) 80 DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify) VAN

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. & THE E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 3/17/82 Michael Wishney (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: 3 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 SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[signature] (Authorized Signature) DATE: 3 19 82 (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 # 1 Still T-63 GRM 3/18/82

SITE COPY - PART 3

003710

IL 532 610
LPC 62 B-B1

# STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0621540
1 7

Authorization Number 99 7 1 40
8 13

**TO BE COMPLETED BY WASTE GENERATOR**

PRINTPACK, INC. (Company Name) | 1400 ABBOTT DRIVE (Address) | 311 2 8 8 8 7 15 0 (Phone Number) | 0 8 9 4 3 8 0 0 1 1 G (14 Generator Number 24)

ELGIN (City) | ILL. (State) | 60120 (Zip) | I L D 0 8 9 8 2 5 7 8 0 (EPA Number)

WASTE HAULER(S)

STRAND TRUCKING CO. (Hauler Name) | 13642 KENTON CRESTWOOD, IL. 60445 (Hauler Address)
S.W.H. Registration Number 00 24001 (25 31)

AMERICAN CHEMICAL (Hauler Name) | 420 S. COLFAX (Hauler Address) | ____ (Phone Number) | I L T 0 0 0 6 4 6 8 1 0 (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) | 420 S. COLFAX AVE. (Address) | 9 1 8 0 8 9 0 2 (39 Site Number 46)

GRIFFITH (City) | IND. (State) | 46319 (Zip) | ____ (Phone Number) | I N D 0 1 6 3 6 0 2 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: INK & ADHESIVE SOLVENT WASTE | 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: R. Q. HAZARDOUS WASTE LIQ. N.O.S. | HAZARD CLASS: FLAMMABLE | NA 9189 (UN or NA Number) | ____ (EPA HW Number)

WEIGHT FOR D.O.T. USE 32000 # (LBS) TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 4400 (47 52) | 1 GALLONS (Circle One) 2 CU. YDS. ____ (53)

METHOD OF SHIPMENT (Circle One) (DRUMS 80 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 [signature] (Authorized Signature) DATE: 4-27-82

**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) L. Fuhrer (Authorized Signature) DATE: 4/27/82 (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:

Michael G Bury (Authorized Signature) DATE: 4/27/82 (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 # 4

SITE COPY - PART 3

On dock 4.27.82 To 112 K-63 GRN 5-3-82

003711

IL 532-610
LPC 42 B '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

0621542
1 7

Authorization Number 9 9 7 1 4 0
8 13

**TO BE COMPLETED BY WASTE GENERATOR**

PRINTPACK, INC. (Company Name) | 1400 ABBOTT DRIVE (Address) | 3 12 8 8 8 7 1 5 0 (Phone Number) | 0 8 9 4 3 8 0 0 1 1 G (14 Generator Number 24)

ELGIN (City) | ILL. (State) | 60120 (Zip) | I L D 0 8 9 8 2 5 7 8 0 (EPA Number)

WASTE HAULER(S)

STRAND TRUCKING CO. | 13642 KENTON CRESTWOOD, IL. 60445

AMERICAN CHEMICAL (Hauler Name) | 420 S. COLFAX (Hauler Address) | S.W.H. Registration Number 0 0 2 4 0 0 1 (25 31)

3 1 2 3 8 5 8 4 4 0 (Phone Number) | I L T 0 0 0 6 4 6 8 1 0 (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) | 420 S. COLFAX AVE. (Address) | 9 1 8 0 8 9 0 2 (39 Site Number 46)

GRIFFITH (City) | IND. (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 S (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: INK & ADHESIVE SOLVENT WASTE | 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: R. Q. HAZARDOUS WASTE LIQ. N.O.S. | HAZARD CLASS: FLAMMABLE | N A 9 1 8 9 (UN or NA Number) | F d 3 (EPA HW Number)

WEIGHT FOR D.O.T. USE 3 1 5 0 0 (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 8 5 0 (47 52) (1 GALLONS / 2 CU.-YDS. circle one) (53)

METHOD OF SHIPMENT (Circle One) (DRUMS 70 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 Michael Morse (Authorized Signature) | DATE: 6-16-82

**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: 6/16/82 (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: 6/16/82 (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. # 4

SITE COPY - PART 3

TO 126 RT-63 6PM 6.16.82

003772

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

0621543

Authorization Number 9 9 7 1 4 0

PRINTPACK, INC. (Company Name) | 1400 ABBOTT DRIVE (Address) | 3 1 2 8 8 8 7 1 5 0 0 (Phone Number) | 8 9 4 3 8 0 0 1 1 G (Generator Number)

ELGIN (City) | ILL. (State) | 60120 (Zip) | I L D 0 8 9 8 2 5 7 8 0 (EPA Number)

WASTE HAULER(S)

STRAND TRUCKING CO. (Hauler Name) | 13642 KENTON CRESTWOOD, IL. 60445 (Hauler Address) | S.W.H. Registration Number 0 0 2 4 0 0 1

3123358440 (Phone Number) | I L T 0 0 0 6 4 6 8 1 0 (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) | 420 SOUTH COLFAX AVENUE (Address) | 9 1 8 0 8 9 0 2 (Site Number)

GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | 3127683400 (Phone Number) | IN D 0 1 6 3 6 0 2 5 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

**TO BE COMPLETED BY WASTE GENERATOR**

WASTE NAME: INK & ADHESIVE SOLVENT WASTE  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: R. Q. HAZARDOUS WASTE LIQ. N.O.S.  HAZARD CLASS: FLAMMABLE  N A 9 1 8 9 (UN or NA Number)  F003 (EPA HW Number)

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: 0 0 4 1 2 5 (1) GALLONS (Circle One) 2 CU. YDS.

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  Thomas Strand (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) Thomas Paul Strand (Authorized Signature)  DATE: 07/14/82

(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

Michael D. Berg (Authorized Signature)  DATE: 7/14/82

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. # 4

SITE COPY - PART 3  TO126F T-63 GRM 7.14.82

003714

IL 532-610
IPC 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

0621544
1 7

Authorization Number 8 13

PRINTPACK, INC. (Company Name) | 1400 ABBOTT DRIVE (Address) | 3 1 2 8 8 8 7 1 5 0 (Phone Number) | 0 8 9 4 3 8 0 0 1 1 G (14 Generator Number 24)

ELGIN (City) | ILL. (State) | 60120 (Zip) | I L D 0 8 9 8 2 5 7 8 0 (EPA Number)

WASTE HAULER(S)

STRAND TRUCKING CO. | 13642 KENTON CRESTWOOD, IL. 60445
AMERICAN CHEMICAL (Hauler Name) | 420 S. COLFAX (Hauler Address) | S.W.H. Registration Number 0 0 2 4 0 0 2 (25 31)

3 1 2 3 8 5 5 8 4 4 0 (Phone Number) | I L T 0 0 0 6 4 6 8 1 0 (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) | 420 SOUTH COLFAX AVENUE (Address) | 9 1 8 0 8 9 0 2 (39 Site Number 46)

GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | 3 1 2 7 6 8 3 4 0 4 (Phone Number) | I N D 0 1 6 3 6 0 2 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: INK & ADHESIVE SOLVENT WASTE | 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: R. Q. HAZARDOUS WASTE LIQ. N.O.S. | HAZARD CLASS: FLAMMABLE | N A 9 1 8 9 (UN or NA Number) UN1993 | F003 (EPA HW Number)

WEIGHT FOR D.O.T. USE 26,400 LBS TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 3630 (47 52) GALLONS (Circle One) 2 CU YDS. (53)

METHOD OF SHIPMENT (Circle One) (DRUMS 66 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 [signature] (Authorized Signature) DATE: 8-10-82

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: 8/10/82 (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: 8/10/82 (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 # 4

SITE COPY - PART 3

T0125R T-63 GPM 8.10.82

00375

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

0621545

Authorization Number 8 13

PRINTPACK, INC. (Company Name) | 1400 ABBOTT DRIVE (Address) | 3 1 2 8 8 8 7 1 5 0 (Phone Number) | 0 8 9 4 3 8 0 0 1 1 G (Generator Number)

ELGIN (City) | ILL. (State) | 60120 (Zip) | I L D 0 8 9 8 2 5 7 8 0 (EPA Number)

WASTE HAULER(S)

STRAND TRUCKING CO. 13642 KENTON CRESTWOOD, IL. 60445
AMERICAN CHEMICAL (Hauler Name) | 420 S. COLFAX (Hauler Address) | S.W.H. Registration Number 0 0 2 4 0 0 1

312-786-3400 | 312 385 8440 (Phone Number) | I L T 0 0 0 6 4 6 8 1 0 (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) | 420 SOUTH COLFAX AVENUE (Address) | 9 1 8 0 8 9 0 2 (Site Number)

GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | 312 786 3400 (Phone Number) | I N D 0 1 6 3 6 0 2 5 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: INK & ADHESIVE SOLVENT WASTE  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: R.Q. HAZARDOUS WASTE LIQ. N.O.S.  HAZARD CLASS: FLAMMABLE  N A 9 1 8 9 (UN or NA Number)  1993 (EPA HW Number)

WEIGHT FOR D.O.T. USE 34650 LBS TONS (circle one)  WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.  QUANTITY OF WASTE DELIVERED: 4235 (1 GALLONS (Circle One) 2 CU. YDS.)

METHOD OF SHIPMENT (Circle One) (DRUMS 77 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 James D. Hartsfield (Authorized Signature) DATE 9-9-82

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) Steve Strand (Authorized Signature) DATE: 9/9/82

(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:

Michael E. Burg (Authorized Signature) DATE: 9/9/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS 217 / 782-3637  *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*  OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-26

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

On dock 9.9.82
TO126RT-636RM 9.10.82

003716

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

**TO BE COMPLETED BY WASTE GENERATOR**

SPECIAL WASTE HAULING MANIFEST

0621546 (1–7)

Authorization Number ____ (8–13)

| PRINTPACK, INC. | 1400 ABBOTT DRIVE | 3128887150 | 0894380011 (14–24) |
|---|---|---|---|
| (Company Name) | Address | Phone Number | Generator Number |

| ELGIN | ILL. | 60120 | ILD089825780 |
|---|---|---|---|
| City | State | Zip | EPA Number |

WASTE HAULER(S)

STRAND TRUCKING CO. 13642 KENTON CRESTWOOD, IL. 60445
AMERICAN CHEMICAL 420 S. COLFAX
Hauler Name / Hauler Address — S.W.H. Registration Number 0024007 (25–31)

(312) 786-3400 — 3123858440 (Phone Number) — ILT0006468 10 (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 — 420 SOUTH COLFAX AVENUE — 91808902 (39–46)
(Facility Name) / Address / Site Number

GRIFFITH — INDIANA — 46319 — 3127863400 — IND016360 25
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: INK & ADHESIVE SOLVENT WASTE — 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 |
|---|---|---|---|
| R.Q. HAZARDOUS WASTE LIQ. N.O.S. | FLAMMABLE | NA9189 | F003 |

WEIGHT FOR D.O.T. USE: 30,400 (LBS / TONS — circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 003685 (47–52) (GALLONS / 2 CU. YDS. — Circle One) 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS 76 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 Michael D. Morse (Authorized Signature) DATE: 10-12-82

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) R. Lindwall (Authorized Signature) DATE: 10/12/82 (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:

Michael D. Morse (Authorized Signature) DATE: 10/12/82 (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 # 4

SITE COPY - PART 3

To 124K T-63 ERM 10.12.82

003717

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

0621547

Authorization Number

| | | | |
|---|---|---|---|
| PRINTPACK, INC. | 1400 ABBOTT DRIVE | 3 1 2 88 8 7 1 5 0 | 0 8 9 4 3 8 0 0 1 1 G |
| (Company Name) | Address | Phone Number | Generator Number |
| ELGIN | ILL. 60120 | | I L D 0 8 9 8 2 5 7 8 0 |
| City | State / Zip | | EPA Number |

WASTE HAULER(S)

| | | | |
|---|---|---|---|
| STRAND TRUCKING CO. | 13642 KENTON CRESTWOOD, IL. 60445 | | |
| AMERICAN CHEMICAL | 420 S. COLFAX | | S.W.H. Registration Number 0 0 2 4 0 0 1 |
| Hauler Name | Hauler Address | | |
| (312) 786-3400 | | 3 1 2 3 8 5 8 4 4 0 | I L T 0 0 0 6 4 6 8 1 0 |
| | | 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 | 420 SOUTH COLFAX AVENUE | | | 9 1 8 0 8 9 0 2 |
| (Facility Name) | Address | | | Site Number |
| GRIFFITH | INDIANA | 46319 | 31 2 78 6 34 00 | I ND 0 1 6 3 6 0 2 5 |
| 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: INK & ADHESIVE SOLVENT WASTE 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 |
|---|---|---|---|
| R. Q. HAZARDOUS WASTE LIQ. N.O.S. | FLAMMABLE | N A 9 1 8 9 | F 0 0 3 |

WEIGHT FOR D.O.T USE 26.00 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 5 7 5 0 GALLONS (Circle One) 2 CU. YDS.

METHOD OF SHIPMENT (Circle One) (DRUMS 65 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 E.W. Burridge (Authorized Signature) DATE: 11-9-82

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) [signature] (Authorized Signature) DATE 11/9/82

(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:

Michael E. Burge (Authorized Signature) DATE 11/9/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-267

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 To 125K7-63GRM 11-9-82

003718

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

0621541

Authorization Number 9 9 7 1 4 0 (8–13)

**TO BE COMPLETED BY WASTE GENERATOR**

PRINTPACK, INC. (Company Name) | 1400 ABBOTT DRIVE (Address) | 3 1 2 8 8 8 7 1 5 0 (Phone Number) | 0 8 9 4 3 8 0 0 1 1 G (14–24 Generator Number)

ELGIN (City) | ILL. (State) | 60120 (Zip) | I L D 0 8 9 8 2 5 7 8 0 (EPA Number)

WASTE HAULER(S)

STRAND TRUCKING CO. | 13642 KENTON CRESTWOOD, IL. 60445
AMERICAN CHEMICAL (Hauler Name) | 420 S. COLFAX (Hauler Address) | S.W.H. Registration Number 0 0 2 4 0 0 1 (25–31)

312 30-3440 (Phone Number) | I L T 0 0 0 6 4 6 8 1 0 (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) | 420 S. COLFAX AVE. (Address) | 9 1 8 0 8 9 0 2 (39–46 Site Number)

GRIFFITH (City) | IND. (State) | 46319 (Zip) | 3177653400 (Phone Number) | IN D 0 1 6 3 6 0 2 S (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: INK & ADHESIVE SOLVENT WASTE | 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: R. Q. HAZARDOUS WASTE LIQ. N.O.S. | HAZARD CLASS: FLAMMABLE | N A 9 1 8 9 (UN or NA Number) | F003 (EPA HW Number)

WEIGHT FOR D.O.T. USE 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 2 2 6 0 (47–52) GALLONS (Circle One) / 2 CU. YDS. 2200 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS 40 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 Michael Wisheny (Authorized Signature) DATE: 5/13/93

**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: __/__/__ (54–59)

(2) _____ (Authorized Signature) DATE: 5/13/93

**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 5/13/93 (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 126RT-63 GRM 5.13.82

006273

IL 532-610
LPC 62 8/91

# STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0621548

Authorization Number

**TO BE COMPLETED BY WASTE GENERATOR**

| PRINTPACK, INC. | 1400 ABBOTT DRIVE | 3128887150 | 08943800 11 G |
|---|---|---|---|
| (Company Name) | Address | Phone Number | Generator Number |
| ELGIN | ILL. | 60120 | ILD 089825780 |
| City | State | Zip | EPA Number |

WASTE HAULER(S)

| STRAND TRUCKING CO. AMERICAN CHEMICAL | 13642 KENTON CRESTWOOD, IL. 60445 420 S. COLFAX | S.W.H. Registration Number 0024001 |
|---|---|---|
| Hauler Name | Hauler Address | |
| (312) 786-3400 | 312 385 8440 | ILT000646810 |
| | 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 | 420 SOUTH WOLFAX AVENUE | 91808902 |
|---|---|---|
| (Facility Name) | Address | Site Number |
| GRIFFITH | INDIANA | 46319 | 312 786 3400 | IND 016 360 25 |
| 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: INK & ADHESIVE SOLVENT WASTE 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 |
|---|---|---|---|
| R. Q. HAZARDOUS WASTE LIQ. N.O.S. | FLAMMABLE | NA 9189 | F005 |

WEIGHT FOR D.O.T. USE 32,000 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 4400 (GALLONS) 2 CU. YDS. (Circle One)

METHOD OF SHIPMENT (Circle One) (DRUMS 80 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 Michael Morse (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) Jim Batt (Authorized Signature) DATE: 1/5/83

(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 INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Michael C. Deuse (Authorized Signature) DATE: 1/5/83

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 124K T-63 6RM 1.583

005371

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

0621549 (1–7)

Authorization Number (8–13)

PRINTPACK, INC. (Company Name) | 1400 ABBOTT DRIVE (Address) | 3128887150 (Phone Number) | 08 94 38 00 11 G (14–24 Generator Number)

ELGIN (City) | ILL. (State) | 60120 (Zip) | ILD 898 257 80 (EPA Number)

WASTE HAULER(S)

STRAND TRUCKING CO. | 13642 KENTON CRESTWOOD, IL. 60445
AMERICAN CHEMICAL (Hauler Name) | 420 S. COLFAX (Hauler Address) | S.W.H. Registration Number 00 24 007 (25–31)

(312) 786-3400 (Phone Number) | 3123858440 | ILT0006468 10 (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) | 420 SOUTH COLFAX AVENUE (Address) | 91 80 89 02 (39–46 Site Number)

GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | 3127863400 (Phone Number) | IND 016 360 25 (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: INK & ADHESIVE SOLVENT WASTE | 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 |
|---|---|---|---|
| R. Q. HAZARDOUS WASTE LIQ. N.O.S. | FLAMMABLE | NA 9189 | F003 |

WEIGHT FOR D.O.T. USE: 32.000 LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 004400 (47–52) GALLONS (Circle One) / 2 CU. YDS (53)

METHOD OF SHIPMENT (Circle One): (DRUMS V80 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 Michael Morse (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) Steve Strahm (Authorized Signature) DATE: 2/16/83 (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:

Michael C. Burse (Authorized Signature) DATE: 2/16/83 (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. # 4

**SITE COPY - PART 3**

On dock 2.10.83
To 125 KT-63 6PM 2.11.83

CJ5374

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

0621550

Authorization Number

| | | | |
|---|---|---|---|
| PRINTPACK, INC. (Company Name) | 1400 ABBOTT DRIVE (Address) | 3 1 2 88 8 7 1 5 0 (Phone Number) | 0 8 9 4 3 8 0 0 1 1 G (Generator Number) |
| ELGIN (City) | ILL. (State) 60120 (Zip) | | I L D 0 8 9 8 2 5 7 8 0 (EPA Number) |

WASTE HAULER(S)

| | | | |
|---|---|---|---|
| STRAND TRUCKING CO. (Hauler Name) | 13642 KENTON CRESTWOOD, IL. 60445 (Hauler Address) | | S.W.H. Registration Number 0 0 2 4 0 0 2 |
| (312) 786-3400 (Hauler Name) | (Hauler Address) | 3 1 2 38 5 8 4 4 0 (Phone Number) | I L T 0 0 6 4 6 8 1 0 (EPA Number) |
| | | | S.W.H. Registration Number |
| | | (Phone Number) | (EPA Number) |

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

| | | | | |
|---|---|---|---|---|
| AMERICAN CHEMICAL (Facility Name) | 420 SOUTH COLFAX AVENUE (Address) | | | 9 1 8 0 8 9 0 2 (Site Number) |
| GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | 3 12 78 6 34 00 (Phone Number) | I N D 0 1 6 3 6 0 2 5 (EPA Number) |
| (Alternate (Facility Name)) | (Address) | | | (Site Number) |
| (City) | (State) | (Zip) | (Phone Number) | (EPA Number) |

**TO BE COMPLETED BY WASTE GENERATOR**

WASTE NAME: INK & ADHESIVE SOLVENT WASTE 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 |
|---|---|---|---|
| R. Q. HAZARDOUS WASTE LIQ. N.O.S. | FLAMMABLE | N A 9 1 8 9 | F003 |

WEIGHT FOR D.O.T. USE 32,000 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 4 4 0 0 (47–52) 1 GALLONS (Circle One) 2 CU. YDS. (53)

METHOD OF SHIPMENT (Circle One) (DRUMS 80 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 Michael Morse (Authorized Signature) DATE: 3-17-83

**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) [signature] (Authorized Signature) DATE: 3/17/83 (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.

Michael O'Brien (Authorized Signature) DATE: 3/17/83 (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

SITE COPY - PART 3

On dock 3-17-83
To 126KT-63 6RM 3-15-83

005880

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

0621551

Authorization Number

| | | | |
|---|---|---|---|
| PRINTPACK, INC. (Company Name) | 1400 ABBOTT DRIVE (Address) | 3 1 2 88 8 7 1 5 0 (Phone Number) | 0 8 9 4 3 8 0 0 1 1 G (Generator Number) |
| ELGIN (City) | ILL. (State) 60120 (Zip) | | I L D 0 8 9 8 2 5 7 8 0 (EPA Number) |

WASTE HAULER(S)

| | | | |
|---|---|---|---|
| STRAND TRUCKING CO. AMERICAN CHEMICAL (Hauler Name) | 13642 KENTON CRESTWOOD, IL. 60445 420 S. COLFAX (Hauler Address) | | S.W.H. Registration Number 0 0 2 4 0 0 2 |
| (312) 786-3400 | | 3 1 2 3 8 5 8 4 4 0 (Phone Number) | I L T 0 0 0 6 4 6 8 1 0 (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) | 420 SOUTH COLFAX AVENUE (Address) | | | 9 1 8 0 8 9 0 2 (Site Number) |
| GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | 31 27 8 6 34 00 (Phone Number) | I ND 0 1 6 3 6 0 2 5 (EPA Number) |
| (Alternate (Facility Name)) | (Address) | | | (Site Number) |
| (City) | (State) | (Zip) | (Phone Number) | (EPA Number) |

**TO BE COMPLETED BY WASTE GENERATOR**

WASTE NAME: INK & ADHESIVE SOLVANT WASTE 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 |
|---|---|---|---|
| R. Q. HAZARDOUS WASTE LIQ. N.O.S. | FLAMMABLE | N A 9 1 8 9 | |

WEIGHT FOR D.O.T. USE 32000 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 4 0 0 (47–52) 1 GALLONS (Circle One) 2 CU. YDS (53)

METHOD OF SHIPMENT (Circle One) (DRUMS 80 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 Michael Morse (Authorized Signature) DATE: 4/19/83

**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: 4/19/83 (54–59)

(2) (Authorized Signature) DATE: / /

**DISPOSAL, STORAGE, OR TREATMENT FACILITY***

HAZARDOUS WASTE SUBJECT TO FEE YES X NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Michael O'Brien (Authorized Signature) DATE: 4/19/83 (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

SITE COPY - PART 3

On dock 4.19.83 To 125 K.T.-63 GRM 4.19.83

005381

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

0621552

Authorization Number

| | | | |
|---|---|---|---|
| PRINTPACK, INC. (Company Name) | 1400 ABBOTT DRIVE (Address) | 3 1 2 8 8 8 7 1 5 0 (Phone Number) | 0 8 9 4 3 8 0 0 1 1 G (Generator Number) |
| ELGIN (City) | ILL. (State) | 60120 (Zip) | I L D 0 8 9 8 2 5 7 8 0 (EPA Number) |

WASTE HAULER(S)

| | | | |
|---|---|---|---|
| STRAND TRUCKING CO. AMERICAN CHEMICAL (Hauler Name) | 13642 KENTON CRESTWOOD, IL. 60445 420 S. COLFAX (Hauler Address) | | S.W.H. Registration Number 0 0 2 4 0 0 1 |
| (312) 786-3400 | | 3 1 2 3 8 5 8 4 4 0 (Phone Number) | I L D 0 0 0 6 4 6 8 1 0 (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) | 420 SOUTH COLFAX AVENUE (Address) | | | 9 1 8 0 8 9 0 2 (Site Number) |
| GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | 3 1 2 7 8 6 3 4 0 0 (Phone Number) | I N D 0 1 6 3 6 0 2 5 (EPA Number) |
| (Alternate (Facility Name)) | (Address) | | | (Site Number) |
| (City) | (State) | (Zip) | (Phone Number) | (EPA Number) |

**TO BE COMPLETED BY WASTE GENERATOR**

WASTE NAME: INK & ADHESIVE SOLVENT WASTE  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 |
|---|---|---|---|
| R. Q. HAZARDOUS WASTE LIQ. N.O.S. | FLAMMABLE | U N 1 9 9 3 ~~NA 9 1 8 9~~ | F 0 0 3 |

WEIGHT FOR D.O.T. USE 27,200 BS 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 7 4 0  1 GALLONS (Circle One) 2 CU YDS. 1

METHOD OF SHIPMENT (Circle One) (DRUMS 68 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 Michael Morse (Authorized Signature) DATE: 5-12-83

**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) Jim Batten (Authorized Signature) DATE 5 12 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:

Michael O'Brien (Authorized Signature) DATE 5 12 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. # 4

SITE COPY - PART 3

To 125 KT-63 GPM 5-12-83

005382

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

0795864

Authorization Number ____ (8–13)

**TO BE COMPLETED BY WASTE GENERATOR**

| | | | |
|---|---|---|---|
| PRINTPACK, INC. (Company Name) | 1400 ABBOTT DRIVE (Address) | 3128887150 (Phone Number) | 0894380011 G (14–24 Generator Number) |
| ELGIN (City) | ILL. (State) | 60120 (Zip) | ILD089825780 (EPA Number) |

WASTE HAULER(S)

| | | | |
|---|---|---|---|
| STRAND TRUCKING CO. AMERICAN CHEMICAL (Hauler Name) | 13642 KENTON CRESTWOOD, IL. 60445 420 S. COLFAX (Hauler Address) | | S.W.H. Registration Number 0024001 (25–31) |
| (312) 786-3400 | | 3123858440 (Phone Number) | IL 8000646810 (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) | 420 SOUTH COLFAX AVENUE (Address) | | | 9180890 2 (39–46 Site Number) |
| GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | 3127863400 (Phone Number) | IND016360025 (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: INK & ADHESIVE SOLVANT WASTE 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 |
|---|---|---|---|
| R. Q. HAZARDOUS WASTE LIQ. N.O.S. | FLAMMABLE | UN 1993 | F003 |

WEIGHT FOR D.O.T. USE: 36000 LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 004400 (47–52) (1 GALLONS / 2 CU. YDS. Circle One) 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS 80 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 Michael Morse (Authorized Signature) DATE: 6/16/83

**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) Jim Butler (Authorized Signature) DATE: 6/16/83 (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:

Michael O'Brien (Authorized Signature) DATE: 6/16/83 (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. # 4

SITE COPY - PART 3

To 124E T-63 6RM 6.16.83

CJ5363

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**

0795865

Authorization Number ____

PRINTPACK, INC. (Company Name) | 1400 ABBOTT DRIVE (Address) | 3128887150 (Phone Number) | 0894380011 G (Generator Number)

ELGIN (City) | ILL. (State) | 60120 (Zip) | ILD089825780 (EPA Number)

WASTE HAULER(S)

STRAND TRUCKING CO. / AMERICAN CHEMICAL (Hauler Name) | 13642 KENTON CRESTWOOD, IL. 60445 / 420 S. COLFAX (Hauler Address) | S.W.H. Registration Number 0024002

(312) 786-3400 (Hauler Name) | 3123858440 (Phone Number) | ILD000646810 (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) | 420 SOUTH COLFAX AVENUE (Address) | 9180902 (Site Number)

GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | 3127863400 (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 & ADHESIVE SOLVENT WASTE 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 |
|---|---|---|---|
| R. Q. HAZARDOUS WASTE LIQ. N.O.S. | FLAMMABLE | UN 1993 | F003 |

WEIGHT FOR D.O.T. USE: 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: 04400 (1) GALLONS (Circle One) (2) CU. YDS. 1

METHOD OF SHIPMENT (Circle One) (DRUMS 80 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 Michael Morse (Authorized Signature) DATE: 7/19/83

**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) Jon Hall (Authorized Signature) DATE: 7/19/83

(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: ___/___/___

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 126RT-63 GRM 7.19.83

CJ5364

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

0795866

Authorization Number

| | | | |
|---|---|---|---|
| PRINTPACK, INC. | 1400 ABBOTT DRIVE | 312 888 7150 | 0894380011 |
| (Company Name) | Address | Phone Number | Generator Number |
| ELGIN | ILLINOIS 60120 | | ILD089825780 |
| City | State / Zip | | EPA Number |

WASTE HAULER(S)

| | | | |
|---|---|---|---|
| STRAND TRUCKING CO. | 13642 KENTON | | |
| AMERICAN CHEMICAL | 420 SOUTH COLFAX | | |
| Hauler Name | Hauler Address ~~CRESTWOOD, IL. 60445~~ | | S.W.H. Registration Number 0024001 |
| | | 3123858440 | ILD000646 81 |
| | | 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 | 420 SOUTH COLFAX AVENUE | | | 91808902 |
| (Facility Name) | Address | | | Site Number |
| GRIFFITH | INDIANA | 46319 | 312 786 3400 | IND 01636026 |
| 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: INK & ADHESIVE SOLVENT WASTE 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 |
|---|---|---|---|
| R. Q. HAZARDOUS WASTE LIQ. N.O.S. | FLAMMABLE | UN1993 | F003 |

WEIGHT FOR D.O.T. USE 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: 004400 (1 GALLONS / 2 CU. YDS.) (Circle One) 1

METHOD OF SHIPMENT (Circle One) (DRUMS 80 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 Michael Morse (Authorized Signature) DATE: 8-17-83

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) Jim Batt (Authorized Signature) DATE: 8/17/83

(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:

Michael Burg (Authorized Signature) DATE: 8/17/83

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 125K T-63 GRM 8-17-83

005365

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

0878501

Authorization Number

PRINTPACK, INC. (Company Name) | 1400 ABBOTT DR. (Address) | 312 8 8 8 7 1 50 (Phone Number) | 0 8 9 4 3 8 0 0 1 1 G (Generator Number)

ELGIN (City) | ILLINOIS (State) | 60120 (Zip) | I L D 0 8 9 8 2 5 7 8 0 (EPA Number)

WASTE HAULER(S)

STRAND TRUCKING CO. 13642 KENTON CRESTWOOD, IL. 60445

AMERICAN CHEMICAL (Hauler Name) | 420 S. COLFAX (Hauler Address) | S.W.H. Registration Number 0 3 1 6 0 1 /

(312) 786-3400 (Phone Number) | I L D 0 0 0 6 4 6 8 1 (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) | 420 SOUTH COLFAX AVENUE (Address) | 9 1 8 0 8 9 0 2 (Site Number)

GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | 312 7 8 6 3400 (Phone Number) | IND0 1 6 3 6 0 2 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

**TO BE COMPLETED BY WASTE GENERATOR**

WASTE NAME: INK & ADHESIVE SOLVENT WASTE 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: R. Q. HAZARDOUS WASTE LIQUID NOS

HAZARD CLASS: FLAMMABLE

U N 1 9 9 3 (UN or NA Number)

F 0 0 3 (EPA HW Number)

WEIGHT FOR D.O.T. USE 34,650 (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 2 3 5 (1 GALLONS (Circle One) 2 CU. YDS.) 1

METHOD OF SHIPMENT (Circle One) (DRUMS) 77 (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 [signature] (Authorized Signature) DATE 9-19-83

**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) Jim Batten (Authorized Signature) DATE: 9/14/83

(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 9/14/83

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 126 KT-636 RM 9.14.83

CJ5300

IL 532-410
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**

0878502 (1–7)

Authorization Number ____ (8–13)

PRINTPACK, INC. (Company Name) | 1400 ABBOTT DR. (Address) | 3128887150089438 0011 G (Phone Number 1–14 / Generator Number 24)

ELGIN (City) | ILLINOIS (State) | 60120 (Zip) | ILD089825780 (EPA Number)

WASTE HAULER(S)

STRAND TRUCKING CO. 13642 KENTON CRESTWOOD, IL. 60445

AMERICAN CHEMICAL (Hauler Name) | 420 S. COLFAX (Hauler Address) | S.W.H. Registration Number NOT USED (25–31)

(312) 786-3400 (Phone Number) | ILD000646810 (EPA Number)

American Chem. (Hauler Name) | 420 S. Colfax (Hauler Address) | S.W.H. Registration Number 0074001 (32–38)

Griffith, Ind. 3127683400 (Phone Number) | IND001636065 (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 SOUTH COLFAX AVENUE (Address) | 91808902 (39–46 Site Number)

GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | 3127863400 (Phone Number) | IND001636026 (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: INK & ADHESIVE SOLVENT WASTE | 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 |
|---|---|---|---|
| R. Q. Hazardous Waste Liquid Nos. | FLAMMABLE | UN1993 | F003 |

WEIGHT FOR D.O.T. USE: 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: 004400 (47–52) (1 GALLONS (Circle One) 2 CU. YDS.) 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS 30 Number) TANK TRUCK OPEN TRUCK (OTHER (Specify) Vial)

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 Michael Morse (Authorized Signature) DATE: 10/19/83

**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) Jim Bartle (Authorized Signature) DATE: 10/19/83 (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:

Michael T. Daly (Authorized Signature) DATE: 10/15/83 (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. # 4

SITE COPY–PART 3

To 122 KT-63 ERM 10.19.83

CJ5387

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**

0878503 (1–7)

Authorization Number ____ (8–13)

PRINTPACK, INC. (Company Name) | 1400 ABBOTT DR. (Address) | 3128887150089438 0011 (Phone Number 14 / Generator Number) G (24)

ELGIN (City) | ILLINOIS (State) | 60120 (Zip) | ILD089825780 (EPA Number)

WASTE HAULER(S)

STRAND TRUCKING CO | 13642 KENTON CRESTWOOD, IL. 60445
AMERICAN CHEMICAL (Hauler Name) | 420 S. COLFAX (Hauler Address) | S.W.H. Registration Number 0024 001 (25–31)

(312) 786-3400 | 3123858440 (Phone Number) | ILD000646810 (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) | 420 SOUTH COLFAX AVENUE (Address) | 91808902 (39 Site Number 46)

GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | 312 786 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: INK & ADHESIVE SOLVENT WASTE | 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 |
|---|---|---|---|
| R. Q. HAZARDOUS WASTE LIQUID NOS | FLAMMABLE | UN1993 | F003 |

WEIGHT FOR D.O.T. USE: 31,600 (LBS / ~~TONS~~ (circle one))

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 4345 (47–52) (1 ~~GALLONS~~ (Circle One) 2 CU YDS.) (53)

METHOD OF SHIPMENT (Circle One) (DRUMS 79 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 Michael Morse (Authorized Signature) DATE: 11-30-83

**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: 11 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: 11/30/83 (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. # 4

SITE COPY-PART 3

To 125 T-63 GRM 11-30-83

0053TT

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**

0878504 (1–7)

Authorization Number ____ (8–13)

| | | | | |
|---|---|---|---|---|
| PRINTPACK, INC. (Company Name) | 1400 ABBOTT DR. (Address) | 3128887150 (Phone Number) | 0894380011 G (14–24 Generator Number) | |
| ELGIN (City) | ILL. (State) | 60120 (Zip) | ILD0898257 80 (EPA Number) | |

WASTE HAULER(S)

| | | | |
|---|---|---|---|
| STRAND TRUCKING CO. / AMERICAN CHEMICAL (Hauler Name) | 13642 KENTON CRESTWOOD, IL. 60445 / 420 S. COLFAX (Hauler Address) | S.W.H. Registration Number 0024001 (25–31) | |
| (312) 786-3400 (Hauler Name) | 3123858440 (Phone Number) | ILD0006468 10 (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) | 420 S. COLFAX AVENUE (Address) | 9180890 2 (39–46 Site Number) | | |
| GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | 3127863400 (Phone Number) | IND0156602 66 (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: INK & ADHESIVE SOLVENT WASTE — 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: | | |
|---|---|---|---|
| R. Q. HAZARDOUS WASTE LIQUID NOS | FLAMMABLE | UN 1993 (UN or NA Number) | D001 (EPA HW Number) |

WEIGHT FOR D.O.T. USE 200 · (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 000030 (47–52) (1 GALLONS (Circle One) 2 CU. YDS.) / (53)

METHOD OF SHIPMENT (Circle One) (DRUMS 1 Number) TANK TRUCK OPEN TRUCK (OTHER (Specify) UNK)

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 Michael Morse (Authorized Signature) DATE: 11-30-83

**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: 11/30/83 (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: 11/30/83 (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. # 4

SITE COPY–PART 3

To 204 RT-50 GRM 11.30.83

CJ5370

**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 8 9 8 2 5 7 8 0 — 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
PRINTPACK, INC.
1400 Abbott Dr.
Elgin, IL 60120

4. Generator's Phone ( 312 ) 888-7150

A. Illinois Manifest Document Number: IL 1128364

B. Illinois Generator's ID: 0 8 9 4 3 8 0 0 0 9

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
420 S. 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

H. Facility's Phone: (312) 786-3400

| | 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 | Waste No. |
|---|---|---|---|---|---|---|---|
| a. | INK & ADHESIVE SOLVENT WASTE UN 1993<br>R.Q. HAZARDOUS WASTE LIQUID NOS | X | 001 | T T | 04000 | 1 | EPA HW Number: D 0 0 1<br>Authorization Number |
| b. | | | | | | | EPA HW Number<br>Authorization Number |
| c. | | | | | | | EPA HW Number<br>Authorization Number |
| d. | | | | | | | EPA HW Number<br>Authorization Number |

J. Additional Descriptions for Materials Listed Above
a.) MIXED SOLVENTS

K. Handling Codes for Wastes Listed Above
T06/T07

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 certification under Sec. 3002(b) of RCRA, I also certify that I have a program in place to reduce the 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: James D. Hartsfield — Signature: James D. Hartsfield, Plt. Mgr. — Date: Month Day Year 09 24 85

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Ron Bridgewater — Signature: Ron Bridgewater — Date: Month Day Year 09 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: FDUNFEE — Signature — Date: Month Day Year 9 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

211 R T-50

008113

**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 8 9 8 2 5 7 8 0 — 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
PRINTPACK, INC.
1400 Abbott Dr.
Elgin, IL 60120

4. Generator's Phone ( 312 ) 888-7150

A. Illinois Manifest Document Number: IL 1128368

B. Illinois Generator's ID: 0 8 9 4 3 8 0 0 0 1 9

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 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
420 S. COLFAX AVENUE
GRIFFITH, INDIANA 46319

10. US EPA ID Number: I N D 0 7 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) 786-3400

| 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 INK & ADHESIVE SOLVENT WASTE UN 1993 R.Q. ~~HAZARDOUS WASTE~~ FLAMMABLE LIQUID NOS | X | 0 0 1 | T | 0 3 0 0 0 | 1 | EPA HW Number D 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
a) MIXED SOLVENTS

K. Handling Codes for Wastes Listed Above
T06/T07 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 certification under Sec. 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 |
|---|---|---|
| MICHAEL MORSE | Michael Morse | 3 19 86 |

**TRANSPORTER**

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date Month Day Year |
|---|---|---|
| RICH WHITE | Rich White | 3 19 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 |
|---|---|---|
| R. Shank | R. Shank | 3 19 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

212FTSO 011961

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 8 9 8 2 5 7 8 0 — Manifest Document No.: 0 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.

3. Generator's Name and Mailing Address
PRINTPACK, INC.
1400 ABBOTT DR.
ELGIN, IL. 60123

4. Generator's Phone ( 312 ) 888-7150

A. Illinois Manifest Document Number: IL 1465995

B. Illinois Generator's ID: 0 8 9 4 3 8 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 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
420 S. 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:

H. Facility's Phone: (312) 786-3400

| | 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 | Waste No. |
|---|---|---|---|---|---|---|---|
| a. | X | ~~INK & ADHESIVE SOLVENT~~ WASTE M.D. FLAMMABLE LIQUID ~~N.O.S.~~ FLAMMABLE LIQUID ~~NOS~~ UN 1993 | 0 0 1 | T | 0 5 0 0 0 | 1 | EPA HW Number: D 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.
a) MIXED SOLVENTS
Ink & Adhesive Solvents

K. Handling Codes for Wastes Listed Above In Item #14
1 = Gallons 2 = Cubic Yards
T06/T07

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 certification under SEC. 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 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: MICHAEL MORSE — Signature: Michael Morse — Date: Month 11 Day 03 Year 86

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: MIGUEL GARCIA — Signature: Miguel Garcia — Date: Month 11 Day 03 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 in item 19.

Printed/Typed Name: FDUNFEE — Signature: FDunfee — Date: Month 11 Day 3 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. #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

206E TS0 011962

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. 2050-0404. 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. |
|---|---|---|---|
| I L D 0 8 1 9 8 2 5 7 8 0 | | | |

3. Generator's Name and Mailing Address
PRINTPACK, INC.
1400 ABBOTT DRIVE
ELGIN, IL 60120

A. Illinois Manifest Document Number

4. Generator's Phone (312) 888-7150

5. Transporter 1 Company Name
STRAND TRUCKING CO.

6. US EPA ID Number
I L D 0 0 0 6 4 6 8 1 0

B. Illinois Transporter ID

C. Transporter Phone

7. Transporter 2 Company Name

8. US EPA ID Number

D. Illinois Transporter ID

E. Transporter Phone

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL
420 S. COLFAX AVENUE
GRIFFITH, INDIANA 46319

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

F. Illinois Facility ID

G. Facility 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. |
|---|---|---|---|---|
| a. RQ, HAZARDOUS WASTE LIQUID, NOS (TRICHLOROETHYLENE), UN 2831, CLASS A, F0002 | 7 | DM | 3040 | G |
| b. | | | | |
| c. | | | | |
| d. | | | | |

GENERATOR

J. Additional Descriptions for Materials Listed Above
MIXED ADHESIVES & TRICHLOROETHYLENE SOLVENT
F0002

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 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: MICHAEL WISHNEY — Signature — Date: Month 01 Day 07 Year 87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: STAN STRAND — Signature — Date: Month 01 Day 07 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 01 Day 07 Year 87

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

9-20 IL TSU B

012550

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

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# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: ILD089825780
Manifest Document No.:
2. Page 1 of
Information in the shaded areas is not required by Federal law

3. Generator's Name: PRINTPACK, INC.
1400 ABBOTT DR.
ELGIN, IL. 60123
4. Generator's Phone: 312 888-7150

A. State Manifest Document Number: IN 028396
B. State Generator's ID: 0894380011
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:
H. Facility's Phone: (312) 786-3400

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
420 S. COLFAX AVENUE
GRIFFITH, INDIANA 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. ~~NO. 5~~ JAG FLAMMABLE LIQUID UN 1993 | 001 | T | 05450 | 1 | D001 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above: a.) MIXED SOLVENTS 14.A1 = GALLONS

K. Handling Codes for Wastes Listed Above: T06/T07

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: MICHAEL WISHNEY
Signature: Michael Wishney
Month Day Year: 01 23 87

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JACK McCLEVERY
Signature:
Date: 01 23 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: FDUNFEE
Signature: FDunfee
Month Day Year: 01 23 87

IN 028396

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

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all 211RTSO B

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Indiana State Board of Health
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Indianapolis, IN 46207-7035
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**UNIFORM HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. ILD089825780 — Manifest Document No. — 2. Page 1 of 1 — Information in the shaded areas is not required by Federal law

3. Generator's Name: PRINTPACK, INC.
1400 ABBOTT DR.
4. Generator's Phone: ELGIN, IL. 60123 312 888-7150

A. State Manifest Document Number: IN028398
B. State Generator's ID: 089418090097

5. Transporter 1 Company Name: MR. FRANK, INC. — 6. US EPA ID Number: ILD069506160
C. State Transporter's ID: 010479
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
420 S. COLFAX AVENUE
GRIFFITH, INDIANA 46319 — 10. US EPA ID Number: IND016360265
G. State Facility's ID
H. Facility's Phone: (312) 786-3400

| 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 | 001 | T | 04500 | 1 | D001 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above: a.) MIXED SOLVENTS

K. Handling Codes for Wastes Listed Above: T06/T07

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 |
|---|---|---|---|---|
| MICHAEL WITHIEY | Michael Withiey | 04 | 17 | 87 |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| [illegible] | [illegible] | 04 | 17 | 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 |
|---|---|---|---|---|
| [illegible] | [illegible] | 04 | 17 | 87 |

IN028398

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

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Indiana State Board of Health
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**UNIFORM HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. / Manifest Document No.: ILD 089825780

2. Page 1 of

Information in the shaded areas is not required by Federal law

3. Generator's Name: PRINTPACK, INC.
1400 ABBOTT DRIVE
4. Generator's Phone ( ELGIN, IL. 60123
312 888-7150

A. State Manifest Document Number: IN 028397

B. State Generator's ID: 0 8 9 4 3 8 0 0 0 9

5. Transporter 1 Company Name: STRAND TRUCKING CO.
6. US EPA ID Number: ILD 000 646 810
C. State Transporter's ID: 0 0 1 2 4
D. Transporter's Phone: (312) 385-3440

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 AVENUE
GRIFFITH, INDIANA 46319
10. US EPA ID Number: IND 001 603 265
G. State Facility's ID: 9 1 8 0 8 9 0 0 0 7 2 4
H. Facility's Phone: (312) 786-3400

| 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 III SOLVENT & ADHESIVE WASTE UN 1993 R.Q. HAZARDOUS WASTE LIQUID NOS UN 2831 ORM-A F0002 | 001 | DM | 000055 | GAL | F005 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above: MIXED ADHESIVE & TRI III SOLVENT F0002

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: MICHAEL WISHNEY
Signature: Michael Wishney
Month 05 Day 29 Year 87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Leonard M Strand
Signature
Date: Month 05 Day 29 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
Month 05 Day 29 Year 87

IN 028397

EPA Form 8700-22A (Rev. 11-85)

UHWM 2/LP2

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MRK 1-204R-TSD-B

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**UNIFORM HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. / Manifest Document No.: ILD089825780 00001
2. Page 1 of: 1
Information in the shaded areas is not required by Federal law

3. Generator's Name: PRINTPACK, INC.
1400 ABBOTT DR.
ELGIN, IL. 60123
4. Generator's Phone (312) 888-7150

A. State Manifest Document Number: IN 028399
B. State Generator's ID: 089A4380009

5. Transporter 1 Company Name: MR. FRANK, INC.
6. US EPA ID Number: ILD065506160
C. State Transporter's ID: 00759
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
420 S. COLFAX AVENUE
GRIFFITH, INDIANA 46319
10. US EPA ID Number: INDO11636265
G. State Facility's ID
H. Facility's Phone: (312) 786-3400

| 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 | 001 | TT | 05300 | L | D001 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

GENERATOR

J. Additional Descriptions for Materials Listed Above: a.) MIXED SOLVENTS
K. Handling Codes for Wastes Listed Above: T06/T07

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: MICHAEL WISHNEY
Signature: Michael Wishney
Month Day Year: 07 01 87

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: EDWARD J. DUNTEE
Signature
Month Day Year: 07 02 87

IN 028399

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

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

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# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. / Manifest Document No.: ILD089825780 — 2. Page 1 of: 1 — Information in the shaded areas is not required by Federal law (40 CFR 265)

3. Generator's Name: PRINTPACK, INC.
1400 ABBOTT DR.
4. Generator's Phone: ELGIN, IL. 60123 312 888-7150

A. State Manifest Document Number: IN028400
B. State Generator's ID: 089438000
C. State Transporter's ID: 003769
D. Transporter's Phone: (312) 596-3377
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID:
H. Facility's Phone: (312) 786-3400

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
420 S. COLFAX AVENUE
GRIFFITH, INDIANA 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 | 13. Unit Wt/Vol | 14. Waste No. |
|---|---|---|---|---|---|
| a. WASTE FLAMMABLE LIQUID N.O.S. FLAMMABLE LIQUID UN 1993 | 004 | T | 04700 | G | D001 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above: a.) MIXED SOLVENTS
K. Handling Codes for Wastes Listed Above: T06/T07

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 |
|---|---|---|---|---|
| MICHAEL J. WISHNEY | Michael J. Wishney | 10 | 07 | 87 |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials — Date

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| CARL E MILBURN | Carl E. Milburn | 10 | 08 | 87 |

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 |
|---|---|---|---|---|
| P DUNFEE | P Dunfee | 10 | 09 | 87 |

IN028400

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

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Indiana State Board of Health
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# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: ILD089825780
Manifest Document No.: 00047
2. Page 1 of 1
Information in the shaded areas is not required by Federal law

3. Generator's Name: PRINTPACK, INC.
1400 ABBOTT DR.
ELGIN, IL. 60123
4. Generator's Phone: 312 888-7150

A. State Manifest Document Number: IN 028401
B. State Generator's ID: 089328000 9
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:
H. Facility's Phone: (312) 786-3400

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
420 S. COLFAX AVENUE
GRIFFITH, INDIANA 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. FLAMMABLE LIQUID UN 1993 | 001 | T | 04850 | 1 | D001 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above: a.) MIXED SOLVENTS
K. Handling Codes for Wastes Listed Above: T06/T07

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.

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Printed/Typed Name: MICHAEL J. WISHNEY
Signature: [signature]
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:
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 Day Year: 12/11/87

GENERATOR / TRANSPORTER / FACILITY

IN 028401

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

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Indiana State Board of Health
P.O. Box 7035
Indianapolis, IN 46207-7035

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# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: ILD089825780 — Manifest Document No.: 00048

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

3. Generator's Name: PRINTPACK, INC.
1400 ABBOTT DR.
ELGIN, IL. 60123

4. Generator's Phone (312) 888-7150

A. State Manifest Document Number: IN028402

B. State Generator's ID: 0893280009

5. Transporter 1 Company Name: MR. FRANK, INC.

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
420 S. COLFAX AVENUE
GRIFFITH, INDIANA 46319

10. US EPA ID Number: IND016360265

G. State Facility's ID:

H. Facility's Phone: (312) 786-3400

| 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. FLAMMABLE LIQUID UN 1993 | 001 | T | 03500 | 1 | F003 F005 |
| b. | | | | | |
| c. P.O.# 13-03196 | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above: a.) MIXED SOLVENTS F003 F005

K. Handling Codes for Wastes Listed Above: T06/T07

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.

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: MICHAEL WISHNEY — Signature: [signature] — Month Day Year: 08 [illegible]

17. Transporter 1 Acknowledgement of Receipt of Materials — Date

Printed/Typed Name: RICH [illegible] — Signature: [signature] — Month Day Year: 08 [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: G. MURPHY — Signature: G. Murphy — Month Day Year: 08 [illegible]

GENERATOR — TRANSPORTER — FACILITY

IN028402

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

125K T62

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Indiana State Board of Health
P.O. Box 7035
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# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: ILD089825780 — Manifest Document No.: 00048

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

3. Generator's Name: PRINTPACK, INC, 1400 ABBOTT DR. ELGIN, IL. 60123

4. Generator's Phone (312) 888-7150

A. State Manifest Document Number: IN 028403

B. State Generator's ID: 0893280009

5. Transporter 1 Company Name: MR. FRANK, INC.

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, 420 S. COLFAX AVENUE, GRIFFITH, INDIANA 46319

10. US EPA ID Number: IND016360265

G. State Facility's ID:

H. Facility's Phone: (312) 786-3400

| 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., (F005 AND F003), FLAMMABLE LIQUID UN 1993 R.Q. | 001 | T | 05000 | 1 | F003 F005 |
| b. | | | | | |
| c. P.O.# 13- 03779 | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above: a.) MIXED SOLVENTS F003 F005

K. Handling Codes for Wastes Listed Above: T06/T07

15. Special Handling Instructions and Additional Information: 1 = GALLONS

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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: MICHAEL WISHNEY — Signature: Michael Wishney — Month Day Year: 05 12 88

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: F DUNFEE — Signature: F Dunfee — Month Day Year: 05 12 88

GENERATOR — TRANSPORTER — FACILITY

IN 028403

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

211 RT 50 [illegible]

T.S.D. DETACH AND RETAIN THIS COPY

0015361

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·0·8·9·8·2·5·7·8·0
Manifest Document No.: 0·0·0·4·8
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
PRINTPACK, INC.
1400 ABBOTT DRIVE ELGIN, ILL. 60123

4. Generator's Phone ( 312- ) 888-7150

A. State Manifest Document Number: INA 0162999
B. State Generator's ID: 0 8 9 4 3 8 0 0 0 9

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: R 0 0 7 9
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
420 S. COLFAX AVENUE
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: 9 1 8 0 8 9 0 0 0 2
H. Facility's Phone: 312-786-3400

| 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., (F005 AND F003) FLAMMABLE LIQUID UN 1993 R.Q. | 0.0.1 | T. | 04700 | 1 | F005 F003 |
| b. | | | | | |
| c. P.O. #13-04265 | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
a) MIXED SOLVENTS F003
F005

K. Handling Codes for Wastes Listed Above
T06/T07

15. Special Handling Instructions and Additional Information
1=GALLONS

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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: MICHAEL I. MORSE
Signature: Michael I Morse
Date: Month 06 Day 30 Year 88

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: DAVE VOSS
Signature: Dave Voss
Date: Month 06 Day 30 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 07 Day 01 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 0162999

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

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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

211TCF50 7/1/88M

0015309

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.: ILD089825780
Manifest Document No.: 04682
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
PRINTPACK, INC.
1400 ABBOTT DRIVE
ELGIN, IL 60123
4. Generator's Phone (312) 888-7150

A. State Manifest Document Number: INA 0159604
B. State Generator's ID: 0894380009
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, 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
420 S. COLFAX AVENUE
GRIFFITH, INDIANA 46319
10. Use EPA ID Number: IND016360265

G. State Facility's ID: 9180890002
H. Facility's Phone: (312) 786-3400

| 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., (F005 AND F003) FLAMMABLE LIQUID UN 1993 R.Q. | 001 | T | 05000 | G | F005 F003 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
a) MIXED SOLVENTS F003
F005

K. Handling Codes for Wastes Listed Above
T06/T07

15. Special Handling Instructions and Additional Information
1 = GALLONS P.O.# 13-04682

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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: MICHAEL I MORSE
Signature: Michael Morse
Date: Month 08 Day 24 Year 88

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: GARY DERESS
Signature: Gary Deress
Date: Month 08 Day 24 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: PDUNFEE
Signature: PDunfee
Date: Month Day Year 082488

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 0159604

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

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PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

210 TC TSD 8/24

0015363

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 8 9 8 2 5 7 8 0 | Manifest Document No. 5 5 9 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
PRINTPACK, INC.
1400 ABBOTT DRIVE
ELGIN, IL 60123

4. Generator's Phone ( 312 ) 888-7150

A. State Manifest Document Number: INA 0159605

B. State Generator's ID: 0 8 9 4 3 8 0 0 0 9

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: (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
420 S. COLFAX AVENUE
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: 9 1 8 0 8 9 0 0 0 2

H. Facility's Phone: (312) 786-3400

| 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., (F005 AND F003) FLAMMABLE LIQUID UN 1993 R.Q. | 0 0 1 | T | 0 5 5 0 0 | G | F005 F003 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
a) MIXED SOLVENTS F003
F005

K. Handling Codes for Wastes Listed Above
T06/T07

15. Special Handling Instructions and Additional Information
1 = GALLONS P.O.# 13-05698

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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 |
|---|---|---|---|---|
| MICHAEL I. MORSE | Michael I Morse | 0 9 | 2 2 | 8 8 |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date Month | Day | Year |
|---|---|---|---|---|
| JON PORTER | Jon Porter | 0 9 | 2 2 | 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 | Signature | Date Month | Day | Year |
|---|---|---|---|---|
| F DUNFEE | F Dunfee | 0 9 | 2 2 | 8 8 |

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

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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 0159605

0013364

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

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# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: I L D 0 8 9 8 2 5 7 8 0 | Manifest Document No.: 0 5 6 4 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
PRINTPACK, INC.
1400 ABBOTT DRIVE
ELGIN, IL
4. Generator's Phone ( 312 ) 888-7150

A. State Manifest Document Number: INA 0159606
B. State Generator's ID: 0 8 9 4 3 8 0 0 0 9
C. State Transporter's ID: 0 0 7 9
D. Transporter's Phone: (312) 596-3377
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 0 5 9 5 0 5 1 5 0
7. Transporter 2 Company Name:
8. Use EPA ID Number:

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL
420 S. COLFAX AVENUE
GRIFFITH, INDIANA 46319
10. Use EPA ID Number: I N D 0 0 1 8 3 6 0 2 6 5

G. State Facility's ID: 9 1 8 0 8 9 0 0 0 2
H. Facility's Phone: (312) 786-3400

| 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., (F005 AND F003) FLAMMABLE LIQUID UN 1993 R.Q. | 0 0 1 | T | 0 0 0 1 | G | F005 F003 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
a) MIXED SOLVENTS F003
F005

K. Handling Codes for Wastes Listed Above
T06/T07

15. Special Handling Instructions and Additional Information
1 = GALLONS P.O.# 13-05645

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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: MICHAEL WISHNEY | Signature | Date: Month 12 Day 16 Year 87

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials — Printed/Typed Name | Signature | Date: Month 12 Day 16 Year 87
18. Transporter 2 Acknowledgement of Receipt of Materials — Printed/Typed Name | Signature | Date: Month Day Year

FACILITY
19. Discrepancy Indication Space
F DUNFEE F Dunfee 12 16 88

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 12 Day 16 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 0159606

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
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2 11 TC TSD 12/16

0015305

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 8 9 8 2 5 7 6 0
Manifest Document No.: 0 6 3 1 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
PRINTPACK, INC.
1400 ABBOTT DRIVE
ELGIN, IL.

4. Generator's Phone ( 312 ) 888-7150

A. State Manifest Document Number: INA 0160082
B. State Generator's ID: 0 8 9 4 3 8 0 0 0 9

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: (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
420 S. COLFAX AVENUE
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: 9 1 8 0 8 9 0 0 0 2
H. Facility's Phone: (312) 786-3400

| 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., (F005 AND F003) FLAMMABLE LIQUID UN 1993 R.Q. | 0 0 1 | T T | 0 4 6 0 0 | G | F005 F003 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
a) MIXED SOLVENTS F003
F005

K. Handling Codes for Wastes Listed Above
T06/T07

15. Special Handling Instructions and Additional Information
1 = GALLONS P.O.# 13-06315

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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: MICHAEL J. WISHNES
Signature: [signature]
Date: Month 02 Day 15 Year 89

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: CARL E. MILBURN
Signature: [signature]
Date: Month 02 Day 15 Year 89

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: ~~MICHAEL J. WISHNES~~ MJW
Signature: [signature] MJW
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 02 Day 15 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 0160082

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

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PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

21TFTS 02/15

0016819

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 8 9 8 2 5 7 8 0 | Manifest Document No. 3 2 3 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
PRINTPACK, INC.
1400 ABBOTT DRIVE
ELGIN, IL
4. Generator's Phone ( 312 ) 888-7150

A. State Manifest Document Number: INA 0341560
B. State Generator's ID: 0 8 9 4 3 8 0 0 0 9

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: (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
420 S. COLFAX AVENUE
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: 9 1 8 0 8 9 0 0 0 2
H. Facility's Phone: (312) 786-3400

| 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. WASTE FLAMMABLE LIQUID N.O.S., (F005 AND F003) FLAMMABLE LIQUID UN 1993 R.Q. | 0 0 1 | T | 5,000 | 1 | F005 F003 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
a) MIXED SOLVENTS F003
& F005

K. Handling Codes for Wastes Listed Above
T06/T07

15. Special Handling Instructions and Additional Information
1 = GALLONS P.O.# 13-32334

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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: FRED W. WATTS
Signature: Fred W Watts
Date: Month 05 Day 10 Year 87

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JOAQUIN GARCIA
Signature:
Date: Month 05 Day 10 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: T DUNLEE
Signature: T Dunlee
Month 05 Day 10 Year 87

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY

211RT 50 9/0

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.

INA0341560

0016820

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 8 9 8 2 5 7 8 0
Manifest Document No.: 3 1 1 3 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
PRINTPACK, INC.
1400 ABBOTT DRIVE
ELGIN, ILL.

4. Generator's Phone (312) 888-7150

A. State Manifest Document Number: INA 0346461
B. State Generator's ID: 0 8 9 4 3 8 0 0 0 9
C. State Transporter's ID: 0 0 7 9
D. Transporter's Phone: (312) 596-3377
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID: 9 1 8 0 8 9 0 0 0 2
H. Facility's Phone: (312) 786-3400

5. Transporter 1 Company Name: MR. FRANK, INC.
6. Use EPA ID Number: 98 4775047 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
420 S. COLFAX AVENUE
GRIFFITH, INDIANA 46319

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., (F003 AND F005) FLAMMABLE LIQUID UN 1993 R.Q. | 001 | T | 0475.0 | G | F005 F003 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
a) MIXED SOLVENTS F003
F005

K. Handling Codes for Wastes Listed Above
T06/T07

15. Special Handling Instructions and Additional Information
1 - GALLONS P.O.# 13-31137

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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.

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Printed/Typed Name: MICHAEL I. MORSE
Signature: Michael I Morse
Date: Month 07 Day 12 Year 89

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JON POOKY
Signature:
Date: Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Date: Month 07 Day 12 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: F DUNFEE
Signature: F Dunfee
Date: Month 07 Day 12 Year 89

212TCT50 7/12

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.

INA0346461

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY

0016821

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 8 9 8 2 5 7 8 0
Manifest Document No.: 1 0 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
PRINTPACK, INC.
1400 ABBOTT DRIVE
ELGIN, ILL
4. Generator's Phone ( 312 ) 888-7150

A. State Manifest Document Number: INA 0341561
B. State Generator's ID: 0 8 9 4 3 8 0 0 0 9

5. Transporter 1 Company Name: MR. FRANK, INC.
6. Use EPA ID Number: I LD 9 8 4 7 7 5 0 4 9
C. State Transporter's ID: 0 0 7 9
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
420 S. COLFAX AVENUE
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: 9 1 8 0 8 9 0 0 0 2
H. Facility's Phone: (312) 786-3400

| 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. WASTE FLAMMABLE LIQUID N.O.S., (F003 AND F005) FLAMMABLE LIQUID UN 1993 R.Q. | 0 0 1 | T | 0 5 0 0 0 | G | F005 F003 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
a) MIXED SOLVENTS F003
F005

K. Handling Codes for Wastes Listed Above
T06/T07

15. Special Handling Instructions and Additional Information
1 = GALLONS P.O.# 13-31327

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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: MICHAEL I. MORSE — Signature: Michael J. Morse — Date: Month 0 9 Day 2 8 Year 8 9

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: RON BRIDGEWATER — Signature: Ron Bridgewater — Date: Month 0 8 Day 2 8 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: F DUNFEE — Signature: F Dunfee — Date: Month 0 8 Day 2 9 Year 8 9

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

205R TSD 8/29/89

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.

INA0341561

0016822

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

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# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: I·L·D·0·8·9·8·2·5·7·8·0
Manifest Document No.: 0.0.1 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
PRINTPACK, INC.
1400 ABBOTT DRIVE
ELGIN, ILL
4. Generator's Phone ( 312 ) 888-7150

A. State Manifest Document Number: INA 0341562
B. State Generator's ID: 0 8 9 4 3 8 0 0 0 9

5. Transporter 1 Company Name: MR. FRANK, INC.
6. Use EPA ID Number: IL·D·9·8·4·7·7·5·0·4·9
C. State Transporter's ID: 0 0 7 9
D. Transporter's Phone: (312) 326-0377

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 AVENUE
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: 9 1 8 0 8 9 0 0 0 2
H. Facility's Phone: (312) 786-3400

| 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., (F003 AND F005) FLAMMABLE LIQUID UN 1993 R.Q. | D·0·1 | T.T | 0.5.2.0.0 | 1 | F005 F003 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
a) MIXED SOLVENTS F003
F005

K. Handling Codes for Wastes Listed Above
T06/T07
1 = GALLONS

15. Special Handling Instructions and Additional Information
1 = GALLONS P.O.# 13-32327

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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.

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Printed/Typed Name: [illegible] Signature: [illegible] Date: Month 10 Day [illegible] Year [illegible]

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: RICH WHITE Signature: [illegible] Date: Month 10 Day 2.5 Year 8.9

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 10 Day 2.5 Year 8.9

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.

INA0341562

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

3500-210TC TSD 10/25
1700-212TC TSD 10/25

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0016823

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

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# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: I.L.D.0.8.9.8.2.5.7.8.0
Manifest Document No.: 0 01.0.4
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:
PRINTPACK, INC.
1400 ABBOTT DRIVE
ELGIN, ILL
4. Generator's Phone ( 708 ) 888-7150

A. State Manifest Document Number: INA 0341563
B. State Generator's ID: 0 8 9 4 3 8 0 0 0 9

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: 0 0 7 9
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
420 S. COLFAX AVENUE
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: 9 1 8 0 8 9 0 0 0 2
H. Facility's Phone: (312) 786-3400

| 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., (F003 AND F005) FLAMMABLE LIQUID UN 1993 R.Q. | D.0.1 | . | 5400 | GALS | F005 F003 |
| b. | . . | . | . . . . | | |
| c. | . . | . | . . . . | | |
| d. | . . | . | . . . . | | |

J. Additional Descriptions for Materials Listed Above:
a) MIXED SOLVENTS F003 F005

K. Handling Codes for Wastes Listed Above: T06/T07

15. Special Handling Instructions and Additional Information:
1 - GALLONS P.O.# 13-36557

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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.

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Printed/Typed Name: FRED W. WATTS
Signature: Fred W. Watts
Date: Month 12 Day 13 Year 89

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Walter C. Klaubo
Signature: Walter C. Klaubo
Date: Month 12 Day 13 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
Month Day Year: 12 13 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.

INA0341563

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY

2107050 12/13

0016824

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

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# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: I·L·D·0·8·9·8·2·5·7·8·0
Manifest Document No.: 0·0·1·0·5
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
PRINTPACK, INC.
1400 ABBOTT DRIVE
ELGIN, ILL.
4. Generator's Phone ( 708 ) 888-7150

A. State Manifest Document Number: INA 0341564
B. State Generator's ID: 0 8 9 4 3 8 0 0 0 9

5. Transporter 1 Company Name: MR. FRANK, INC.
6. Use EPA ID Number: I L D 98 4 7 7 5 0 4 9
C. State Transporter's ID: 0 0 7 9
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
420 S. COLFAX AVENUE
GRIFFITH, INDIANA 46319
10. Use EPA ID Number: IN D 0 1 6 3 6 0 2 6 5
G. State Facility's ID: 9 1 8 0 8 9 0 0 0 2
H. Facility's Phone: (312) 786-3400

| 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.,(F003 AND F005) FLAMMABLE LIQUID UN 1993 R.Q. | D·0·1 | T.T | 0.50.00 | G | F005 F003 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
a) MIXED SOLVENTS F003
F005

K. Handling Codes for Wastes Listed Above
T06/T07

15. Special Handling Instructions and Additional Information
1 - GALLONS P.O.# 13-36783

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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.

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Printed/Typed Name: FRED WATTS
Signature: Fred Watts
Date: Month 01 Day 24 Year 90

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Robert PERKINS
Signature: Robert Perkins
Date: Month 01 Day 24 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: WHITAKER A
Signature: A Whitaker
Month 1 Day 24 Year 90

GENERATOR / TRANSPORTER / FACILITY

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INA0341564

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

206RTSD 1/24

COPY 5. TSD COPY

0018294

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 8 9 8 2 5 7 8 0
Manifest Document No.: 00107
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
PRINTPACK, INC.
1400 ABBOTT DRIVE
ELGIN, ILL. 60123
4. Generator's Phone ( 708 ) 888-7150

A. State Manifest Document Number: INA 0341565
B. State Generator's ID: 0894380009

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: ~~(312) 596-3577~~ 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
420 S. COLFAX AVENUE
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: 9 1 8 0 8 9 0 0 0 2
H. Facility's Phone: (312) 786-3400

| 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. (F003 AND F005) FLAMMABLE LIQUID UN 1993 R.Q. | 001 | T | 0.5.200 | G | F005 F003 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
a) MIXED SOLVENTS F003 F005

K. Handling Codes for Wastes Listed Above
T06/T07

15. Special Handling Instructions and Additional Information
1 = GALLONS P.O.# 13-30599

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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.

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GENERATOR
Printed/Typed Name: FRED WATTS
Signature: Fred Watts
Date: Month 03 Day 14 Year 90

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: MIGUEL GARCIA
Signature: Miguel Garcia
Date: Month 03 Day 14 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: F DUNFEE
Signature: F Dunfee
Date: Month 03 Day 14 Year 90

212R T50 3/14/90

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.

INA0341565

0018285

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

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# UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: I L D 0 8 9 8 2 5 7 8 0
Manifest Document No.: 0 0 1 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
PRINTPACK, INC.
1400 ABBOTT DRIVE
ELGIN, ILL. 60123
4. Generator's Phone ( 708 ) 888-7150

A. State Manifest Document Number: INA 0341566
B. State Generator's ID: 0 8 9 4 3 8 0 0 0 9

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: 0 0 7 9
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
420 S. COLFAX AVENUE
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: 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)* | 12. Containers No. | Type | 13. Total Quantity | 14. Unit Wt/Vol. | I. Waste No. |
|---|---|---|---|---|---|
| a. WASTE FLAMMABLE LIQUID N.O.S. (F003 AND F005) FLAMMABLE LIQUID UN 1993 R.Q. | 0 0 1 | T.T | 05500 | G | F005 F003 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
a) MIXED SOLVENTS F003
F005

K. Handling Codes for Wastes Listed Above
T06/T07

15. Special Handling Instructions and Additional Information
1 = GALLONS P.O.# 13-30851

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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: FRED W WATTS
Signature: Fred W Watts
Date: Month 4 Day 24 Year 90

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: RONALD W. PROSSER
Signature: [signature]
Date: Month 04 Day 24 Year 90

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

19. Discrepancy Indication Space
212 RTSD 4/24

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 04 Day 24 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.

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY

0018296

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.: I. L D. 0. 8. 9. 8. 2. 5. 7. 8. 0
Manifest Document No.: 0. 0. 1. 0. 9
2. Page 1 of 1
Information in the shaded a not required by Federal la items D, F, H and I are requi State law.

3. Generator's Name and Mailing Address
PRINTPACK, INC.
1400 ABBOTT DRIVE
ELGIN, ILL. 60123
4. Generator's Phone ( 708 ) 888-7150

A. State Manifest Document Number: INA 0341567
B. State Generator's ID: 0 8 9 4 3 8 0 0 0 9

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: 0 0 7 9
D. Transporter's Phone: (708) 720-07

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 AVENUE
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: 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) | 12. Containers No. | Type | 13. Total Quantity | 14. Unit Wt/Vol. | I. Waste No |
|---|---|---|---|---|---|
| a. WASTE FLAMMABLE LIQUID N.O.S. (F003 AND F005) FLAMMABLE LIQUID UN 1993 R.Q. | 0.0.1 | T.T | 05500 | G | F005 F003 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
a) MIXED SOLVENTS F003
F005

K. Handling Codes for Wastes Listed Above
T06/T07

15. Special Handling Instructions and Additional Information
1 - GALLONS P.O.# 13-32955

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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 h 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 f 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: ERON WATTS
Signature:
Date: Month / Day / Ye

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: CARL E NILSSON
Signature:
Date: Month 06 Day 06 Ye 96

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 in Item 19.
Printed/Typed Name: F DUNFEE
Signature:
Date: Month 06 Day 06 Ye 96

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

210T-T50 6/6

0018297

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 8 9 6 2 5 7 8 0
Manifest Document No.: 0 0 1 1 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
PRINTPACK, INC.
1400 ABBOTT DRIVE
ELGIN, ILL. 60123
4. Generator's Phone ( 708 ) 888-7150

A. State Manifest Document Number: INA 0341568
B. State Generator's ID: 0 8 9 4 3 8 0 0 0 9
C. State Transporter's ID: 0 0 7 9
D. Transporter's Phone: (708) 720-0700
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID: 9 1 8 0 8 9 0 0 0 2
H. Facility's Phone: (312) 768-3400

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
7. Transporter 2 Company Name:
8. Use EPA ID Number:
9. Designated Facility Name and Site Address
AMERICAN CHEMICAL
420 S. COLFAX AVENUE
GRIFFITH, INDIANA 46319
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. (F003 AND F005) FLAMMABLE LIQUID UN 1993 R.Q. | 00 1 | T.T | 0.5.4.0.0 | G | F005 F003 |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above
a) MIXED SOLVENTS F003 F005

K. Handling Codes for Wastes Listed Above
T06/T07

15. Special Handling Instructions and Additional Information
1 = GALLONS P.O.E 13-33411

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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: FRED WATTS
Signature: Fred Watts
Date: Month 07 Day 17 Year 90

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JEFF BROWN
Signature: Jeff Brown
Date: Month 07 Day 19 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 07 Day 19 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.

INA0341568

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY 312-768-3400 7/A

0018288

**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

031210

Authorization Number 998579

EXEMPT

0316000568 Generator Number

Process Gear (Company Name) | 3313 W Newport Address

Chicago City | Ill State | 60618 Zip

~~WASTE HAULER(S)~~

American Chemical Hauler Name | SME 12 S Cedar Hauler Address | S.W.H. Registration Number 0024

Hauler Name | Hauler Address | S.W.H. Registration Number IND016360265

~~DESTINATION~~ DISPOSAL STORAGE OR TREATMENT SITE

LANDCARE (~~Facility Name~~) | HAULER Address | IND009842824 Site Number

Valparaiso City | Indiana State | Zip | IND009842824

**TO BE COMPLETED BY WASTE GENERATOR**

WASTE NAME: Chemical Solvent | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

F001

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 3536 LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 33 Gals

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: 7/17/81 | Ted Packard (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) LMT C. Shuly 7-17-81 (Authorized Signature) DATE:

(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:

Jim Cahill (Authorized Signature) DATE: 7/20/81

COMMENTS OR SPECIAL INSTRUCTIONS: UNLOAD AT DOCK 7/20/81
5 DR. TO #1 STILL. 7/28/81 T-63 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

000651

**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

0312184

Authorization Number

PROCESS GEAR CO (Company Name) 3313 W. NEWPORT (Address) GRIFFITH IND

CHICAGO ILL (City) ILL (State) 60618 (Zip)

0316000 568 G (Generator Number)

WASTE HAULER(S)

~~AMERICAN CHEM SER 420 S. COLFAX, LAKE IND.~~ (Hauler Name) (Hauler Address) S.W.H. Registration Number ~~0024~~

LAND GRGBC MTR (Hauler Name) VALPARAISO, IN. (Hauler Address) IND009842824 S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) 420 So Colfax (Address) 918 089 02 (Site Number)

GRIFFITH (City) IN (State) 46319 (Zip) IND016360265

**TO BE COMPLETED BY WASTE GENERATOR**

WASTE NAME: CHLORINATED 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:

5 Drums

WEIGHT FOR D.O.T. USE 2030 LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 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: 3-23-81 C. H. Winter (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: 3/23/81

(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:

Bob Mauck (Authorized Signature) DATE: 03/24/81

COMMENTS OR SPECIAL INSTRUCTIONS: UNLOADED AT DOCK 3/24/81
PUMPED TO #1 STILL 4/29/81 T-63 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

000650

**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

0510891

Authorization Number 998579

Process Gear Co (Company Name) 3313 W. NEWPORT (Address) 583-1616 (Phone Number) 0316000568 (Generator Number)

CHICAGO (City) ILL (State) 60618 (Zip) (EPA Number)

WASTE HAULER(S)

LANDGREBE (Hauler Name) Valparaiso, Inc 46383 (Hauler Address) S.W.H. Registration Number 0024

1552 (Phone Number) (EPA Number)

Hauler Name Hauler Address 870 S.W.H. Registration Number

Phone Number INDU098846824 (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) 420 S. COLFAX (Address) INDU098428 (Site Number)

Griffith (City) Indiana (State) 46319 (Zip) (Phone Number) (EPA Number)

5710

Alternate (Facility Name) Address Site Number

City State Zip Phone Number EPA Number

**TO BE COMPLETED BY WASTE GENERATOR**

WASTE NAME: CHLORINATED 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

WEIGHT FOR D.O.T. USE 2930 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED 395 GALS 1 GALLONS (Circle One) 2 CU. YDS.

METHOD OF SHIPMENT (Circle One) (DRUMS 5 Number) TANK TRUCK OPEN TRUCK OTHER (Specify)

FIVE

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 Ted Rachwal (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) [signature] (Authorized Signature) DATE 11/5/81

(2) (Authorized Signature) DATE / /

Prepaid

**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:

Bob Mauck (Authorized Signature) DATE 11/06/81

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**

Unloaded on dock 11/6/81 GPM
To 120 TK T-63 GPM 11/12/81

000652

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. M10006532485 Manifest Document No.

2. Page 1 of

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

3. Generator's Name and Mailing Address
PRODUCTION PAINTING CO
1002 OHLIL KAL. MI 49001

4. Generator's Phone (616) 342-8198

A. State Manifest Document Number MI 0494019

B. State Generator's ID

5. Transporter 1 Company Name: THOMAS SOLVENT CO. OF MUSK INC

6. US EPA ID Number: MID017274093

C. State Transporter's ID

D. Transporter's Phone

7. Transporter 2 Company Name: Valley City Refuse Disposal, Inc.

8. US EPA ID Number: MID055855373

E. State Transporter's ID H830514

F. Transporter's Phone (616) 538-8499

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICES
4205 COLFAX
GRIFFITH, IND. 46319

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. | X | WASTE TOLUENE NOS 07 — FLAMMABLE LIQUID UN1993 | 14 | DR | 770 | | 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.

X Printed/Typed Name: JEFF MCCALLUM — Signature: X Jeff S McCallum — Date: Month Day Year 03 19 85

17. Transporter 1 Acknowledgement of Receipt of Materials

X Printed/Typed Name: THOMAS SOLVENT CO. OF MUSK, INC — Signature: Neale Helsel — Date: Month Day Year 03 19 85

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name: Ronald L. Cheyne — Signature: Ronald L Cheyne — Date: Month Day Year 03 21 85

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: L D Milodan — Signature: [signature] — Date: Month Day Year 3 22 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 F T-50

038711

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. M100065324 85 Manifest Document No. 94038

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
PRODUCTION PAINTING
1002 ONEIL Kil. Mi. 49007

4. Generator's Phone (616) 342-8198

A. State Manifest Document Number MI 0494038

B. State Generator's ID

5. Transporter 1 Company Name
Thomas Solvent Co. of Muskegon Inc. US EPA ID Number MID017274093

C. State Transporter's ID H830514

D. Transporter's Phone 616-777-2619

7. Transporter 2 Company Name
VALLEY CITY REFUSE DISPOSAL, INC.

8. US EPA ID Number MID055855373

E. State Transporter's ID

F. Transporter's Phone (616) 538-8499

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

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. WASTE TOLUNE FLAMMBLE LIQUID UN 1993 | | 004 | DR | 220 | G | D001 | H |
| b. USED 111 TRICHLOROETHANE ORM-A UN 2831 | | 003 | DR | 165 | G | F001 | 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.

Printed/Typed Name: JEFF McCillum
Signature: Jeff McCillum
Date: Month Day Year 11 06 85

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: NCAIE F HELSEL
Signature: Neale F Helsel
Date: Month Day Year 11 06 85

18. Transporter 2 Acknowledgement or Receipt of Materials
Printed/Typed Name: Ronald L. Cheyne
Signature: Ronald L Cheyne
Date: Month Day Year 11 07 85

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 11 08 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 S-204ET-50 2-1AET-63

008712

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. MID006532485 Manifest Document No.

2. Page 1 of

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

3. Generator's Name and Mailing Address
PRODUCTION PAINTING CO
1002 O'NEIL
KALAMAZOO, Michigan 49001

4. Generator's Phone ( )

A. State Manifest Document Number MI 0897511

B. State Generator's ID

5. Transporter 1 Company Name: Valley City Refuse Disposal

6. US EPA ID Number: MID 055855373

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. 46311

10. US EPA ID Number: MID055855373

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 | FLAMMABLE LIQUID 07 WASTE Toluene UN1993 | 6 | Dr. | 300 | 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.

Printed/Typed Name: X JEFF S McCALLUM
Signature: Jeff S McCallum
Date: Month Day Year 0 28 86

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Arnold Dykstra
Signature: Arnold Dykstra
Date: Month Day Year 10 28 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 F. Schmidt
Signature: Harrold F. Schmidt
Date: Month Day Year 10 31 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 2/2/86

TSDF COPY ⑥ 123KT63 0011960

011000

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.: MND 980679088
Manifest Document No.: 42193
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: Professional Auto Body, 584 Stryker, St. Paul, MN 55107
4. Generator's Phone: (612) 222-5900

A. State Manifest Document Number: MN 0042193
B. State Generator's ID:
C. State Transporter's ID:
D. Transporter's Phone: 414-657-6222
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: ABC SERVICES, INC.
6. US EPA ID Number: WID076159839
7. Transporter 2 Company Name:
8. US EPA ID Number:
9. Designated Facility Name and Site Address: AMERICAN CHEMICAL SERVICE, 420 SOUTH COLFAX, GRIFFITH, IN 46319
10. U.S 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 | Waste No. |
|---|---|---|---|---|---|---|---|
| a. | X | FLAMMABLE LIQUID NOS UN1993 | 2 | DM | 110 | G | D001 |
| b. | | | | | | | |
| c. | | | | | | | |
| d. | | | | | | | |

J. Additional Descriptions for Materials Listed Above: WASTE PAINT THINNER
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: ROBERT M SEATON
Signature: [signature]
Date: Month 9 Day 4 Year 86

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Kip Nelson
Signature: [signature]
Date: Month 9 Day 4 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 in Item 19.
Printed/Typed Name: G. MUTTINI
Signature: [signature]
Date: Month Day Year

GENERATOR

TRANSPORTER

FACILITY

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.

Minnesota Form PQ-00371-01(10 84)

COPY 4: TSDF RETAIN

125 R 763
012008

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. MIG0000032275 — Manifest Document No. 99229

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
PROGRESSIVE BLASTING SYSTEMS
4201 Patterson, S.E., Grand Rapids, MI 49508

4. Generator's Phone ( 616 ) 957-0871

A. State Manifest Document Number: MI 0659229

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 SOLVENT, N.O.S. Flammable Liquid NA1993 | 002 | DM | 00110 | 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.

GENERATOR

Printed/Typed Name: William R. Kelly — Signature: William R Kelly — Date (Month Day Year): 09 27 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Ronald L. Cheyne — Signature: Ronald L Cheyne — Date (Month Day Year): 09 27 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: MURPHY — Signature: — Date (Month Day Year): 9 30 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

204 E T-50

PR 5110 Rev. 4/85

UJ8710

# WASTE DISPOSAL MANIFEST

STATE OF MICHIGAN — [X] Act 64 Waste (HAZARDOUS) — [ ] Act 136 Waste (OTHER) — MI 0003105

002439

## IDENTIFICATION

| Generator's Name | Primary Transporter's Name | Treatment, Storage or Disposal Facility |
|---|---|---|
| Progressive Blasting Service | Valley City Refuse Disposal, Inc. | American Chemical Service, Inc. |
| **Site Address** | **Transporter's Address** | **Facility Address** |
| 4201 Patterson, S.E.<br>Grand Rapids, MI 49508 | 2650 Thornwood, S.W.<br>Wyoming, MI 49509 | 420 S. Colfax<br>Griffith, IN 46319 |
| **Phone Number** | **Phone Number** | **Phone Number** |
| ( 616 ) 957-0871 | ( 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** |
| MIG 000 003 227 | 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 | 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 Solvents, NOS | Flammable Liquid | NA1993 | 07 | 2 | Dr | | X | | | 110 | 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 Jan Cook — Date Shipped MO. DAY YEAR: 10/13/82

## 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 Hemingway — Date(s) Received: 10/13/82

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 T Dumpe — [X] Accepted [ ] Rejected — Date Received: 10 15 82

Facility Site EPA I.D. Number: IND 016 360 265

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 204 F T-50 GRM 10/15/82

R 4896
Rev. 8/81

STATE OF MICHIGAN

# WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS) ☐ Act 136 Waste ☐ Other

MI 0226301

002438

## IDENTIFICATION

| Generator's Name | Primary Transporter's Name | Treatment, Storage or Disposal Facility |
|---|---|---|
| PROGressive Blasting Sys. | Valley City Refuse Disposal | AMERICAN Chemical Service |
| **Site Address** | **Transporter's Address** | **Facility Address** |
| 4201 Patterson S.E. Grand Rapids, Mi 49508 | 2640 Thornwood SW. Wyoming, Mi 49509 | 420 Colfax Griffith IND. 46319 |
| **Phone Number** | **Phone Number** | **Phone Number** |
| (616) 957-0871 | (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** |
| MIG000003227 | MID055855373 | 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 (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 Solvents N.O.S. | Flamable Liquid | NA-1993 | 07 | 3 | Dr. | | X | | | 165 | GAL | D001 |
| 2. | | | | | | | | | | | | | |
| 3. | | | | | | | | | | | | | |
| 4. | | | | | | | | | | | | | |
| 5. | | | | | | | | | | | | | |
| 6. | | | | | | | | | | | | | |

## COMMENTS

Include Safety precautions and special handling instructions.

Keep from sparks or fire

20

**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 Robert Figgleman — Date Shipped MO. DAY YEAR: 060282

## 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. 1 213

Subsequent Transporter Vehicle I.D. No's 218-6

Transporter Signature: ② Byte R. — Date(s) Received: 060282

Subsequent transporter(s) signature(s): ③ Ronald L. Cheyne — 060382

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] — ☒ Accepted ☐ Rejected — Date Received: 6 4 82

Facility Site EPA I.D. Number: IND016360265

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

STATE OF MICHIGAN

# WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS) ☐ Act 136 Waste (OTHER) MI 0003010

Rev. 3/81

006120

## IDENTIFICATION

| Generator's Name | Primary Transporter's Name | Treatment, Storage or Disposal Facility |
|---|---|---|
| Progressive Blasting | Valley City Disposal, Inc. | American Chemical Service, Inc. |
| Site Address: 4201 Patterson, Grand Rapids, MI 49508 | Transporters Address: 2650 Thornwood, S.W., Wyoming, MI 49509 | Facility Address: 420 S. Colfax, P.O. Box 190, Griffith, IN 46319 |
| Phone Number: (616) 957-0871 | Phone Number: (616) 538-8499 | Phone Number: (219) 924-4370 |
| Generator's Site EPA I.D. Number: MIG 000 003 227 | 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 Solvents, NOS | Flammable Liquid | 1993 | 08 | 1 | DR | | x | | | 55 | 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 Robert Tragleman (Progressive Blasting)

Date Shipped: MO. DAY YEAR 2 16 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. 1 640

Subsequent Transporter Vehicle I.D. No's:

Transporter Signature: ② Arnold Dykstra

Date(s) Received: 2 16 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: IND 016 360 265

☒ Accepted ☐ Rejected

Date Received: 02 21 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 TO204RT-50 GKM 2.24.83

STATE OF MICHIGAN

Rev. 8/81

# WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS) ☐ Act 136 Waste ☐ Other MI 0226317

006119

## IDENTIFICATION

| Generator's Name | Primary Transporter's Name | Treatment, Storage or Disposal Facility |
|---|---|---|
| Progressive Blasting Systems | Valley City Disposal, Inc. | American Chemical Service, Inc. |
| **Site Address** | **Transporters Address** | **Facility Address** |
| 4201 Patterson Ave., S.E.<br>Grand Rapids, Michigan 49508 | 2650 Thornwood, S.W.<br>Wyoming, Michigan 49509 | 420 S. Colfax, P.O. Box 190<br>Griffith, Indiana 46319 |
| **Phone Number** | **Phone Number** | **Phone Number** |
| (616) 957-0871 | (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** |
| MIG 000 003 227 | 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 SOLVENTS, NOIS | FLAMMABLE LIQUID | NA 1993 | 0 7 | 2 | DR | | X | | | 1 6 5 | GAL | D 0 0 1 |
| 2. | | | | | | | | | | | | | |
| 3. | | | | | | | | | | | | | |
| 4. | | | | | | | | | | | | | |
| 5. | | | | | | | | | | | | | |
| 6. | | | | | | | | | | | | | |

## COMMENTS

Include Safety precautions and special handling instructions.

KEEP FROM SPARKS OR FIRE.

**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 Jan D. Cook — Date Shipped MO. DAY YEAR: 11 29 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 H839910 — Transporter Signature ② Jack Puster — Date(s) Received: 11 29 83

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 — ☒ Accepted ☐ Rejected — Date Received: 11 30 83

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 To 204 R-T-50 GRM 11-30-83

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·1·6·0·0·0·0·0·3·2·2·7 | Manifest Document No. 5·9·1·9·3 | 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
PROGRESSIVE BLASTING SYSTEMS
4201 Patterson S.E., Grand Rapids, MI 49508

A. State Manifest Document Number INA 0159193

4. Generator's Phone (616) 957-0871

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

B. State Generator's ID

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
1420 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) 924-1377

| 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) | 12. Containers No. | Type | 13. Total Quantity | 14. Unit Wt/Vol. | K. Waste No. |
|---|---|---|---|---|---|
| a. X WASTE SOLVENT, N.O.S., Flammable Liquid, NA1993 | 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 |
|---|---|---|---|---|
| JAN D. MOURER | Jan D. Mourer | 11 | 03 | 87 |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| Arnold Dykstra | Arnold Dykstra | 11 | 03 | 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 |
|---|---|---|---|---|
| HARROLD F. SCHMIDT | Harold F. Schmidt | 11 | 12 | 87 |

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865 2-2012 T-50 11/13/87

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

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 0159193

012549

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 G 0 0 0 0 0 3 2 2 7 | Manifest Document No. 6 6 9 9 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
Progressive Blasting
4201 Patterson SE, Grand Rapids, MI 49508
4. Generator's Phone ( 616 ) 957-0871

A. State Manifest Document Number: INA 0266996
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 Solvent, N.O.S. Flammable Liquid NA1993 | 1 | DM | 55 | 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 presents 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: Dan Vachon | Signature: Dan Vachon | Date: Month 04 Day 04 Year 89

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Roger Norton | Signature: Roger Norton | 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 KULNICK | Signature: Steve Kulnick | Date: 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 0266996

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY

2041230 4/13

0016818

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.: MID990760811 — Manifest Document No.: 00001

2. Page 1 of 1

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

3. Generator's Name and Mailing Address:
PROGRESSIVE DYNAMICS, INC.
507 INDUSTRIAL ROAD
MARSHALL, MI 49068

4. Generator's Phone (616) 781-4241

A. State Manifest Document Number: MI 0523996

B. State Generator's ID:

5. Transporter 1 Company Name: THOMAS SOLVENT CO. OF MUSKEGON

6. US EPA ID Number: MID017274093

C. State Transporter's ID:

D. Transporter's Phone: 616-777-2619

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
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 XYLENE N.O.S. & WASTE PAINT RELATED MATERIAL FLAMMABLE 07 UN1993 | 3 | DM | 160 | G | F003 | 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. GENERATO[illegible]RTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipp[illegible]nd are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway [illegible]licable international and national governmental regulations, including applicable state regulations.

[illegible]OOD — Signature: X Robin Wood — Date: Month Day Year

[illegible]t of Receipt of Materials — Signature: Dennis L. Jackson — Date: Month Day Year: 6/18/85

[illegible]ceipt of Materials — Signature — Date: Month Day Year

[illegible]ardous materials covered by this manifest except as noted in

Signature: Frank Price — Date: Month Day Year: 6 27 85

PR 5110 Rev 7/84

[illegible]PY 125 FT-63

038705

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 [illegible]ER DAY.

GENERATOR

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. MI0010652593 Manifest Document No. 000002

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
PROGRESSIVE DYNAMICS, INC.
507 INDUSTRIAL ROAD
MARSHALL, MI 49068

4. Generator's Phone ( 616 ) 781-4241

A. State Manifest Document Number: MI 0523998

B. State Generator's ID:

5. Transporter 1 Company Name: THOMAS SOLVENT CO. OF MUSKEGON

6. US EPA ID Number: MID017274093

C. State Transporter's ID: H8305-14

D. Transporter's Phone: 616-777-2619

7. Transporter 2 Company Name: VALLEY CITY REFUSE DISPOSAL, INC.

8. US EPA ID Number: MID055855373

E. State Transporter's ID:

F. Transporter's Phone: (616) 538-8499

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICES
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. WASTE XYLENE N.O.S. & WASTE PAINT RELATED MATERIAL FLAMMABLE 07 UN1993 | X | 002 | DM | 110 | G | F003 | 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: LARRY WOODS
Signature: Larry Woods
Date: Month 11 Day 07 Year 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Neale F Helsel
Signature: Neale F Helsel
Date: Month 11 Day 07 Year 85

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name: Ronald L. Cheyne
Signature: Ronald L Cheyne
Date: Month 11 Day 07 Year 85

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 11 Day 08 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 (3-84)

PR 5110 Rev 7/84

TSDF COPY 204ET-50

038107

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.: MI0006522593 — Manifest Document No.: 00004
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address:
PROGRESSIVE DYNAMICS, INC.
507 INDUSTRIAL ROAD
MARSHALL, MI

4. Generator's Phone ( 616 ) 781-4241

A. State Manifest Document Number: MI 0759765
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: MID055855373

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

9. Designated Facility Name and Site Address:
AMERICAN CHEMICAL SERVICES
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 | I. Waste No. | N/H |
|---|---|---|---|---|---|---|
| a. WASTE XYLENE N.O.S. & WASTE PAINT RELATED MATERIAL FLAMMABLE 07 UN1993 | 3 | DM | 165 | G | 0003 | 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: Michael P Walbeck — Signature: Michael P Walbeck — Date (Month Day Year): 10 31 86

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jim Reitsma — Signature: Jim Reitsma — Date (Month Day Year): 10 31 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 F. Schmidt — Signature: Harrold F. Schmidt — Date (Month Day Year): 10 31 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

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011959

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. MID006522593 Manifest Document No. 00003

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
PROGRESSIVE DYNAMICS, INC.
507 INDUSTRIAL ROAD
MARSHALL, MI
4. Generator's Phone ( 616 ) 781-4241

A. State Manifest Document Number: MI 0501830

B. State Generator's ID:

5. Transporter 1 Company Name: THOMAS SOLVENT CO. OF MUSKEGON
6. US EPA ID Number: MID011727140913

C. State Transporter's ID:
D. Transporter's Phone: 616-777-2619

7. Transporter 2 Company Name: VALLEY CITY REFUSE DISPOSAL, INC.
8. US EPA ID Number: MID055885513 7 3

E. State Transporter's ID:
F. Transporter's Phone: (616) 538-8499

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICES
420 S. COLFAX
P.O. BOX 190
GRIFFITH, IN 46319
10. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER).
11. US EPA ID Number: IMD016360265

G. State 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 | I. Waste No. | N/H |
|---|---|---|---|---|---|---|---|---|
| a. | X | WASTE XYLENE N.O.S. & WASTE PAINT RELATED MATERIAL FLAMMABLE 07 UN1993 | 12 | DM | 110 | G | 0093 | 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) |
|---|---|---|
| Michael P Wallbeck | Michael P Wallbeck | 3 5 86 |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| Conrad R Nelson Jr | Conrad R Nelson Jr | 3 5 86 |

18. Transporter 2 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| Ronald L. Cheyne | Ronald L Cheyne | |

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 | 3 7 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 (3-84)

PR 5110 Rev. 7/84

TSDF COPY

204 K T-50 ✓

011958

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.: M100065225930 — Manifest Document No.: 00005
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law

3. Generator's Name: PROGRESSIVE DYNAMICS, INC.
507 INDUSTRIAL ROAD
MARSHALL, MI 49068
4. Generator's Phone: 616 781-4241

A. State Manifest Document Number: IN035342
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: M100558553 73
7. Transporter 2 Company Name:
8. US EPA ID Number:
9. Designated Facility Name and Site Address: AMERICAN CHEMICAL SERVICES
420 S. COLFAX
P.O. BOX 190
GRIFFITH, IN 46319
10. US EPA ID Number: IN001636026 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 | Waste No. |
|---|---|---|---|---|---|
| a. WASTE XYLENE N.O.S. & WASTE PAINT RELATED MATERIAL FLAMMABLE 07 UN1993 | 3 | DM | 165 | G | [illegible] |
| b. WASTE XYLENE N.O.S. & WASTE PAINT RELATED MATERIAL FLAMMABLE 07 UN1993 | 1 | DR | 55 | G | [illegible] |
| 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.

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Printed/Typed Name: [illegible] — Signature: [illegible] — 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: HARROLD F. SCHMIDT — Signature: Harold F. Schmidt — Month Day Year: 08 24 87

GENERATOR / TRANSPORTER / FACILITY

IN035342

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

T.S.D. DETACH AND RETAIN THIS COPY

012548

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
PROGRESSIVE DYNAMICS, INC.
507 INDUSTRIAL ROAD
MARSHALL, MI 49068

4. Generator's Phone ( 616-781-4241

A. State Manifest Document Number
IN 035345

B. State Generator's ID

5. Transporter 1 Company Name
VALLEY CITY REFUSE DISPOSAL, INC.

6. US EPA ID Number

C. State Transporter's ID

D. Transporter's Phone (616)538-8439

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
P.O. BOX 190
GRIFFITH, IN 46319

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. WASTE XYLENE N.O.S. & WASTE PAINT RELATED MATERIAL FLAMMABLE 07 UN1993 | | | | | |
| 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 presence 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 | 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 Year

IN 035345

EPA Form 8700-22A (Rev. 11-85)

UHWM 2/LP2

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0015359

# 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 | ILD000810549 | Protectoseal 225 Foster Bensenville Il 60106 595 0800 | |
| TRANSPORTER # 1 | ILD045695715 | H Roskin 4710 W Roosevelt Chgo Il 60650 2617236 | |
| TRANSPORTER # 2 (If required) | | | |
| TSDF TREATMENT STORAGE OR DISPOSAL FACILITY | Ind016360265 | American Chemical Griffith In 46319 768 3400 | 8/3/83 |
| 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) |
|---|---|---|---|---|---|---|---|---|---|---|
| 5 | | F001 | Trichlor | 1710 | | none | 55g | 300g | | |

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

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TSDF COPY To 120 RT-83 ERH 8-10-83

CJ5304

# 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 | | Protectoseal 225 Foster Bensenville Il 60106 595 0800 | |
| TRANSPORTER # 1 | ILD045695718 | H Roskin 4710 Roosevelt Chgo Il 60650 261 7236 | |
| TRANSPORTER # 2 (If required) | | | |
| TSDF TREATMENT STORAGE OR DIS— POSAL FACILITY | IND016360265 | Amer Chem Serv Griffith In 46319 322 768 3400 | 11/17/83 |
| 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) |
|---|---|---|---|---|---|---|---|---|---|---|
| 4dr | | F001 | Trichlor CRM-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

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TSDF COPY

To 118RT-636RM 12.7.83

CJ5365

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.: N.I.D 9806 146.22 — Manifest Document No.: 0000.1
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: PT Components, 120 N. Broadway - Milwaukee, WI 53202
4. Generator's Phone (414) 272-1100

A. State Manifest Document Number: INA 0126412
B. State Generator's ID:
C. State Transporter's ID: 11536
D. Transporter's Phone: (410) 764-7005
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: CBC Transport
6. Use EPA ID Number: N.I.D 047259 2.9.8
7. Transporter 2 Company Name:
8. Use EPA ID Number:
9. Designated Facility Name and Site Address: American Chemical Service, 420 S. Colfax - Po Box 190, 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. ~~Non Hazardous Special Waste (Liquid)~~ | ~~[illegible]~~ | ~~AM~~ | ~~00025~~ | ~~G~~ | ~~N/A~~ |
| b. Waste Flammable Liquid, N.O.S. UN1993 (Flammable Liquid) | 001 | DA | 00025 | G | D001 |
| c. | | | | | |
| d. | | | | | |

J. Additional Descriptions for Materials Listed Above: ~~a. (Waste Solvent)~~ b. (Waste Solvent)
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: Roger Krick — Signature: Roger Krick — Date: Month 06 Day 27 Year 87

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Bruce Benoit Envir Tech — Signature: [signature] — Date: Month 06 Day 29 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: Harrold F. Schmidt — Signature: [signature] — Date: Month 06 Day 30 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 0126412

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

EYM

1-204R T50 B

012740

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. WIDIBPBVI7KR — Manifest Document No. 08PPP
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law

3. Generator's Name: PT COMPONENTS - STEELS DIV
120 N BROADWAY MILWAUKEE WI 53202
4. Generator's Phone (414) 272-1100

A. State Manifest Document Number: IN 078200
B. State Generator's ID:

5. Transporter 1 Company Name: CBC TRANSPORT — 6. US EPA ID Number: WIDPH17KBRBB
C. State Transporter's ID: 11526
D. Transporter's Phone: (414) 764-7755

7. Transporter 2 Company Name: HAZARDOUS WASTE TRANSPORT INC — 8. US EPA ID Number: WIDPBRR19BRA
E. State Transporter's ID: 11685
F. Transporter's Phone: (414) 762-2511

9. Designated Facility Name and Site Address: AMERICAN CHEMICAL SERVICE
420 S. COLFAX AVE.
GRIFFITH, IN 46319 — 10. US EPA ID Number: IND064664665
G. State Facility's ID:
H. Facility's Phone: (219) 838-6550

| 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 FLAMM LIQ ETHYL~~ RQ HAZARDOUS WASTE LIQUID N.O.S. ORM-E NA9189 | 007 | DM | 00385 | G | F003 F005 |
| b. ~~WASTE FLAMM LIQ PAINT THINNER~~ RQ HAZARDOUS WASTE LIQUID, N.O.S. ORM-E, NA9189 | 00P | DM | 00055 | G | F002 |
| 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 |
|---|---|---|---|---|
| T.J. BUYACSKI | | 01 | 03 | 86 |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials — Date

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| [illegible] | | | | |

18. Transporter 2 Acknowledgement of Receipt of Materials — Date

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| James R. Ostwald | James R. Ostwald | 01 | 03 | 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 | Signature | Month | Day | Year |
|---|---|---|---|---|
| APRIL OF [illegible] | | FEB | 11 | 86 |

IN 078200

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

7a - 204R T-50 3/3/88
6b - 204F T-50 3/3/88

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00[illegible]37

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. IND982643272 | Manifest Document No. 08901
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
PULSE, INC.
4600 Wyland Drive
Elkhart, Indiana 46516
4. Generator's Phone ( 219 ) 293-1928

A. State Manifest Document Number: INA 0322981
B. State Generator's ID:

5. Transporter 1 Company Name: Mr. Frank, Inc.
6. Use EPA ID Number: ILD069506160
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, Indiana 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. | 12. Containers Type | 13. Total Quantity | 14. Unit Wt/Vol. | I. Waste No. |
|---|---|---|---|---|---|
| a. Waste Acetone, Flammable Liquid UN1090 | 040 | DM | 02200 | 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 | Signature | Date Month | Day | Year |
|---|---|---|---|---|
| Pulse, Inc. David M. Griel | David M. Griel | 01 | 19 | 89 |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date Month | Day | Year |
|---|---|---|---|---|
| David Voss | David Voss | 01 | 19 | 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 |
|---|---|---|---|---|
| Whitaker A | | 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.

INA 0322981

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

39-204 TCT 50 1/84
1-25 CAL-204 R T50 1/28/39

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Space Burial Acceptance 3/1/89 Page 2

0016814

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.: IND982643272 — 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: Pulse, Inc. 4600 Wyland Drive Elkhart, Indiana 46516
4. Generator's Phone: (219) 293-1923

A. State Manifest Document Number: INA 0322982
B. State Generator's ID:

5. Transporter 1 Company Name: Mr. Frank, Inc
6. Use EPA ID Number: L.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 Service 420 South Colfax Avenue Griffith, Indiana
10. Use EPA ID Number: I.N.D.0.1.6.3.6.0.2.8.5
G. State Facility's ID: 9180390002
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 Acetone, Flammable Liquid UN1090 | 003 | DM | 2.0.4.4.0 | 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: Pulse, Inc David M. Griel — Signature: David M. Griel — Date: Month 04 Day 11 Year 89

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: [illegible] — Signature: [illegible] — Date: Month 04 Day 11 Year 89

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

19. Discrepancy Indication Space
8-MARINE SCALE 3/6/90 010881
121FCT63 4/14 — TO 8 DRUMS 4/28/89

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: [illegible] — Date: Month 04 Day 12 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 0322982

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

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0016817

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.: IND 98264 3272
Manifest Document No.: 09903
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.

3. Generator's Name and Mailing Address
Pulse, Inc
4600 Wyland Dr.
Elkhart, IN 46516
4. Generator's Phone (219) 293-1928

A. State Manifest Document Number: INA 0322983
B. State Generator's ID:

5. Transporter 1 Company Name: Mr. Frank Inc
6. Use EPA ID Number: ILD 069506160
C. State Transporter's ID: 0079
D. Transporter's Phone: 312-596-33

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
American Chemical Service
420 S. Colfax Ave P.O. Box 190
Griffith, IN
10. Use EPA ID Number: IND 016360265
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 Acetone, Flammable Liquid UN 1090 | 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 h 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 f 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: Pulse, Inc David M. Griel
Signature: David M. Griel
Month 06 Day 28 Y

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jack McCleverty
Signature: [signature]
Month 06 Day 28 Y

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

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 Kuivick
Signature: Steve Kuivick
Month 06 Day 27 Y

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 120TCT637/5

0016815

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.: IND982643272 — Manifest Document No.: 039-04
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: Pulse, Inc, 4600 Wyland Drive, Elkhart, IN 46516
4. Generator's Phone (219) 293-1928
5. Transporter 1 Company Name: Mr. Frank, Inc.
6. Use EPA ID Number: I.L.D. 984775049
7. Transporter 2 Company Name:
8. Use EPA ID Number:
9. Designated Facility Name and Site Address: American Chemical Service, 420 S. Colfax Ave, P.O. Box 190, Griffith, IN 46319
10. Use EPA ID Number: IND01636026 5

A. State Manifest Document Number: INA 0322984
B. State Generator's ID:
C. State Transporter's ID: 0079
D. Transporter's Phone: 312-~~596-~~ 720-0700
E. State Transporter's ID:
F. Transporter's Phone:
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. UN 1090 Waste Acetone, Flammable Liquid | 006 | DM | 00330 | 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: Pulse, Inc. David M. Griel — Signature: David M. Griel — Date: Month 09 Day 15 Year 89

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jack McCleverty — Signature: [signature] — Date: Month 09 Day 15 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: Steve Dominick — Signature: [signature] — Date: 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.

INA 0322984

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

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0016816

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.: I·N·D·1·8·2·6·4·3·2·7·2
Manifest Document No.: 0·1·2·0·1
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
Pulse, Inc
4600 Wyland Dr Elkhart, In 46516

A. State Manifest Document Number: INA 0322985
B. State Generator's ID:

4. Generator's Phone (219) 293-1928

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 Service
420 S Colfax Ave P.O. Box 10
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: 9130390002
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 Acetone, Flammable Liquid UN1090 (F003) | 0·0·3 | D·M | 0·0·1·6·5 | 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: Pulse, Inc David M. Griel
Signature: David M Griel
Month 01 Day 25 Year 90

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JACK McCLEVERTY
Signature: [signature]
Month 01 Day 25 Year 90

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: Whitaker A
Signature: [signature]
Month 1 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 0322985

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

**COPY 5. TSD COPY**

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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.: IND982643272 — Manifest Document No.: 09002
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: PULSE INC, 4600 WILLAND DR, ELKHART IN. 46516
4. Generator's Phone: 219 293-1928

A. State Manifest Document Number: INA 0322986
B. State Generator's ID:

5. Transporter 1 Company Name: MR FRANK INC.
6. Use EPA ID Number: ILD984775049
C. State Transporter's ID: 0019
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, 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. RQ WASTE ACETONE FLAMMABLE LIQUID UN1090 (F003) | 007 | DM | 00385 | 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.

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Printed/Typed Name: DAVID M GRIEL — Signature: [signature] — Date: Month 06 Day 11 Year 90

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: CARL E MILBURN — Signature: [signature] — Date: Month 06 Day 11 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: Whitaker A — Signature: [signature] — Month Day Year 6/13/90

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 0322986

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

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0018203

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 G 0 0 0 0 2 2 9 6 8
Manifest Document No.: 5 5 9 0 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
Pumsill Business Forms
341 Ellsworth SW, Grand Rapids MI 49503
4. Generator's Phone ( 616 ) 459-3411

A. State Manifest Document Number: INA 0355900
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 Alcohol N.O.S. Flammable Liquid UN1987 (D001) | 005 | D M | 275 | 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 government regulations.

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GENERATOR

Printed/Typed Name: TED KRYGER
Signature:
Date: Month 10 Day 12 Year 89

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JIM REITSMA
Signature:
Date: Month 10 Day 13 Year 89

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

FACILITY

19 Discrepancy Indication Space
20 TONS 10/16

20 Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: WHITAKER
Signature:
Date: Month 10 Day 13 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.

INA0355900

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

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0016813

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 E 2 0 0 0 0 0 2 7 5 | 8 9 4 4 2 | | |

3. Generator's Name and Mailing Address
PYRAMID INDUSTRIAL STRIPPING/MICHIGAN DNR
350 Ottawa NW, Grand Rapids, MI 49503
4. Generator's Phone ( 616 ) 456-5071

A. State Manifest Document Number: INA 0189442
B. State Generator's ID:
C. State Transporter's ID:
D. Transporter's Phone: (616) 235-1500
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. Use EPA ID Number: M I D 9 8 1 9 5 6 0 6 3
7. Transporter 2 Company Name:
8. Use EPA ID Number:
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

| 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 PAINT RELATED MATERIAL Flammable Liquid NA1263 | 0 0 1 | T T | 880 | 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.

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| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| DALE DEKRAKER | Dale DeKraker | 02 | 22 | 88 |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Month | Day | Year |
|---|---|---|---|---|
| Jim Grunwell | Jim Grunwell | 02 | 22 | 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 |
|---|---|---|---|---|
| GRMURPHY | | 02 | 23 | 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 0189442

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

206K TSD

001958

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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.

3. Generator's Name and Mailing Address
PYROMATION
5211 Industrial Road Fort Wayne, IN 46825
4. Generator's Phone ( )

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

5. Transporter 1 Company Name: Thomas Solvent Company
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 S. Colfax
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) | HM | 12. Containers No. | Type | 13. Total Quantity | 14. Unit Wt/Vol | I. Waste No. |
|---|---|---|---|---|---|---|---|
| a. | WASTE 1-1-1 TRICHLOROETHANE ORM-A UN-2831 | | 1 | dr | 55 | gl | 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 governmental regulations.

| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| ROBERT T SCOTT | | 1 20 86 |

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

| Printed/Typed Name | Signature | Date (Month Day Year) |
|---|---|---|
| JACK G. BENNETT | | 2 20 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) |
|---|---|---|
| WHITAKER | | 2 21 86 |

Style F15-6 Labelmaster, Chicago, IL 60646 (312) 478-0900

EPA Form 8700-22 (3-84)

IAKT-63

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