US EPA RECORDS CENTER REGION 5
460609

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.) OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. C. E. G. . . . . 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
P.A.R. MACHINE MFG. INC.
1731 COMMERCIAL DRIVE
SCHERERVILLE IN 46375
4. Generator's Phone (219) 865 - 6710

A. State Manifest Document Number: INA 0335055
B. State Generator's ID:

5. Transporter 1 Company Name: P.A.R. MACHINE MFG. INC
6. Use EPA ID Number: C. E. G. . . . . .
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. CLAY AVE
GRIFFITH IN 46319 0190
10. Use EPA ID Number: IND 0 0 5 4 6 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. FLAMMABLE LIQUID N.O.S. FLAMMABLE UN-1993	0.01	DM	00055	1	F003
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: WASTE ACETONE
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: Roger K. Carlson — Signature: Roger K. Carlson — Date: Month 4 Day 28 Year 89

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: John P. Wilsens — Signature: John P. Wilsens — Date: Month 4 Day 28 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 5 Day 1 Year 89

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

COPY 5. TSD COPY 126CT63 5/4

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.

INA0335055

0.016800

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER

09

A05480710

TO:		FROM:	
T/S/D FACILITY	AMERICAN CHEMICAL SERVICE	Generator	R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.	IND 016360265	E.P.A. ID Code No.	IND 005480710
Address	P.O. Box 190	Address	OLD ROUTE 30 WEST
Destination	Griffith, Indiana 46319	Origin	WARSAW, INDIANA 46580
Phone	(312)768-3400	Phone	219-267-8268

HAZARDOUS WASTE

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
5,000 Gals.	Waste Ink	Flammable Liq.	UN1210	F005		Flammable Liq.

PLACARDS REQUIRED FLAMMABLE

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

$_____ Per _____

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

(Signature of Consignor)

FREIGHT CHARGES PREPAID ☒ COLLECT ☐

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

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No. IND 005480710
Address OLD ROUTE 30 WEST
Destination WARSAW, INDIANA 46580

EMERGENCY RESPONSE INFORMATION

CONTACT Name MAX FAULKNER
Phone 219-267-8268

National Response Center 1-800-424-8802 in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date _____

TRANSPORTER #1 MR. FRANK INC. E.P.A. ID No. ILD 069506160
Address 201 West 155th Street
City SOUTH HOLLAND State IL Zip 60473 Phone (312)596-3377

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature _____ Date 12-11-80

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY TO 143R 12/11/80 JMM T-63

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

T/S/D FACILITY Signature _____ Date 12/11/80

T/S/D F COPY

00040336

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER: TB 11

TO: T/S/D FACILITY: AMERICAN CHEMICAL SERVICE	FROM: Generator: R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.: IRD 0616360265	E.P.A. ID Code No.: IND 005450710
Address: P.O. Box 190	Address: OLD ROUTE 30 WEST
Destination: Griffith, IN 46319	Origin: WARSAW, INDIANA 46580
Phone: IRK (312-768-3400)	Phone: 219-267-5238

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
5,000						
Gals.	Waste Ink	Flammable Liquid	UN1210	F005		Flammable Liquid
	Trailer # 0079023					
	Tractor # 41 - 233					

PLACARDS REQUIRED: Flammable

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

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

FREIGHT CHARGES: PREPAID [X] COLLECT [ ]

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

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY: R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.: IND 005450710
Address: OLD ROUTE 30 WEST
Destination: WARSAW, INDIANA 46580

EMERGENCY RESPONSE INFORMATION

CONTACT Name: MAX FAULKNER
Phone: 219-267-5238

National Response Center: 1-800-424-8802 in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature: J. F. Wade Date: 12-19-80

TRANSPORTER #1: Mr. Frank Inc. E.P.A. ID No.: ILD069506160
Address: 201 West 155th Street
City: South Holland State: IL Zip: 60473 Phone: (312) 596-3377

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 1 Signature: [illegible] Date: 12-19-80

TRANSPORTER #2: / E.P.A. ID No.:
Address:
City: State: Zip: Phone:

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 2 Signature: Date:

TREATMENT/STORAGE/DISPOSAL FACILITY: To EAST ACT 12/19/80 SPM T-50

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.
T/S/D FACILITY Signature: [illegible] Date: 12.19.80

T/S/D F COPY

HAZARDOUS WASTE

HAZARDOUS WASTE

0000337

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER: 12

TO:		FROM:	
T/S/D FACILITY	AMERICAN CHEMICAL SERVICE	Generator	R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.	IND 016360265	E.P.A. ID Code No.	IND 005420710
Address	P.O. Box 190	Address	OLD ROUTE 30 WEST
Destination	Griffith, IN 46319	Origin	WARSAW, INDIANA 46580
Phone	(312) 768-3400	Phone	219-267-5298

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
5,000 Gals.	Waste Ink	Flammable Liquid	UN1210	F005		Flammable Liquid

PLACARDS REQUIRED: FLAMMABLE

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

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

FREIGHT CHARGES: PREPAID ☒ COLLECT ☐

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

HAZARDOUS WASTE

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY: R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.: IND 005420710
Address: OLD ROUTE 30 WEST
Destination: WARSAW, INDIANA 46580

EMERGENCY RESPONSE INFORMATION

CONTACT Name: MAX FAULKNER
Phone: 219-267-5298

National Response Center: 1-800-424-8802 in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date 1-7-91

TRANSPORTER #1 Mr. Frank Inc. E.P.A. ID No. ILD 069506160
Address 201 W. 155th Street
City South Holland State IL Zip 60473 Phone (312) 596-3377

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 1 Signature _____ Date 1-7-91

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY TO WEST AGIT R 1/8/91 T-50

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.
T/S/D FACILITY Signature _____ Date 1-7-91

T/S/D F COPY

001384

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER

[illegible] 13

TO: T/S/D FACILITY	AMERICAN CHEMICAL SERVICE	FROM: Generator	P.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.	IND 0516360265	E.P.A. ID Code No.	IND 005480718
Address	P.O. BOX 190	Address	OLD ROUTE 30 WEST
Destination	Griffith, IN 45319	Origin	WARSAW, INDIANA 46580
Phone	312-768-3400	Phone	219-267-5258

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
4,000 Gals.	Waste - Ink - Bulk	Flammable Liquid	UN 1210	F005		Flammable Liquid
5,000						

PLACARDS REQUIRED FLAMMABLE

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

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

FREIGHT CHARGES PREPAID ☒ COLLECT ☐

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

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY	P.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.	IND 005450718
Address	OLD ROUTE 30 WEST
Destination	WARSAW, INDIANA 46580

EMERGENCY RESPONSE INFORMATION

CONTACT Name BRAX FAULKNER
Phone 219-267-5258

National Response Center 1-800-424-8802
in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date 1/7/81

TRANSPORTER #1 Mr. Frank Inc. E.P.A. ID No. ILD069506160
Address 201 West 155th Street
City South Holland State IL Zip 60473 Phone 312-596-3377

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 1 Signature _____ Date 1-7-81

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY Pumped to East Acre 1/9/81 T-50

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.
T/S/D FACILITY Signature _____ Date 1/9/81

T/S/D F COPY

HAZARDOUS WASTE

HAZARDOUS WASTE

001385

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

Is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER

19

TO: T/S/D FACILITY: American Chemical Service Inc.	FROM: Generator: R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.: IND 0616360265	E.P.A. ID Code No.: IND 005480710
Address: p.o. box 190	Address: OLD ROUTE 30 WEST
Destination: Griffith, IN 46319	Origin: WARSAW, INDIANA 46580
Phone: 312-768-3400	Phone: 219-267-3293

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
5,000 Gal.s	Waste Ink - Bulk	Flammable Liquid	UN1210	F005		Flammable Liquid

PLACARDS REQUIRED FLAMMABLE

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

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

(Signature of Consignor)

FREIGHT CHARGES PREPAID ☒ COLLECT ☐

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

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY: ~~R.R. DONNELLEY & SONS CO.~~
E.P.A. ID Code No.: ~~IND 005480710~~
Address: ~~OLD ROUTE 30 WEST~~
Destination: ~~WARSAW, INDIANA 46580~~

EMERGENCY RESPONSE INFORMATION

CONTACT Name: ~~MAX FAULKNER~~
Phone: ~~219-267-3293~~

National Response Center 1-800-424-8802
in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date _____

TRANSPORTER #1 Mr. Frank Inc. E.P.A. ID No. ILD069506160
Address 201 West 155th St.
City South Holland State IL Zip 60473 Phone 312-596-3377

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature _____ Date _____

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY To WEST ACIT 3/16/81 T-50 Jim Mugh

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

T/S/D FACILITY X Signature _____ Date 3-11-81

T/S/D F COPY

HAZARDOUS WASTE

HAZARDOUS WASTE

001386

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

Is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER: 23

TO: T/S/D FACILITY	AMERICAN CHEMICAL SERVICE INC.	FROM: Generator	R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.	IND 0616360255	E.P.A. ID Code No.	IND 005480710
Address	P.O. BOX 190	Address	OLD ROUTE 30 WEST
Destination	GRIFFITH, INDIANA 46319	Origin	WARSAW, INDIANA 46580
Phone	312-768-3400	Phone	219-267-9298

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
5,000 Gals.	Waste Ink - Bulk	Flammable Liquid	UN 1210	F005		Flammable Liquid

PLACARDS REQUIRED: FLAMMABLE

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

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

FREIGHT CHARGES: PREPAID ☐ COLLECT ☐

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

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY: R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.: IND 005480710
Address: OLD ROUTE 30 WEST
Destination: WARSAW, INDIANA 46580

EMERGENCY RESPONSE INFORMATION

CONTACT Name: MAX FAULKNER
Phone: 219-267-9298

National Response Center: 1-800-424-8802 in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date _____

TRANSPORTER #1 Mr. Frank Inc. E.P.A. ID No. ILD 069506160
Address 201 West 155th St.
City South Holland State IL Zip 60473 Phone 312-596-3377

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature _____ Date _____

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY TO EAST 4/30/81 T-50 9 pm

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

T/S/D FACILITY Signature _____ Date _____

T/S/D F COPY

HAZARDOUS WASTE

HAZARDOUS WASTE

001388

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

Is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER: 25

TO: T/S/D FACILITY	American Chemical Service Inc.	FROM: Generator	R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.	IND 0616360265	E.P.A. ID Code No.	IND005480710
Address	P.O. Box 199	Address	OLD ROUTE 30 WEST
Destination	Griffith, IN	Origin	WARSAW, INDIANA 46580
Phone	312-758-3400	Phone	219-267-3258

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
4,500 Gals.	Waste Ink - Bulk	Flammable Liquids	UN1210	F005		Flammable Liquid

PLACARDS REQUIRED: Flammable Liquid

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

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

FREIGHT CHARGES: PREPAID ☑ COLLECT ☐

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

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY: R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.: IND 005480710
Address: OLD ROUTE 30 WEST
Destination: WARSAW, INDIANA 46580

EMERGENCY RESPONSE INFORMATION

CONTACT Name: MAX FAULKNER
Phone: 219-267-3258

National Response Center: 1-800-424-8802 in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date _____

TRANSPORTER #1 Mr. Frank Inc. E.P.A. ID No. ILD 069506160
Address 201 West 155th St.
City South Holland State IL Zip 60473 Phone 312-596-3377
Transporter No. 1 Signature _____ This is to certify acceptance of the hazardous waste shipment. Date 5-26-81

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____
Transporter No. 2 Signature _____ This is to certify acceptance of the hazardous waste shipment. Date 5/26/81

TREATMENT/STORAGE/DISPOSAL FACILITY: TO EAST AGIT 5/26/81 T-50 9m
T/S/D FACILITY Signature _____ This is to certify acceptance of the hazardous waste for treatment, storage, or disposal. Date 5/26/81

T/S/D F COPY

HAZARDOUS WASTE

HAZARDOUS WASTE

001387

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER: ND 28

TO: T/S/D FACILITY	American Chemical Service Inc.	FROM: Generator	R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.	IND 051636023[illegible]	E.P.A. ID Code No.	IND 005480710
Address	420 S. Colfax Ave.	Address	OLD ROUTE 30 WEST
Destination	Griffith, IN 46319	Origin	WARSAW, INDIANA 46580
Phone	219-924-4370	Phone	219-267-5238

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
5,000 Gals.	Waste Ink - Bulk	Flammable Liquid	UN1210	F005		Flammable Liquid

PLACARDS REQUIRED: Flammable

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

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

_____ (Signature of Consignor)

FREIGHT CHARGES: PREPAID ☒ COLLECT ☐

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

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY: ~~R.R. DONNELLEY & SONS CO.~~
E.P.A. ID Code No.: ~~IND 005480710~~
Address: ~~OLD ROUTE 30 WEST~~
Destination: ~~WARSAW, INDIANA 46580~~

EMERGENCY RESPONSE INFORMATION

CONTACT Name: ~~MAX FAULKNER~~
Phone: ~~219-267-5238~~

National Response Center: 1-800-424-8802 in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date _____

TRANSPORTER #1 Municipal Equipment Services Co. E.P.A. ID No. IND 078917851
Address P.O. Box 427
City Wanatah State IN Zip 46390 Phone 219-733-2551

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 1 Signature _____ Date 6-1-91

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE DISPOSAL FACILITY To EAST ACRE T-50 6/5/91 JPM

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.
T/S/D FACILITY Signature _____ Date 6/5/91

T/S/D F COPY

HAZARDOUS WASTE

HAZARDOUS WASTE

001389

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER: [illegible] 29

TO:	FROM:
T/S/D FACILITY: American Chemical Service Inc.	Generator: R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.: IND 064350265	E.P.A. ID Code No.: IND 005480710
Address: 420 S. Colfax Ave.	Address: OLD ROUTE 30 WEST
Destination: Griffith, IN 46319	Origin: WARSAW, INDIANA 46580
Phone: 219-924-4370	Phone: 219-267-3255

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
5,000 Gals.	Waste Ink - Bulk	Flammable Liquid	UN1210	F005		Flammable Liquid

PLACARDS REQUIRED: Flammable

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

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

FREIGHT CHARGES: PREPAID ☐ COLLECT ☐

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

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY: ~~R.R. DONNELLEY & SONS CO.~~
E.P.A. ID Code No.: ~~IND 005480710~~
Address: ~~OLD ROUTE 30 WEST~~
Destination: ~~WARSAW, INDIANA 46580~~

EMERGENCY RESPONSE INFORMATION

CONTACT Name: ~~MAX FAULKNER~~
Phone: ~~219-267-3255~~

National Response Center: 1-800-424-8802 in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date _____

TRANSPORTER #1: Mr. Frank Inc. E.P.A. ID No.: ILD 069506160
Address: 201 West 155th St.
City: South Holland State: IL Zip: 60473 Phone: 312-596-3377

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 1 Signature _____ Date _____

TRANSPORTER #2: _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY: TO WEST AGIT T-50 6/23/81

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.
T/S/D FACILITY Signature _____ Date 6/23/81

T/S/D F COPY

REV. 10/80

001391

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER

[illegible] 30

TO:		FROM:	
T/S/D FACILITY	American Chemical Service	Generator	R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.	IND 0616360265	E.P.A. ID Code No.	IND 005480710
Address	420 S. Colfax Ave	Address	OLD ROUTE 30 WEST
Destination	Griffith, Ind 46319	Origin	WARSAW, INDIANA 46580
Phone	219-924-4370	Phone	219-267-5238

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz.Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
5,000 Gals.	Waste Ink - Bulk	Flammable Liquid	UN1210	F005		Flammable Liquid

PLACARDS REQUIRED Flammable

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

$_____ Per _____

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

_____ (Signature of Consignor)

FREIGHT CHARGES PREPAID ☐ COLLECT ☐

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

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No. IND 005480710
Address OLD ROUTE 30 WEST
Destination WARSAW, INDIANA 46580

EMERGENCY RESPONSE INFORMATION

CONTACT Name Max Faulkner
Phone 219-267-5243

National Response Center 1-800-424-8802
in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date _____

TRANSPORTER #1 Mr. Frank Inc. E.P.A. ID No. ILD 059506160
Address 201 West 155th St.
City South Holland State IL Zip 60473 Phone 312-596-3377

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature _____ Date _____

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY

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

T/S/D FACILITY Signature _____ Date _____

To West Agit
T-50 6/25/81 JPM

T/S/D F COPY

HAZARDOUS WASTE

HAZARDOUS WASTE

001390

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER: [illegible] 33

TO:		FROM:	
T/S/D FACILITY	American Chemical Service	Generator	R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.	IND 0616360265	E.P.A. ID Code No.	IND 006480719
Address	420 S. Colfax Ave.	Address	OLD ROUTE 30 WEST
Destination	Griffith, IN 46319	Origin	WARSAW, INDIANA 46580
Phone	219-924-4370	Phone	219-267-3205

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz.Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
5,000 Gals.	Waste Ink - Bulk	Flammable Liquid	UN 1210	F005		Flammable Liquid

PLACARDS REQUIRED F Flammable

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

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

FREIGHT CHARGES: PREPAID ☐ COLLECT ☐

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

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No. IND 006480719
Address OLD ROUTE 30 WEST
Destination WARSAW, INDIANA 46580

EMERGENCY RESPONSE INFORMATION

CONTACT Name DAN FAULKNER
Phone 219-267-3205

National Response Center 1-800-424-8802 in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date _____

TRANSPORTER #1 Mr. Frank Inc. E.P.A. ID No. ILD 069505160
Address 201 West 155th St.
City South Holland State IL Zip 60473 Phone 312-596-3377

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature _____ Date 7-4-91

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY TO WEST AGIT T-50 7/24/91 9AM

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

T/S/D FACILITY Signature _____ Date 7/24/91

T/S/D F COPY

7 PL. COPY
REV-10/80

HAZARDOUS WASTE

HAZARDOUS WASTE

001393

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a Bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER: ND 34

TO: T/S/D FACILITY	American Chemical Service	FROM: Generator	R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.	IND 0616360265	E.P.A. ID Code No.	IND 005480710
Address	420 S. Colfax Ave.	Address	OLD ROUTE 30 WEST
Destination	Griffith, IN 46319	Origin	WARSAW, INDIANA 46580
Phone	219-924-4370	Phone	219-267-6228

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz.Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
5,000 Gals.	Waste Ink - Bulk	Flammable Liquid	UN1210	F005		Flammable Liquid

PLACARDS REQUIRED: Flammable

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

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

FREIGHT CHARGES: PREPAID ☐ COLLECT ☐

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

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY: R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.: IND 005480710
Address: OLD ROUTE 30 WEST
Destination: WARSAW, INDIANA 46580

EMERGENCY RESPONSE INFORMATION

CONTACT Name: BILL FAULKNER
Phone: 219-267-6228

National Response Center: 1-800-424-8802 in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date _____

TRANSPORTER #1 Mr. Frank Inc. E.P.A. ID No. ILD 069906150
Address 201 W. 155th St.
City South Holland State IL Zip 60473 Phone 312-596-3377

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 1 Signature _____ Date _____

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY TO EQ ST. AGT T-50 7/27/81

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.
T/S/D FACILITY Signature _____ Date 7/27/81

T/S/D F COPY

7/81 4016-BLY
REV 10/80

001392

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER: [illegible] 40

TO:		FROM:	
T/S/D FACILITY	American Chemical Service	Generator	R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.	IND 0616360265	E.P.A. ID Code No.	IND 005480710
Address	420 S. Colfax Ave.	Address	OLD ROUTE 30 WEST
Destination	Griffith, IN 46319	Origin	WARSAW, INDIANA 46580
Phone	219-924-4370	Phone	219-267-8228

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
5,000 Gals.	Waste Ink - Bulk	Flammable Liquid	UN1210	F005		Flammable Liquid

PLACARDS REQUIRED: Flammable

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

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

FREIGHT CHARGES: PREPAID ☒ COLLECT ☐

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

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY: R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.: IND 005480710
Address: OLD ROUTE 30 WEST
Destination: WARSAW, INDIANA 46580

EMERGENCY RESPONSE INFORMATION

CONTACT Name: MAX FAULKNER
Phone: 219-267-8228

National Response Center: 1-800-424-8802 in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date 9/17/81

TRANSPORTER #1: Mr. Frank Inc. E.P.A. ID No. ILD 069506160
Address: 201 West 155th St.
City: South Holland State: IL Zip: 60473 Phone: 312-596-3377

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 1 Signature: Michael D Martin Date: 9-17-81

TRANSPORTER #2: _____ E.P.A. ID No. _____
Address: _____
City: _____ State: _____ Zip: _____ Phone: _____

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.
T/S/D FACILITY Signature _____ Date 9/17/81

TO 210 R T-50

T/S/D F COPY 9/17/81 JRM

EPA FORM 8700-22 (6-80) REV. 10-80

001394

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER

NO 43

TO:		FROM:	
T/S/D FACILITY	American Chemical Service	Generator	R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.	IND 0616360265	E.P.A. ID Code No.	IND 005460710
Address	420 S. Colfax Ave.	Address	OLD ROUTE 30 WEST
Destination	Griffith, IN 46319	Origin	WARSAW, INDIANA 46580
Phone	219-924-4370	Phone	219-267-3258

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
5,000 Gals.	Waste Ink - Bulk	Flammable Liquid	UN1210	F005		Flammable Liquid

PLACARDS REQUIRED Flammable

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

$_____ Per _____

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

_____ (Signature of Consignor)

FREIGHT CHARGES PREPAID ☐ COLLECT ☐

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

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No. IND 005460710
Address OLD ROUTE 30 WEST
Destination WARSAW, INDIANA 46580

EMERGENCY RESPONSE INFORMATION

CONTACT Name MAX PARADISE
Phone 219-267-3258

National Response Center 1-800-424-8802 in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date 11/15/81

TRANSPORTER #1 Mr. Frank Inc. E.P.A. ID No. ILD 069506160
Address 201 West 155th St.
City South Holland State IL Zip 60473 Phone 312-596-3377

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature _____ Date 11-15-81

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY To 211R T-50 10/15/81 gm

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

T/S/D FACILITY Signature _____ Date 10/15/81

T/S/D F COPY

HAZARDOUS WASTE

001396

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER: [illegible] 45

TO:		FROM:	
T/S/D FACILITY	American Chemical Service	Generator	R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.	Ind 0616360265	E.P.A. ID Code No.	IND 005480710
Address	420 S. Colfax Ave.	Address	OLD ROUTE 30 WEST
Destination	Griffith, IN 46319	Origin	WARSAW, INDIANA 46580
Phone	219-924-4370	Phone	219-267-5238

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
5,000 Gals.	Waste Ink - Bulk	Flammable Liquid	UN1210	F005		Flammable Liquid

PLACARDS REQUIRED: Flammable

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

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

FREIGHT CHARGES: PREPAID ☑ COLLECT ☐

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

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY: R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.: IND 005480710
Address: OLD ROUTE 30 WEST
Destination: WARSAW, INDIANA 46580

EMERGENCY RESPONSE INFORMATION

CONTACT Name: RAY FAULKNER
Phone: 219-267-5238

National Response Center: 1-800-424-8802 in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature: [signature] Date: 10/20/81

TRANSPORTER #1: Mr. Frank Inc. E.P.A. ID No.: ILD 069506160
Address: 201 West 155th St.
City: South Holland State: IL Zip: 60473 Phone: 312-596-3377

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 1 Signature: [signature] Date: 10-20-81

TRANSPORTER #2: / E.P.A. ID No.:
Address:
City: State: Zip: Phone:

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 2 Signature: Date:

TREATMENT/STORAGE/DISPOSAL FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.
T/S/D FACILITY Signature: [signature] Date: 10/20/81

T/S/D F COPY

TO 211E T-50 10/22/81 jm

7-BEST COPY AVAILABLE REV. 10/80

001395

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER

47

TO:		FROM:	
T/S/D FACILITY	American Chemical Service	Generator	R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.	IND 061536026S	E.P.A. ID Code No.	IND 005460710
Address	420 S. Colfax Ave	Address	OLD ROUTE 30 WEST
Destination	Griffith, IN	Origin	WARSAW, INDIANA 46580
Phone	219-924-4370	Phone	219-267-8253

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
5,600 Gals.	Waste Ink - Bulk	Flammable Liquid	UN1210	F005		Flammable Liquid

PLACARDS REQUIRED Flammable

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

$_____ Per _____

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

_____ (Signature of Consignor)

FREIGHT CHARGES PREPAID ☑ COLLECT ☐

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

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No. IND 005460710
Address OLD ROUTE 30 WEST
Destination WARSAW, INDIANA 46580

EMERGENCY RESPONSE INFORMATION

CONTACT Name MAX FAULKNER
Phone 219-267-8253

National Response Center 1-800-424-8802
in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date _____

TRANSPORTER #1 Mr. Frank Inc. E.P.A. ID No. ILD 069506160
Address 201 West 155th St.
City South Holland State IL Zip 60473 Phone 312-596-3377

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature _____ Date 11/1/

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY

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

T/S/D FACILITY Signature _____ Date _____

To 211 T-50 Gold White

T/S/D F COPY

REV. 3-80

001397

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER: 49

TO:		FROM:	
T/S/D FACILITY	American Chemical Service	Generator	R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.	IND 061360255	E.P.A. ID Code No.	IND 005430710
Address	420 S. Colfax Avenue	Address	OLD ROUTE 30 WEST
Destination	Griffith, IN	Origin	WARSAW, INDIANA 46580
Phone	219-924-4370	Phone	219-267-5258

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
5,000 Gals.	Waste Ink - Bulk	Flammable Liquid	UN1210	F005		Flammable Liquid

PLACARDS REQUIRED: Flammable

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

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

FREIGHT CHARGES: PREPAID ☒ COLLECT ☐

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

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY: R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.: IND 005430710
Address: OLD ROUTE 30 WEST
Destination: WARSAW, INDIANA 46580

EMERGENCY RESPONSE INFORMATION

CONTACT Name: ZAK FAULKNER
Phone: 219-267-5258

National Response Center: 1-800-424-8802 in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date _____

TRANSPORTER #1 Mr. Frank Inc. E.P.A. ID No. ILD 064506160
Address 201 West 155th St.
City South Holland State IL Zip 60473 Phone 312-596-3377

Transporter No. 1 Signature _____ This is to certify acceptance of the hazardous waste shipment. Date _____

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

Transporter No. 2 Signature _____ This is to certify acceptance of the hazardous waste shipment. Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY

T/S/D FACILITY Signature _____ This is to certify acceptance of the hazardous waste for treatment, storage, or disposal. Date 11/30/81

T/S/D F COPY

To 211 R T-50 EL 84 11/30/81

001398

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER: M2 51

TO:		FROM:	
T/S/D FACILITY	American Chemical Service	Generator	R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.	IHD 0616360265	E.P.A. ID Code No.	IND 005430710
Address	420 S. Colfax Avenue	Address	OLD ROUTE 30 WEST
Destination	Griffith, Indiana	Origin	WARSAW, INDIANA 46580
Phone	219-924-4370	Phone	219-267-6238

HAZARDOUS WASTE

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
~~5000~~ Gals.	Waste Ink - Bulk	Flammable Liquid	UN1210	F005		Flammable Liquid
5000						

PLACARDS REQUIRED: Flammable

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

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

FREIGHT CHARGES: PREPAID [X] COLLECT [ ]

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

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No. IND 005430710
Address OLD ROUTE 30 WEST
Destination WARSAW, INDIANA 46580

EMERGENCY RESPONSE INFORMATION

CONTACT Name MAX FAULKNER
Phone 219-267-6238

National Response Center 1-800-424-8802
in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date 1/7

TRANSPORTER #1 Mr. Frank Inc. E.P.A. ID No. ILD069505160
Address 201 West 155th St.
City South Holland State IL Zip 60473 Phone 312-596-3377

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 1 Signature _____ Date 1-7-82

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.
T/S/D FACILITY Signature _____ Date 1-7-82

T/S/D F COPY To 210 JK T-50 ERM 1/7/82

003650

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER

NO 52

TO:		FROM:	
T/S/D FACILITY	American Chemical Service	Generator	R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.	IND 0616360265	E.P.A. ID Code No.	IND 005420710
Address	420 S. Colfax Avenue	Address	OLD ROUTE 30 WEST
Destination	Griffith, IN	Origin	WARSAW, INDIANA 46580
Phone	219-924-4370	Phone	219-267-9298

HAZARDOUS WASTE

No Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz.Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
4,500 Gals	Waste Ink - Bulk	Flammable Liquid	UN1210	F005		Flammable Liquid
4700						

PLACARDS REQUIRED Flammable

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

$_____ Per _____

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

_____ (Signature of Consignor)

FREIGHT CHARGES PREPAID ☐ COLLECT ☐ X

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

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No. IND 005420710
Address OLD ROUTE 30 WEST
Destination WARSAW, INDIANA 46580

EMERGENCY RESPONSE INFORMATION

CONTACT Name MAX FAULKNER
Phone 219-267-9253

National Response Center 1-800-424-8802
in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date _____

TRANSPORTER #1 Mr. Frank Inc. E.P.A. ID No. ILD 069506160
Address 201 West 155th St.
City South Holland State IL Zip 60473 Phone 312-596-3377

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 1 Signature _____ Date 1/12/82

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.
T/S/D FACILITY Signature _____ Date 1-13-82

T/S/D F COPY

To 211R T-50 G24 1/13/82

003651

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER: 22 54

TO:		FROM:	
T/S/D FACILITY	American Chemical Service	Generator	R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.	IND 0616360265	E.P.A. ID Code No.	IND 005480710
Address	420 S. Colfax Avenue	Address	OLD ROUTE 30 WEST
Destination	Griffith, IN 46319	Origin	WARSAW, INDIANA 46580
Phone	219-924-4370	Phone	219-267-8208

HAZARDOUS WASTE

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
5,000 Gals.	Waste Ink - Bulk	Flammable Liquid	UN 1210	F005		Flammable Liquid

PLACARDS REQUIRED: Flammable

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

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

(signature of Consignor)

FREIGHT CHARGES: PREPAID ☒ COLLECT ☐

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

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY: R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.: IND 005480710
Address: OLD ROUTE 30 WEST
Destination: WARSAW, INDIANA 46580

EMERGENCY RESPONSE INFORMATION

CONTACT Name: MAX FAULKNER
Phone: 219-267-8208

National Response Center: 1-800-424-8802 in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date _____

TRANSPORTER #1 Mr. Frank Inc. E.P.A. ID No. ILD 069506160
Address 201 West 155th St.
City South Holland State IL Zip 60473 Phone 312-596-3377

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 1 Signature Robert Williams Date 2-26-82

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.
T/S/D FACILITY Signature _____ Date 2/24/82

T/S/D F COPY To 125 R T-63 GRM 2/24/82

003653

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

Is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER: 55

TO:		FROM:	
T/S/D FACILITY	American Chemical Service	Generator	R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.	IND 0616360265	E.P.A. ID Code No.	IND 006480719
Address	420 S. Colfax Avenue	Address	OLD ROUTE 30 WEST
Destination	Griffith, IN 46319	Origin	WARSAW, INDIANA 46580
Phone	219-924-4370	Phone	219-267-6258

HAZARDOUS WASTE

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
5,000 Gals.	Waste Ink - Bulk	Flammable Liquid	UN 1210	F005		Flammable Liquid

PLACARDS REQUIRED: Flammable

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

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

FREIGHT CHARGES: PREPAID ☒ COLLECT ☐

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

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY: R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.: IND 006480719
Address: OLD ROUTE 30 WEST
Destination: WARSAW, INDIANA 46580

EMERGENCY RESPONSE INFORMATION

CONTACT Name: MAX FAULKNER
Phone: 219-267-6258

National Response Center: 1-800-424-8802 in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date _____

TRANSPORTER #1 Mr. Frank Inc. E.P.A. ID No. ILD 069506160
Address 201 West 155th St.
City South Holland State IL Zip 60473 Phone 312-596-3377

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 1 Signature _____ Date _____

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.
T/S/D FACILITY Signature _____ Date 02-5-82

To 125K
T-636RM 2/5/82

T/S/D F COPY

003652

HAZARDOUS WASTE MANIFEST

HAZARDOUS WASTE

THIS MEMORANDUM

Is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER: 58

TO: T/S/D FACILITY	American Chemical Service	FROM: Generator	R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.	IND 016360265	E.P.A. ID Code No.	IND 005480710
Address	420 S. Colfax Avenue	Address	OLD ROUTE 30 WEST
Destination	Griffith, Ind 46319	Origin	WARSAW, INDIANA 46580
Phone	219-924-4370	Phone	219-267-6298

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
~~5,000~~ Gals.	Waste Ink - Bulk	Flammable Liquid	UN1210	F005		Flammable Liquid
5500 gal						

PLACARDS REQUIRED

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

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

FREIGHT CHARGES: PREPAID ☒ COLLECT ☐

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

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY: R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.: IND 005480710
Address: OLD ROUTE 30 WEST
Destination: WARSAW, INDIANA 46580

EMERGENCY RESPONSE INFORMATION

CONTACT Name: MAX FAULKNER
Phone: 219-267-6298

National Response Center: 1-800-424-8802 in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date _____

TRANSPORTER #1 Mr. Frank Inc. E.P.A. ID No. ILD 069506160
Address 201 West 155th St.
City South Holland State IL Zip 60473 Phone 312-596-3377

Transporter No. 1 Signature _____ This is to certify acceptance of the hazardous waste shipment. Date _____

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

Transporter No. 2 Signature _____ This is to certify acceptance of the hazardous waste shipment. Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY

T/S/D FACILITY Signature _____ This is to certify acceptance of the hazardous waste for treatment, storage, or disposal. Date 3/3/92

T/S/D F COPY TO 210 K T-50 6RM 3/3/92.

003554

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER: [illegible] 60

TO:		FROM:	
T/S/D FACILITY	American Chemical Service	Generator	R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.	IND 016360265	E.P.A. ID Code No.	IND 005480710
Address	420 S. Colfax Avenue	Address	OLD ROUTE 30 WEST
Destination	Griffith, IN 46319	Origin	WARSAW, INDIANA 46580
Phone	219-924-4370	Phone	219-267-5258

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
5,000 Gals.	Waste Ink - Bulk	Flammable Liquid	UN1210	F005		Flammable Liquid

HAZARDOUS WASTE

PLACARDS REQUIRED

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

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

FREIGHT CHARGES: PREPAID ☑ COLLECT ☐

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

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No. IND 005480710
Address OLD ROUTE 30 WEST
Destination WARSAW, INDIANA 46580

EMERGENCY RESPONSE INFORMATION

CONTACT Name MAX FAULKNER
Phone 219-267-5258

National Response Center 1-800-424-8802 in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date _____

TRANSPORTER #1 Mr. Frank, Inc. E.P.A. ID No. ILD 069505160
Address 201 West 155th St.
City South Holland State IL Zip 60473 Phone 312-596-3377

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature _____ Date _____

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY

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

T/S/D FACILITY Signature _____ Date _____

T/S/D F COPY To 210 F T-50 61PM 3/25/82

00255

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER: 63

TO:		FROM:	
T/S/D FACILITY	American Chemical Service	Generator	R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.	Ind 016360265	E.P.A. ID Code No.	IND 005480710
Address	420 S. Colfax Ave.	Address	OLD ROUTE 30 WEST
Destination	Griffith, In 46319	Origin	WARSAW, INDIANA 46580
Phone	219-924-4370	Phone	219-267-5258

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
5,000 Gals.	Waste Ink - Bulk	Flammable Liquid	~~UN1210~~ UN1993	F005		Flammable Liquid

PLACARDS REQUIRED: Flammable

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

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

FREIGHT CHARGES: PREPAID [X] 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.

HAZARDOUS WASTE

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY: R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.: IND 005480710
Address: OLD ROUTE 30 WEST
Destination: WARSAW, INDIANA 46580

EMERGENCY RESPONSE INFORMATION

CONTACT Name: MAX FAULKNER
Phone: 219-267-5258

National Response Center: 1-800-424-8802 in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature: [signature] Date: 4/21

TRANSPORTER #1: Mr. Frank Inc. E.P.A. ID No.: ILD 069506160
Address: 201 West 155th St.
City: South Holland State: IL Zip: 60473 Phone: 312-596-3377
Transporter No. 1 Signature: [signature] This is to certify acceptance of the hazardous waste shipment. Date: 4-21-82

TRANSPORTER #2: _____ E.P.A. ID No.: _____
Address: _____
City: _____ State: _____ Zip: _____ Phone: _____
Transporter No. 2 Signature: _____ This is to certify acceptance of the hazardous waste shipment. Date: _____

TREATMENT/STORAGE/DISPOSAL FACILITY
T/S/D FACILITY Signature: [signature] This is to certify acceptance of the hazardous waste for treatment, storage, or disposal. Date: 4/21/82

To 211K T-50
ERM 4.21.82

T/S/D F COPY

003656

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER: 64

TO:		FROM:	
T/S/D FACILITY	American Chemical Service	Generator	R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.	Ind 016360265	E.P.A. ID Code No.	IND 005480710
Address	420 S. Colfax Ave.	Address	OLD ROUTE 30 WEST
Destination	Griffith, IN. 46319	Origin	WARSAW, INDIANA 46580
Phone	219-924-4370	Phone	219-267-8288

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
5,000 Gals.	Waste Ink - Bulk	Flammable Liquid	UN1210	F005		Flammable Liquid

PLACARDS REQUIRED: Flammable

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

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

FREIGHT CHARGES: PREPAID ☒ COLLECT ☐

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

HAZARDOUS WASTE

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY: R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.: IND 005480710
Address: OLD ROUTE 30 WEST
Destination: WARSAW, INDIANA 46580

EMERGENCY RESPONSE INFORMATION

CONTACT Name: MAX FAULKNER
Phone: 219-267-8288

National Response Center: 1-800-424-8802 in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date _____

TRANSPORTER #1 Mr. Frank Inc. E.P.A. ID No. ILD 069506160
Address 201 West 155th St.
City South Holland State IL Zip 60473 Phone 312-596-3377

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature _____ Date _____

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY

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

T/S/D FACILITY Signature _____ Date _____

T/S/D F COPY To 210 K T-50 GRM 4-30-82

003657

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER: NO 66

TO:		FROM:	
T/S/D FACILITY	American Chemical Service	Generator	R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.	IND 016360265	E.P.A. ID Code No.	IND 005480710
Address	420 S. Colfax Ave.	Address	OLD ROUTE 30 WEST
Destination	Griffith, IN 46319	Origin	WARSAW, INDIANA 46580
Phone	219-924-4370	Phone	219-267-8293

HAZARDOUS WASTE

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
5,000 Gals.	Waste Ink - Bulk	Flammable Liquid	UN1210	F005		Flammable Liquid

PLACARDS REQUIRED: Flammable

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

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

FREIGHT CHARGES: PREPAID [X] COLLECT [ ]

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

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY: R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.: IND 005480710
Address: OLD ROUTE 30 WEST
Destination: WARSAW, INDIANA 46580

EMERGENCY RESPONSE INFORMATION

CONTACT Name: MAX FAULKNER
Phone: 219-267-8293

National Response Center: 1-800-424-8802 in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature: R R Donnelley & Sons Co. Date: 5-14-82

TRANSPORTER #1: Mr. Frank Inc. E.P.A. ID No.: ILD 063506160
Address: 201 West 155th St.
City: South Holland State: IL Zip: 60473 Phone: 312-596-3377

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 1 Signature: _____ Date: 5/14/82

TRANSPORTER #2: _____ E.P.A. ID No.: _____
Address: _____
City: _____ State: _____ Zip: _____ Phone: _____

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 2 Signature: _____ Date: 5/14/82

TREATMENT/STORAGE/DISPOSAL FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.
T/S/D FACILITY Signature: _____ Date: 5/14/82

T/S/D F COPY To 211K T-50 GRM 5-14-82

003658

HAZARDOUS WASTE MANIFEST

THIS SHIPPING ORDER must be legibly filled in, in ink, in indelible Pencil, or in Carbon, and retained by the Agent.

MANIFEST DOCUMENT NUMBER

№ 68

TO:		FROM:	
T/S/D FACILITY	American Chemical Service	Generator	R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.	~~IND~~ IND 016360265	E.P.A. ID Code No.	IND 005480710
Address	420 S. Colfax Ave.	Address	OLD ROUTE 30 WEST
Destination	Griffith, IND 46319	Origin	WARSAW, INDIANA 46580
Phone	219-924-4370	Phone	219-267-9298

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
5,000 Gals.	Waste Ink - Bulk	Flammable Liquid	UN1210	F005		Flammable Liquid

PLACARDS REQUIRED Flammable

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

$_____ Per _____

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

_____ (Signature of Consignor)

FREIGHT CHARGES
PREPAID [X] COLLECT [ ]

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

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No. IND 005480710
Address OLD ROUTE 30 WEST
Destination WARSAW, INDIANA 46580

EMERGENCY RESPONSE INFORMATION

CONTACT Name MAX FAULKNER
Phone 219-267-9298

National Response Center 1-800-424-8802
in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature Jim F. Mlocke Date 6-14-82

TRANSPORTER #1 Mr. Frank, Inc. E.P.A. ID No. ILD 069506160
Address 201 West 155th St.
City South Holland State IL Zip 60473 Phone 312-596-3377

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 1 Signature Donald R Burt Date 6-14-82

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.
T/S/D FACILITY Signature _____ Date 6/14/82

TRANSPORTER #1 COPY T0211KT-50 GRM 6.14.82

HAZARDOUS WASTE

00788?

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER: [illegible] 71

TO:		FROM:	
T/S/D FACILITY	American Chemical Service	Generator	R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.	IND 016360265	E.P.A. ID Code No.	IND 005480710
Address	420 S. Colfax Avenue	Address	OLD ROUTE 30 WEST
Destination	Griffith, IN 46319	Origin	WARSAW, INDIANA 46580
Phone	219-924-4370	Phone	219-267-5238

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
5,000 Gals.	Waste Ink - Bulk	Flammable Liquid	UN1210	F005		Flammable Liquid

PLACARDS REQUIRED Flammable

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

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

_____ (Signature of Consignor)

FREIGHT CHARGES: PREPAID [X] 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.

HAZARDOUS WASTE

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No. IND 005480710
Address OLD ROUTE 30 WEST
Destination WARSAW, INDIANA 46580

EMERGENCY RESPONSE INFORMATION

CONTACT Name MAX FAULKNER
Phone 219-267-5238

National Response Center 1-800-424-8802
in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date _____

TRANSPORTER #1 Mr. Frank Inc. E.P.A. ID No. ILD 069506160
Address 201 West 155th St.
City South Holland State IL Zip 60473 Phone 312-596-3377

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature _____ Date _____

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY

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

T/S/D FACILITY Signature _____ Date 8/16/82

T/S/D F COPY

2117-50
RM 5-16-82

003660

HAZARDOUS WASTE MANIFEST

HAZARDOUS WASTE

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER: 72

TO:		FROM:	
T/S/D FACILITY	American Chemical Service	Generator	R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.	IND 016360265	E.P.A. ID Code No.	IND 005480710
Address	420 S. Colfax Ave.	Address	OLD ROUTE 30 WEST
Destination	Griffith, IN 46319	Origin	WARSAW, INDIANA 46580
Phone	219-924-4370	Phone	219-267-9233

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
5,000 Gals.	Waste Ink - Bulk	Flammable Liquid	UN1210	F005		Flammable Liquid

PLACARDS REQUIRED: Flammable

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding $____ Per ____

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

(Signature of Consignor)

FREIGHT CHARGES: PREPAID [X] COLLECT [ ]

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

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY: R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.: IND 005480710
Address: OLD ROUTE 30 WEST
Destination: WARSAW, INDIANA 46580

EMERGENCY RESPONSE INFORMATION

CONTACT Name: MAX FAULKNER
Phone: 219-267-9233

National Response Center: 1-800-424-8802 in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature ____ Date ____

TRANSPORTER #1: Mr. Frank Inc. E.P.A. ID No.: ILD 065506150
Address: 291 West 155th St.
City: South Holland State: IL Zip: 60473 Phone: 312-596-3377

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 1 Signature ____ Date ____

TRANSPORTER #2: ____ E.P.A. ID No.: ____
Address: ____
City: ____ State: ____ Zip: ____ Phone: ____

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 2 Signature ____ Date ____

TREATMENT/STORAGE/DISPOSAL FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.
T/S/D FACILITY Signature: [signature] Date: 8/18/88

T/S/D F COPY

T021RT-50
GEM 8-18-88

003661

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

Is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER: 74

TO:		FROM:	
T/S/D FACILITY	American Chemical Service	Generator	R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.	IND 016360265	E.P.A. ID Code No.	IND 005480710
Address	420 S. Colfax Avenue	Address	OLD ROUTE 30 WEST
Destination	Griffith, IN 46319	Origin	WARSAW, INDIANA 46580
Phone	219-924-4370	Phone	219-267-9238

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
5,000 Gal.	Waste Ink - Bulk	Flammable Liquid	UN1210	F005		Flammable Liquid

PLACARDS REQUIRED: Flammable

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

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

FREIGHT CHARGES: PREPAID ☒ COLLECT ☐

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

HAZARDOUS WASTE

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY: R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.: IND 005480710
Address: OLD ROUTE 30 WEST
Destination: WARSAW, INDIANA 46580

EMERGENCY RESPONSE INFORMATION

CONTACT Name: MAX FAULKNER
Phone: 219-267-9238

National Response Center: 1-800-424-8802 in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature: [illegible] Date: 7/24/[illegible]

TRANSPORTER #1: Mr. Frank Inc. E.P.A. ID No.: ILD 069506160
Address: 201 West 155th St.
City: South Holland State: IL Zip: 60473 Phone: 312-596-3377

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 1 Signature: [illegible] Date: 8/[illegible]

TRANSPORTER #2: _____ E.P.A. ID No.: _____
Address: _____
City: _____ State: _____ Zip: _____ Phone: _____

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 2 Signature: _____ Date: _____

TREATMENT/STORAGE/DISPOSAL FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.
T/S/D FACILITY Signature: [illegible] Date: 8/[illegible]

To 210 RST-50 S/N 8262

T/S/D F COPY

003662

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER: NS 77

TO:		FROM:	
T/S/D FACILITY	American Chemical Service	Generator	R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.	IND 016360265	E.P.A. ID Code No.	IND 005480710
Address	420 S. Colfax Ave.	Address	OLD ROUTE 30 WEST
Destination	Griffith, Ind 46319	Origin	WARSAW, INDIANA 46580
Phone	219-924-4370	Phone	219-267-5288

HAZARDOUS WASTE

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz.Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
5,000 Gals.	Waste Ink - Bulk	Flammable Liquid	UN1210	F005		Flammable Liquid

PLACARDS REQUIRED: Flammable

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

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

FREIGHT CHARGES: PREPAID ☒ COLLECT ☐

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

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY: R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.: IND 005480710
Address: OLD ROUTE 30 WEST
Destination: WARSAW, INDIANA 46580

EMERGENCY RESPONSE INFORMATION

CONTACT Name: MAX FAULKNER
Phone: 219-267-5288

National Response Center: 1-800-424-8802 in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date _____

TRANSPORTER #1 Mr. Frank Inc. E.P.A. ID No. ILD 069506160
Address 201 W. 155th St.
City South Holland State IL Zip 60473 Phone 312-596-3377

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 1 Signature _____ Date 10/11/82

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.
T/S/D FACILITY Signature _____ Date 10/11/82

T/S/D F COPY TO210 KT-50 EICM 10.11.82

003663

HAZARDOUS WASTE MANIFEST

HAZARDOUS WASTE

THIS MEMORANDUM

Is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER

[redacted] - 79

TO:		FROM:	
T/S/D FACILITY	American Chemical Service	Generator	R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.	IND 016360265	E.P.A. ID Code No.	IND 005430710
Address	420 S. Colfax Ave.	Address	OLD ROUTE 30 WEST
Destination	Griffith, IN 46319	Origin	WARSAW, INDIANA [redacted]
Phone	219-924-4370	Phone	219-267-[redacted]

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
1 [redacted] 5,000 Gal.	Waste Ink - Bulk	Flammable Liquid	UN1210	F005		Flammable Liquid

PLACARDS REQUIRED Flammable

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

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

FREIGHT CHARGES PREPAID ☑ COLLECT ☐

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

ALTERNATE DESTINATION (EMERGENCY ONLY)		EMERGENCY RESPONSE INFORMATION	
T/S/D FACILITY	R.R. DONNELLEY & SONS CO.	CONTACT Name	MAX FAULKNER
E.P.A. ID Code No.	IND 005430710	Phone	219-267-[redacted]
Address	OLD ROUTE 30 WEST	National Response Center	1-800-424-8802
Destination	WARSAW, INDIANA [redacted]		in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date _____

TRANSPORTER #1 Mr. Frank E.P.A. ID No. ILD 063306160
Address 201 W. 155th St.
City South Holland State IL Zip 60473 Phone 312-596-3377

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature _____ Date 11/19/82

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY

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

T/S/D FACILITY Signature _____ Date _____

To 210 KT-50
GRW 11-19-82

T/S/D F COPY

003664

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER: 80

TO:		FROM:	
T/S/D FACILITY	American Chemical Service	Generator	R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.	IND 016360265	E.P.A. ID Code No.	IND 005480710
Address	420 S Calumet Griffith, IN 46319	Address	OLD ROUTE 30 WEST
Destination	219-924-4370	Origin	WARSAW, INDIANA 46580
Phone		Phone	219-267-5248

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
5,000 Gals.	Waste Ink - Bulk (Toluene)	Flammable Liquid	UN1210	F005		Flammable Liquid

PLACARDS REQUIRED: Flammable

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

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

FREIGHT CHARGES: PREPAID ☒ COLLECT ☐

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

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY: R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.: IND 005480710
Address: OLD ROUTE 30 WEST
Destination: WARSAW, INDIANA 46580

EMERGENCY RESPONSE INFORMATION

CONTACT Name: MAX FAULKNER
Phone: 219-267-5248

National Response Center: 1-800-424-8802 in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date 12/15/82

TRANSPORTER #1 Mr. Frank E.P.A. ID No. ILD 060506160
Address 201 W. 155th St.
City South Holland State IL Zip 60473 Phone 312-596-3377

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 1 Signature _____ Date _____

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.
T/S/D FACILITY Signature _____ Date 12/15/82

T/S/D F COPY To 211K T-50 GPM 12-15-82

003665

HAZARDOUS WASTE

HAZARDOUS WASTE MANIFEST

HAZARDOUS WASTE

THIS MEMORANDUM

Is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER

No. 81

TO:		FROM:	
T/S/D FACILITY	American Chemical Service	Generator	R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.	IND 016360265	E.P.A. ID Code No.	IND 005480719
Address	420 S. Colfax	Address	OLD ROUTE 30 WEST
Destination	Griffith, IN 46319	Origin	WARSAW, INDIANA 46580
Phone	219-924-4370	Phone	219-267-5238

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz.Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
5,000 Gal.	Waste Ink - Bulk	Flammable Liquid	UN1210	F005		Flammable Liquid

PLACARDS REQUIRED Flammable

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

$_____ Per _____

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

_____
(Signature of Consignor)

FREIGHT CHARGES
PREPAID ☒ COLLECT ☐

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

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No. IND 005480719
Address OLD ROUTE 30 WEST
Destination WARSAW, INDIANA 46580

EMERGENCY RESPONSE INFORMATION

CONTACT Name MAX FAULKNER
Phone 219-267-5253

National Response Center 1-800-424-8802
in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date _____

TRANSPORTER #1 Mr. Frank E.P.A. ID No. ILD 069586160
Address 201 W. 155th St.
City South Holland State IL Zip 60473 Phone 312-596-3377

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature _____ Date _____

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY

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

T/S/D FACILITY Signature _____ Date _____

T/S/D F COPY TO 21 KT-50 GRM 12.27.82

003666

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER: 83

TO:		FROM:	
T/S/D FACILITY	American Chemical Service	Generator	R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.	IND 016360265	E.P.A. ID Code No.	IND 005460710
Address	420 S. Colfax	Address	OLD ROUTE 30 WEST
Destination	Griffith, IN 46319	Origin	WARSAW, INDIANA 46580
Phone	219-924-4370	Phone	219-267-6258

HAZARDOUS WASTE

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz.Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
~~5,000~~ Gal.	Waste Ink (toluene) - Bulk	Flammable Liquid	UN1210	F005		Flammable Liquid

PLACARDS REQUIRED: Flammable

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

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

_____ (Signature of Consignor)

FREIGHT CHARGES: PREPAID [X] COLLECT [ ]

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

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY: R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.: IND 005460710
Address: OLD ROUTE 30 WEST
Destination: WARSAW, INDIANA 46580

EMERGENCY RESPONSE INFORMATION

CONTACT Name: MAX FAULKNER
Phone: 219-267-6258

National Response Center: 1-800-424-8802 in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date _____

TRANSPORTER #1 Mr. Frank E.P.A. ID No. ILD 069586150
Address 201 W. 155th St.
City South Holland State IL Zip 60473 Phone 312-596-2377

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 1 Signature _____ Date 2-10-83

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.
T/S/D FACILITY Signature _____ Date _____

To 211 E T-50
EPM 2-7-83

T/S/D F COPY

004729

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER: [illegible] 84

TO:	FROM:
T/S/D FACILITY: American Chemical Service	Generator: R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.: IND 016360265	E.P.A. ID Code No.: IND 005480710
Address: 420 South Colfax	Address: OLD ROUTE 30 WEST
Destination: Griffith, IN 46319	Origin: WARSAW, INDIANA 46580
Phone: 219-924-4370	Phone: 219-267-8298

HAZARDOUS WASTE

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
5500 Gals.	Bulk Waste Ink (Tolvene)	Flammable Liquid	UN 1210	F005		Flammable Liquid

PLACARDS REQUIRED: Flammable

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

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

FREIGHT CHARGES: PREPAID [X] COLLECT [ ]

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

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY: R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.: IND 005480710
Address: OLD ROUTE 30 WEST
Destination: WARSAW, INDIANA 46580

EMERGENCY RESPONSE INFORMATION

CONTACT Name: MAX FAULKNER
Phone: 219-267-8298

National Response Center: 1-800-424-8802 in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date _____

TRANSPORTER #1: Mr. Frank E.P.A. ID No.: ILD 069506160
Address: 201 West 155th St.
City: South Holland State: IL Zip: 60473 Phone: 312-596-3377

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 1 Signature [signature] Date 3/11/83

TRANSPORTER #2: _____ E.P.A. ID No.: _____
Address: _____
City: _____ State: _____ Zip: _____ Phone: _____

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.
T/S/D FACILITY Signature [signature] Date 3/11/83

T/S/D F COPY To 210 F T-50 GLM 3.11.83

004728

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER: 12 86

PURCHASE ORDER F 18261

TO:		FROM:	
T/S/D FACILITY	American Chemical Service	Generator	R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.	IND 05350265	E.P.A. ID Code No.	IND 005480710
Address	420 S. Colfax	Address	OLD ROUTE 30 WEST
Destination	Griffith, IN 46319	Origin	WARSAW, INDIANA 46580
Phone	219-924-4370	Phone	219-267-5205

HAZARDOUS WASTE

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
~~5,000~~ Gals.	Bulk Waste Ink (Toluene)	Flammable Liquid	UN1210	F005		Flammable Liquid

PLACARDS REQUIRED: FLAMMABLE

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

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

(Signature of Consignor)

FREIGHT CHARGES: PREPAID [X] COLLECT [ ]

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

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY	R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.	IND 005480710
Address	OLD ROUTE 30 WEST
Destination	WARSAW, INDIANA 46580

EMERGENCY RESPONSE INFORMATION

CONTACT Name: MAX FAULKNER
Phone: 219-267-5205

National Response Center 1-800-424-8802
in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date _____

TRANSPORTER #1 Mr. Frank E.P.A. ID No. ILD 069506160
Address 201 W. 155th St.
City South Holland State IL Zip 60473 Phone 312-596-3317

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 1 Signature _____ Date _____

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.
T/S/D FACILITY Signature _____ Date 4/6/83

T/S/D F COPY To210 KT-50 GRM 4.8.83

004730

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER

88

F 18332

TO:	FROM:
T/S/D FACILITY American Chemical Service	Generator R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No. Ind 016360265	E.P.A. ID Code No. IND 005480710
Address 420 S. Colfax	Address OLD ROUTE 30 WEST
Destination Griffith, In. 46319	Origin WARSAW, INDIANA 46580
Phone 219-924-4370	Phone 219-267-8288

HAZARDOUS WASTE

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
5000	Bulk Waste Ink (Toluene)	Flammable Liquid	UN1210	F005		Flammable Liquid

PLACARDS REQUIRED Flammable

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

$_____ Per _____

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

_____ (Signature of Consignor)

FREIGHT CHARGES
PREPAID ☒ COLLECT ☐

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

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No. IND 005480710
Address OLD ROUTE 30 WEST
Destination WARSAW, INDIANA 46580

EMERGENCY RESPONSE INFORMATION

CONTACT Name MAX FAULKNER
Phone 219-267-8288

National Response Center 1-800-424-8802
in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date _____

TRANSPORTER #1 Mr Frank E.P.A. ID No. ILD 069506169
Address 201 W 155th St.
City South Holland State ILL Zip 60473 Phone 312/596-3377

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature _____ Date _____

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY

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

T/S/D FACILITY Signature _____ Date 4/19/83

T/S/D F COPY To 210 KT-50 GW 4-19-83

004731

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER

No 90

PURCHASE ORDER F 18675

TO: T/S/D FACILITY	American Chemical Service	FROM: Generator	R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.	IND 016360265	E.P.A. ID Code No.	IND 005480710
Address	420 S. Colfax	Address	OLD ROUTE 30 WEST
Destination	Griffith, IN 46319	Origin	WARSAW, INDIANA 46580
Phone	219-924-4370	Phone	219-267-8296

HAZARDOUS WASTE

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
XX 5,000 Gals.	Bulk Waste Ink (Toluene)	Flammable Liquid	UN1210	F005		Flammable Liquid

PLACARDS REQUIRED Flammable

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

$_____ Per _____

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

_____
(Signature of Consignor)

FREIGHT CHARGES
PREPAID [X] COLLECT [ ]

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

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No. IND 005480710
Address OLD ROUTE 30 WEST
Destination WARSAW, INDIANA 46580

EMERGENCY RESPONSE INFORMATION

CONTACT Name MAX FAULKNER
Phone 219-267-8296

National Response Center 1-800-424-8802
in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date _____

TRANSPORTER #1 Mr. Frank E.P.A. ID No. ILD 069506160
Address 201 W. 155th St.
City South Holland State IL Zip 60473 Phone 312-596-3377

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature _____ Date _____

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY

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

T/S/D FACILITY Signature _____ Date 7/1/85

T/S/D F COPY TC211ET-50
GTRI 570.83

0U4T32

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

Is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER: 12 91

F 18898

TO:		FROM:	
T/S/D FACILITY	American Chemical Service	Generator	R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.	IND 016360265	E.P.A. ID Code No.	IND 005480710
Address	420 S. Colfax	Address	OLD ROUTE 30 WEST
Destination	Griffith, IN 46319	Origin	WARSAW, INDIANA 46580
Phone	219-924-4370	Phone	219-267-6298

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
5,000 Gals.	Bulk Waste Ink (Toluene)	Flammable Liquid	UN1210	F005		Flammable Liquid

PLACARDS REQUIRED: FLAMMABLE

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

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

FREIGHT CHARGES: PREPAID [X] COLLECT [ ]

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

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY: R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.: IND 005480710
Address: OLD ROUTE 30 WEST
Destination: WARSAW, INDIANA 46580

EMERGENCY RESPONSE INFORMATION

CONTACT Name: MAX FAULKNER
Phone: 219-267-6298

National Response Center: 1-800-424-8802
in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date _____

TRANSPORTER #1 Mr. Frank E.P.A. ID No. IND 080506160
Address 201 W. 155th St.
City South Holland State IL Zip 60473 Phone 312-596-2377

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature _____ Date _____

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY

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

T/S/D FACILITY Signature _____ Date 5/17/83

To 211 F-T-50
EPM 5-17-83

T/S/D F COPY

004733

HAZARDOUS WASTE

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER

ND 93

PO # F 19356

TO:		FROM:	
T/S/D FACILITY	AMERICAN CHEMICAL SERVICE	Generator	R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No.	IND 016360265	E.P.A. ID Code No.	IND 005480770
Address	420 S. Colfax	Address	OLD ROUTE 30 WEST
Destination	Griffith, IN	Origin	WARSAW, INDIANA 46580
Phone	219-924-4370	Phone	219-267-9268

HAZARDOUS WASTE

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
5,000 Gals.	Bulk Waste Ink (Toluene)	Flammable Liquid	UN1210	F005		Flammable Liquid

PLACARDS REQUIRED Flammable

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

$_____ Per _____

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

(Signature of Consignor)

FREIGHT CHARGES PREPAID [X] COLLECT [ ]

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

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No. IND 005480770
Address OLD ROUTE 30 WEST
Destination WARSAW, INDIANA 46580

EMERGENCY RESPONSE INFORMATION

CONTACT Name MAX FAULKNER
Phone 219-267-9268

National Response Center 1-800-424-8802
in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date _____

TRANSPORTER #1 Mr. Frank E.P.A. ID No. ILD 063506160
Address ~~XXXXX~~ 201 W. 155th St.
City South Holland State IL Zip 60473 Phone 312-590-3377

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 1 Signature _____ Date 6/7/83

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 2 Signature _____ Date 6/7/83

TREATMENT/STORAGE/DISPOSAL FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.
T/S/D FACILITY Signature _____ Date 6/7/83

T/S/D F COPY TO 211 RT-50 GPM 6-7-83

004734

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

RR

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.
ILD054516173			

GENERATOR

3. Generator's Name and Mailing Address
C.R. STREET & CO.
2353 BLUE ISL. AVE. CHICAGO, IL - 60608

A. State Manifest Document Number: INA 0114758

4. Generator's Phone (312) 254-1277

B. State Generator's ID

5. Transporter 1 Company Name: MR FRANK INC

6. US EPA ID Number: ILD069506160

C. State Transporter's ID: 0079

D. Transporter's Phone: 312-376-3777

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERV.
420 S. COLFAX AVE.
GRIFFITH IND, 46319

10. US EPA ID Number: IND046360265

G. State Facility's ID

H. Facility's Phone: 219-924-1370

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. HAZARDOUS WASTE LIQUID N.O.S. ORM-E, NA 9189	001	FT	00102	P	0000
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

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

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

Printed/Typed Name	Signature	Date Month	Day	Year
J. TICKLES		08	04	87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year
JOE WEBER		08	04	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
EDONFEE		08	04	87

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

INA 0114758

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

DISTRIBUTION: 2 COR T SO P

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

012370

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

0947375
1 — 7

Authorization Number ____ 8 — 13

R.S. OWENS & CO. (Company Name) | 5535 N. LYNCH (Address) | 3122826000 (Phone Number) | 0316000280 G (14 Generator Number 24)

CHICAGO (City) | ILL. (State) | 60630 (Zip) | ILD004968509 (EPA Number)

WASTE HAULER(S)

MR. FRANK, INC. (Hauler Name) | 201 W. 155TH. STREET (Hauler Address) | S.W.H. Registration Number 0079015 (25 — 31)

SOUTH HOLLAND, ILL. 60473 | 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 SERVICES - COLFAX AVE. AT C&O R.R. (Facility Name) | Address | 9180 8902 (39 Site Number 46)

GRIFFITH, IN. 46319

City | State | 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 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 LIQUID, N.O.S. FLAMMABLE LIQUID | UN1993 (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: 00990 (47 — 52) | 1 GALLONS (Circle One) 2 CU. YDS. (53)

FLAT BED

METHOD OF SHIPMENT (Circle One) | DRUMS 18 (Number) | TANK TRUCK | OPEN TRUCK | OTHER (Specify) ~~VAC 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: 4/16/84

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) | DATE: 04 16 84 (54 — 59)

(2) ____ (Authorized Signature) | DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO X

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

[signature] (Authorized Signature) | DATE: 4/17/84 (60 — 65)

COMMENTS OR SPECIAL INSTRUCTIONS: ____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637 | OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

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

REV. 8 4

SITE COPY - PART 3

TO 204 FT-50 GRM 4-17-84

007416

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 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 36671

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME: Racine County Highway Dept.
2. EPA IDENTIFICATION NO.:
3. COMMENTS/SPECIAL INSTRUCTIONS: Exempt - Small quantity generator
4. P.O. BOX OR STREET ADDRESS: 14200 Washington Ave.
5. CITY, STATE, ZIP CODE: Sturtevant, Wi 53177
6. TELEPHONE NUMBER: (414) 886-4841

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US 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 drums	80	Methyl methacrylate	Flammable		1. Solid 3. Mixture 2. Liquid [2]	U 162	750 lbs.
					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): C JOHN EVANICH
17. DATE SHIPPED M D Y: 3 17 83

TRANSPORTER SECTION

18. COMPANY NAME: ABC Services, Inc.
19. EPA IDENTIFICATION NO.: WIDO76159839
20. P.O. BOX OR STREET ADDRESS: 5700 - 49th St.
21. CITY, STATE, ZIP CODE: Kenosha, Wi 53142
22. TELEPHONE NUMBER: (414) 552-9090
23. COMMENTS:

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted 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: 3 / 17 / 83

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

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

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME: American Chemical Services
33. EPA IDENTIFICATION NO.: INDO16360265
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:

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): FDUWFEE
40. Date Accepted M / D / Y: 3 / 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 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

On dock 3.18.83
To 204 RT-SO GRM 3.23.83

052900

STATE OF MICHIGAN

R 4896
Rev. 8/81

WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS) ☐ Act 136 Waste ☐ Other MI 0226375

GENERATOR COMPLETES

IDENTIFICATION

Generator's Name	Primary Transporter's Name	Treatment, Storage or Disposal Facility
Ranir Corp.	Valley City Refuse Disposal, Inc.	American Chemical Service, Inc.
Site Address	**Transporter's Address**	**Facility Address**
4617 East Paris Grand Rapids, MI 49508	2650 Thornwood Wyoming, MI 49509	420 S. Colfax Griffith, IN 46319
Phone Number	**Phone Number**	**Phone Number**
(616) 698-8880	(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 000 003 334	MID 055 855 373	IND 016 360 265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

WASTE INFORMATION

LOT NO.	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name).	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container No.	Container Type	Form: Solid	Form: Liquid	Form: Gas	Form: Sludge	Total Weight or Volume	Units	Hazardous or Liquid Waste Number
1.	Methyl Ethyl Ketone	Flammable	1193	07	1	DR		X			00055	gal	F005
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 Bruce Hein — Date Shipped MO. DAY YEAR: 8,2,6,8,2

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 Signature ② Russell L Hemminger — Date(s) Received 0,8,2,6,8,2

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 Dunfee — Facility Site EPA I.D. Number IND 016 360 265 — ☒ Accepted ☐ Rejected — Date Received 8 26 82

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.

HAZARDOUS WASTE MANIFEST

00100
MANIFEST DOCUMENT NUMBER
0024002
SHIPPER NUMBER

STRAND TRUCKING
NAME OF CARRIER (SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	INTK900107693	RANSBERG EX. INDIANAPOLIS IND 3939 W. 56TH ST. 317-298-5972	2-17-81
TRANSPORTER # 1	ILT0006468	101364 2 KENTON STRAND TRKG CREST WOOD, ILL 312-385-3440	2-17-81
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	AMERICAN CHEMICAL SVC. GRIFFITH IND 420 S. COLFAX 219 924-4370	2/18/81
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
65 55gal DRUMS	X	F005	FLAMMABLE LIQ 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

[signature] 2/17/81
GENERATOR'S SIGNATURE DATE

TRAILER SPOTTED 2/18/81 AT DOCK

This is to certify acceptance of the hazardous waste shipment.

[signature] 1-2-17-81
TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

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

[signature] 2/18/81
TSDF SIGNATURE DATE

PUMPED TO 142E T-63 3/2/81 [signature]

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TRANSPORTER #2

000643

HAZARDOUS WASTE MANIFEST

ORIGINAL – NOT NEGOTIABLE

MANIFEST DOCUMENT NUMBER: 7287

SHIPPER NUMBER: 0079/021

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

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	INT190010769	Ransburg Corp.-Electrostatic Equip.Div., 3939 W. 56th St., Indianapolis, IN 46054 317-298-5000	8/26/81
TRANSPORTER # 1	ILD069506160	Mr. Frank, Inc.	8/26/81
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chemical Service P.O.Box 190, Griffith, IN 46319 219-924-4370	9/2/81
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)
		P017	Paint residues generated from industrial painting					1 55 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

STYLE F-50 © LABELMASTER CHICAGO, IL 60620

FILE COPY

00061

HAZARDOUS WASTE MANIFEST

ORIGINAL – NOT NEGOTIABLE

MANIFEST DOCUMENT NUMBER

7287
SHIPPER NUMBER

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

0079/021
CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	INT190010769	Ransburg Corp.-Electrostatic Equip.Div., 3939 W. 56th St., Indianapolis, IN 46054 317-298-5000	8/26/81
TRANSPORTER # 1	ILD069506160	Mr. Frank, Inc.	8/26/81
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chemical Service P.O.Box 190, Griffith, IN 46319 219-924-4370	8/26/81
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)
		P017	Paint residues generated from industrial painting					450gal.		

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.

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.

X
TSDF SIGNATURE DATE

TO 21R T-53 8/26/81 gm

8/26/81

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TSDF COPY

000645

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. MIG0000010378 — Manifest Document No. 2861 94
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
RAPID ENGINEERING, INC.
2690 Elmridge, N.W., Grand Rapids, MI 49504

4. Generator's Phone (616) 453-6331

A. State Manifest Document Number: MI 0828694
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: IND011636026 5
G. State Facility's ID:
H. Facility's Phone: (219) 924-4370

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER). HM		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.	N/H
a.	X	WASTE PAINT RELATED MATERIAL Flammable Liquid NA1263	001	DM	00055	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: MARTIN M. KUKS
Signature: Martin M Kuks
Date: Month Day Year 04 08 86

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: James Looks
Signature: James Looks
Date: Month Day Year 04 08 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: MURPHY
Signature:
Date: Month Day Year 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)

TSDF COPY

204 R T50

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PR 5110 Rev. 4/85

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. IN I G 0 0 0 0 1 3 0 3 1 | Manifest Document No. 5 5 9 3 7 | 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
Rapid Engineering Inc
1100 7 Mile Rd NW, Comstock Park MI 49321
4. Generator's Phone (616) 784-0500

A. State Manifest Document Number INA 0355937
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone (616) 235-150(

5. Transporter 1 Company Name: VALLEY CITY REFUSE DISPOSAL, INC.
6. Use EPA ID Number: M I D 9 8 7 3 5 5 0 5 2
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 7 6 3 5 0 2 5 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 UN1263 (EPA Ignitable)	2	DM	1 1	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	Signature	Date Month	Day	Yea
T. Littlejohn Sr.		1 2	1 3	9

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Yea
Roger Newton	Roger Newton	1 2	1 3	9

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Yea

FACILITY

19. Discrepancy Indication Space

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

Printed/Typed Name	Signature	Date Month	Day	Yea
Whitaker A		1 2	1 6	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.

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

COPY 5. TSD COPY 20447C50320 (20)

0018275

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

PLEASE PRINT OR TYPE *(Form designed for use on elite (12-pitch) typewriter.)* Form Approved. OMB No. 2050-0039. Expires 9-3

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. M I G 0 0 0 0 1 3 0 3 1 | Manifest Document No. 3 7 9 8 5 | 2. Page 1 of 1 | Information in the shaded area is not required by Federal law. Items D, F, H and I are required State law.

3. Generator's Name and Mailing Address
Rapid Engineering Inc
1100 7 Mile Rd NW, Comstock Park MI 49321
4. Generator's Phone (616) 784-0500

A. State Manifest Document Number: INA 0437985
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) 235-150

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.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. Waste Paint Related Material Flammable Liquid UN1263 (EPA Ignitable)	[redacted]	D M	[redacted]	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.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good 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: J. ANTZAK — Signature: Jeff Antzak — Date: Month 08 Day 24 Year 90

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Roger Norton — Signature: Roger Norton — Date: Month 08 Day 24 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: Whitaker A — Signature: [signature] — Date: Month 8 Day 31 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/4-89)

212TCT50 9/4

COPY 5. TSD COPY

0018276

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.
M I G 0 0 0 0 1 8 0 3 1 5	9 9 1 9 0	1	

3. Generator's Name and Mailing Address
RAPID ENGINEERING, INC.
1100 7 Mile Road, N.W., Comstock Park, MI 49321

A. State Manifest Document Number: INA 0159190

4. Generator's Phone (616) 784-0500

B. State Generator's ID

5. Transporter 1 Company Name: VALLEY CITY REFUSE DISPOSAL, INC.

6. US EPA ID Number: I N D 9 8 1 9 5 6 0 6 3

C. State Transporter's ID

D. Transporter's Phone (616) 235-1500

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE, INC.
420 S. Colfax, P.O. Box 190
Griffith, IN 46319-0190

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

G. State Facility's ID

H. Facility's Phone (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt./Vol.	State Waste No.
a. WASTE PAINT RELATED MATERIAL, (Ignitable) Flammable Liquid, NA1263	2	DM	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

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If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good 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
J. L. Bridge Jr.		10	27	87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Earl W. Coons	Earl W. Coons	10	27	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	Harrold F. Schmidt	11	2	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 202/126-2675.

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865 2-204R-T-50 11/3/87 gm

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

INA 0159190

012542

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.: MIGOOOO103789012 / 1

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

3. Generator's Name
RAPID ENGINEERING, INC.
2690 Elmridge NW, Grand Rapids, MI 49504
4. Generator's Phone (616) 453-6331

A. State Manifest Document Number: IN 099012
B. State Generator's ID:

5. Transporter 1 Company Name: VALLEY CITY REFUSE DISPOSAL, INC.
6. US EPA ID Number: MIDO55855373
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: INDO16360265
G. State Facility's ID:
H. Facility's Phone: (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	15. Waste No.
GENERATOR a. WASTE PAINT RELATED MATERIAL (Ignitable) Flammable Liquid NA1263	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.

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Printed/Typed Name	Signature	Month	Day	Year

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date: Month	Day	Year
[illegible]	[illegible]	1	7	17

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date: Month	Day	Year

FACILITY

19. Discrepancy Indication Space

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

Printed/Typed Name	Signature	Month	Day	Year
MIKE PAPA	[signature]	1	7	17

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

T.S.D. DETACH AND RETAIN THIS COPY

MRC 1-204K TSD

012541

IN 099012

DNR

MICHIGAN DEPARTMENT OF NATURAL RESOURCES

DO NOT WRITE IN THIS SPACE
ATT. ☐ DIS. ☐ REJ. ☐

Required under authority of Act 64, P.A. 1979, as amended and Act 136, P.A. 1969.

Failure to file is punishable under section 299.548 MCL or Section 10 of Act 136, P.A. 1969.

Please print or type.

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. / Manifest Document No.: MIGOOOO103782356

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
RAPID ENGINEERING, INC.
2690 Elmridge NW, Grand Rapids, MI 49504

4. Generator's Phone (616) 453-6331

A. State Manifest Document Number: MI09237756

B. State Generator's ID:

5. Transporter 1 Company Name: VALLEY CITY REFUSE DISPOSAL, INC.

6. US EPA ID Number: MIDO558553773

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) 924-1370

11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.	
a. X WASTE PAINT RELATED MATERIAL (Ignitable) Flammable Liquid NA1263	001	DM	055	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

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GENERATOR

Printed/Typed Name: Jim L. Lillibridge Sr — Signature: Jim Lillibridge — Date: Month Day Year 10 24 87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: JIM REITSMA — Signature: Jim Reitsma — Date: Month Day Year 10 24 87

18. Transporter 2 Acknowledgement or Receipt of Materials

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

FACILITY

19. Discrepancy Indication Space

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

Printed/Typed Name: HAROLD F. SCHMIDT — Signature: Harold F. Schmidt — Date: Month Day Year 10 25 87

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOURS PER DAY.

EPA Form 8700-22 (Rev. 4-85)

TSDF COPY

PR 5110 Rev. 2/2/86

1-204R TSD

B

012539

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

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. M·I·G·0·0·0·0·1·8·0·3·1 | Manifest Document No. 8·9·4·6·5 | 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
RAPID ENGINEERING INC.
1100 7-MILE RD. N.W. COMSTOCK PARK, MI. 49321

A. State Manifest Document Number INA 0189465

B. State Generator's ID

4. Generator's Phone (617) 784-0500

5. Transporter 1 Company Name: VALLEY CITY REFUSE DISPOSAL, INC.
6. Use EPA ID Number: M·I·D·9·8·1·9·5·6·0·6·3
C. State Transporter's ID
D. Transporter's Phone (616) 235-1500

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

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
420 S. Colfax, P.O. Box 190
Griffith, IN 46319-0190
10. Use EPA ID Number: I·N·D·0·1·6·3·6·0·2·6·5
G. State Facility's ID
H. Facility's Phone (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE PAINT RELATED MATERIAL (Ignitable) FLAMMABLE LIQUID NA1263	2	D·M	1/10	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

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GENERATOR

Printed/Typed Name	Signature	Month	Day	Year
JEFF WATSAK		04	14	88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Roger Norton	Roger Norton	04	14	88

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

19. Discrepancy Indication Space

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

Printed/Typed Name	Signature	Month	Day	Year
Harold F Schmitt	Harold F Schmitt	04	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 0189465

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

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

1-126K T63 4/20M
1-204K T50 7/1 D

0015348

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 1 8 0 3 1 — Manifest Document No. 6 6 9 4 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
Rapid Engineering Inc.
1100 7 Mile Rd NW, Comstock Park, MI 49321
4. Generator's Phone (617) 784-0500

A. State Manifest Document Number: INA 0266940
B. State Generator's ID:

5. Transporter 1 Company Name: VALLEY CITY REFUSE DISPOSAL, INC.
6. Use EPA ID Number: M I D 9 8 1 9 5 6 0 6 3
C. State Transporter's ID:
D. Transporter's Phone: (616) 235-1500

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

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
420 S. Colfax, P.O. Box 190
Griffith, IN 46319-0190
10. Use EPA ID Number: I N D 0 1 6 3 6 0 2 6 5.
G. State Facility's ID:
H. Facility's Phone: (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
GENERATOR a. Waste paint related material (Ignitable) Flammable Liquid NA1263	2	DM	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 government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good 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
Jim Lillibridge Sr	Jim Lillibridge Sr	11	30	88

TRANSPORTER
17. Transporter Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year
Roger Norton	Roger Norton	11	30	88

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year

FACILITY
19. Discrepancy Indication Space

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

Printed/Typed Name	Signature	Date Month	Day	Year
WHITAKER AL	WHITAKER AL	12	2	88

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

COPY 5. TSD COPY

2047CTSD 12/8

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0266940

00153A9

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 1 8 0 3 1
Manifest Document No.: 5 5 8 5 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
Rapid Engineering Inc
1100 7 Mile Rd NW, Comstock Park MI 49321
4. Generator's Phone (616) 784-0500

A. State Manifest Document Number: INA 0355856
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 5 0 6 3
C. State Transporter's ID:
D. Transporter's Phone: (616) 235-1500

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

9. Designated Facility Name and Site Address
American Chemical Service
420 S. Colfax, PO Box 190
Griffith IN 46319-1090
10. Use EPA ID Number: I N D 0 1 6 3 6 0 2 6 5
G. State Facility's ID:
H. Facility's Phone: (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. Waste Paint Related Material (Ignitable) Flammable Liquid UN1263	2	D M	110	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.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good 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: JEFF ANTZAK
Signature: Jeff Antzak
Date: Month 11 Day 27 Year 89

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Roger Norton
Signature: Roger Norton
Date: Month 11 Day 27 Year 89

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

FACILITY
19. Discrepancy Indication Space

20 Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Whitaker A
Signature: A Whitaker
Date: Month 12 Day 8 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.

INA0355856

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

COPY 5. TSD COPY 20 VCT 50 7/31

0016799

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 1969.

Failure to file is punishable under section 299.548 MCL or Section 10 of Act 138, 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. M I G 0 0 0 0 0 4 1 3 5 — Manifest Document No. 3 5 8 1 0

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
Rapid-Line Mfg.
4900 Clyde Park, S.W. Grand Rapids, MI 49509

4. Generator's Phone (616) 531-3400

A. State Manifest Document Number: MI 0535810

B. State Generator's ID:

5. Transporter 1 Company Name: Valley City Refuse Disposal, Inc.

6. US EPA ID Number: M I D 0 5 5 8 5 5 3 7 3

C. State Transporter's ID:

D. Transporter's Phone:

7. Transporter 2 Company Name:

8. US EPA ID Number:

E. State Transporter's ID:

F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Service, Inc.
420 S. Colfax, P.O. Box 190
Griffith, IN 46319

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

G. State Facility's ID:

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

11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER). HM		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.	N/H
a.	X Compound Paint Thinning Liquid Flammable Liquid 1142	2	DM	110	G	D001	H
b.							
c.							
d.							

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

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

Printed/Typed Name: RAY ROSTUCHIK — Signature: [signature] — Date: Month 10 Day 30 Year 89

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: JACK RUSTER — Signature: Jack Ruster — Date: Month 10 Day 30 Year 89

18. Transporter 2 Acknowledgement or Receipt of Materials

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

19. Discrepancy Indication Space

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

Printed/Typed Name: R RUSHAK — Signature: R Rushak — Date: Month 11 Day 14 Year 89

GENERATOR

TRANSPORTER

FACILITY

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOURS PER DAY.

EPA Form 8700-22 (3-84)

TSDF COPY 204 F T-50 007276

PR 5110 Rev. 7/84

STATE OF MICHIGAN

Rev. 8/81

WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS) ☐ Act 136 Waste ☐ Other MI 0286729

IDENTIFICATION

Generator's Name	Primary Transporter's Name	Treatment, Storage or Disposal Facility
Rapid-Line Mfg.	Valley City Refuse Disposal, Inc.	American Chemical Service, Inc.
Site Address	**Transporters Address**	**Facility Address**
4900 Clyde Park, S.W. Grand Rapids, MI 49509	2650 Thornwood, S.W. Wyoming, MI 49509	420 S. Colfax Griffith, IN 46319
Phone Number	**Phone Number**	**Phone Number**
(616) 531-3400	(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 000 004 135	MID 055 855 373	IND 016 360 265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES — WASTE INFORMATION

LOT NO.	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name).	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container No.	Container Type	Form: Solid	Form: Liquid	Form: Gas	Form: Sludge	Total Weight or Volume	Units	Hazardous or Liquid Waste Number
1.	Waste Compound Paint Thinning Liquid	Flammable Liquid	1142	08	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 1969 PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature ① Raymond Rowlucker — Date Shipped MO. DAY YEAR: 08 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 H870450 — Transporter Signature ② Arnold Dykstra — Date(s) Received 08 22 84

Subsequent Transporter Vehicle I.D. No's — Subsequent transporter(s) signature(s) ③

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF COMPLETES

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature ④ — ☒ Accepted ☐ Rejected — Date Received 08 27 84

Facility Site EPA I.D. Number IND 016 360 265

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 124K T-50

STATE OF MICHIGAN

Rev. 8/81

WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS) ☐ Act 136 Waste ☐ Other MI 0286574

IDENTIFICATION

Generator's Name	Primary Transporter's Name	Treatment, Storage or Disposal Facility
Rapid-Line Mfg.	Valley City Refuse Disposal, Inc.	American Chemical Service, Inc.
Site Address	**Transporters Address**	**Facility Address**
4900 Clyde Park, S.W. Grand Rapids, MI 49509	2650 Thornwood, S.W. Wyoming, MI 49509	420 S. Colfax Griffith, IN 46319
Phone Number	**Phone Number**	**Phone Number**
(616) 531-3400	(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 000 004 135	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:

0037274

GENERATOR COMPLETES — WASTE INFORMATION

LOT NO.	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name).	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container No.	Container Type	Form: Solid	Form: Liquid	Form: Gas	Form: Sludge	Total Weight or Volume	Units	Hazardous or Liquid Waste Number
1.	Waste Compound Paint Thinning Liquid	Flammable Liquid	1142	0,8	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 1969 PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature ① B L Austin — Date Shipped MO. DAY YEAR: 6 5 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 14-04 59

Subsequent Transporter Vehicle I.D. No's

Transporter Signature ② Jack Pratt — Date(s) Received: 6 5 84

Subsequent transporter(s) signature(s) ③

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF COMPLETES

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature ④ — ☒ Accepted ☐ Rejected — Date Received: 6 7 84

Facility Site EPA I.D. Number: IND 016 360 265

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.

204 R 1-50

TSDF COPY

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. MIG0000041355 Manifest Document No. 35961

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
Rapid-Line Mfg.
4900 Clyde Park, S.W., Grand Rapids, MI 49509

4. Generator's Phone (616) 531-3400

A. State Manifest Document Number: MI 0535961

B. State Generator's ID:

5. Transporter 1 Company Name: Valley City Refuse Disposal, Inc.

6. US EPA ID Number: MID055853733

C. State Transporter's ID:

D. Transporter's Phone: (616) 538-8499

7. Transporter 2 Company Name:

8. US EPA ID Number:

E. State Transporter's ID:

F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Service, Inc.
420 S. Colfax, P.O. Box 190
Griffith, IN 46319

10. US EPA ID Number: IND016360265

G. State Facility's ID:

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

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER). HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.	N/H
a.	X Waste Paint Related Material Flammable Liquid NA1263	2	DM	110	G	D001	H
b.							
c.							
d.							

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above: A. S

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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: RAYMOND FRED ROSTECHER
Signature: Raymond Fred Rostecher
Date: Month 01 Day 29 Year 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jim Reitsma
Signature: Jim Reitsma
Date: Month 01 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: R MURPHY
Signature:
Date: Month 1 Day 31 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)

TSDF COPY 204 E T-50

PR 5110 Rev. 7/84

UJ8104

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

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.

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MIG0100010041351216171318 — 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
RAPID-LINE MANUFACTURING
4900 CLYDE PARK, S.W., GRAND RAPIDS, MI 49509

A. State Manifest Document Number: MI 0626736

B. State Generator's ID:

4. Generator's Phone (616) 531-3400

5. Transporter 1 Company Name: VALLEY CITY REFUSE DISPOSAL, INC.

6. US EPA ID Number: MID055855373

C. State Transporter's ID:

D. Transporter's Phone: (616) 538-8499

7. Transporter 2 Company Name:

8. US EPA ID Number:

E. State Transporter's ID:

F. Transporter's Phone:

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICES, INC.
420 S. COLFAX, P.O. Box 190
GRIFFITH, IN 46319

10. US EPA ID Number: IND011613602165

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 PAINT RELATED MATERIAL FLAMMABLE LIQUID NA1263	X	2	DM	100	G	D001	H
b.							
c.							
d.							

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

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

GENERATOR

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

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Roger Norton — Signature: Roger Norton — Date: Month Day Year 09 26 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: FRANK PRICE — Signature: Frank Price — Date: Month Day Year

EPA Form 8700-22 (3-84)

TSDF COPY 204R T-50

PR 5110 Rev. 7/84

088105

DNR
MICHIGAN DEPARTMENT OF NATURAL RESOURCES

DO NOT WRITE IN THIS SPACE
ATT. ☐ DIS. ☐ REJ. ☐

Required under authority of Act 64, P.A. 1979, as amended and Act 136, P.A. 1969.

Failure to file is punishable under section 299.548 MCL or Section 10 of Act 136, P.A. 1969.

Please print or type.

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. M I 6 0 0 0 0 0 4 1 3 5 — Manifest Document No. 0 3 8 8 2

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
RAPID-LINE MANUFACTURING
4900 Clyde Park, S.W., Grand Rapids, MI 49509

4. Generator's Phone (616) 531-3400

A. State Manifest Document Number MI 0703882

B. State Generator's ID

5. Transporter 1 Company Name: VALLEY CITY REFUSE DISPOSAL, INC.

6. US EPA ID Number: M I D 0 5 5 8 5 5 3 7 3

C. State Transporter's ID

D. Transporter's Phone (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: I N D 0 1 6 3 6 0 2 6 5

G. State Facility's ID

H. Facility's Phone (219) 924-4370

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER).	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.	N/H
a.	WASTE PAINT RELATED MATERIAL Flammable Liquid NA1263	X	13	DM	1610	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: KENT BOURSICY — Signature: [signature] — Date: Month Day Year

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Butch Romero — Signature: [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: FRANCE — Signature: [signature] — Date: Month Day Year

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 204RT-501

PR 5110 Rev. 4/85

CJ8705

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.: MIG0000041353536

2. Page 1 of: 1

Information in the shaded areas is not required by Federal law

3. Generator's Name
RAPID LINE MANUFACTURING
4900 Clyde Park SW, Grand Rapids, MI 49509
4. Generator's Phone (616) 531-3400

A. State Manifest Document Number: IN035356
B. State Generator's ID:
C. State Transporter's ID:
D. Transporter's Phone: (616) 538-8499

5. Transporter 1 Company Name: VALLEY CITY REFUSE DISPOSAL, INC.
6. US EPA ID Number: MID055853733
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.
GENERATOR a. WASTE PAINT RELATED MATERIAL Flammable Liquid NA1263	2	DM	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 presents and future threat to human health and the environment.

Printed/Typed Name	Signature	Month	Day	Year
Randy Hemstreet	Randy Hemstreet			

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials — Date

Printed/Typed Name	Signature	Month	Day	Year
Roger North	Roger North	12	17	86

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
Richard E Schmidt	Richard E Schmidt	12	17	86

IN 035356

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

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3-123π F63 13

012535

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

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. M.I.G.0.0.0.0.0.4.1.3.5 | Manifest Document No. 4.4.8.9.5 | 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
RAPID LINE MANUFACTURING
4900 Clyde Park S.W., Grand Rapids, MI 49509

A. State Manifest Document Number INA 0144695

4. Generator's Phone (616) 531-3400

B. State Generator's ID

5. Transporter 1 Company Name: VALLEY CITY REFUSE DISPOSAL, INC.

6. US EPA ID Number: M.I.D.9.8.1.9.5.6.0.6.3

C. State Transporter's ID

D. Transporter's Phone (616) 235-1500

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Service
420 S. Colfax, P.O. Box 190
Griffith, IN 46319-0190

10. US EPA ID Number: I.N.D.0.1.6.3.6.0.2.6.5

G. State Facility's ID

H. Facility's Phone (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	Waste No.
a. WASTE PAINT RELATED MATERIAL Flammable Liquid NA1263	4	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.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good 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: Randy Hiemstra | Signature: Randy Hiemstra | Date: Month 12 Day 15 Year 87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Roger Norton | Signature: Roger Norton | Date: Month 12 Day 15 Year 87

18. Transporter 2 Acknowledgement of Receipt of Materials

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

FACILITY

19. Discrepancy Indication Space

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

Printed/Typed Name: HARRELD F. SCHMIDT | Signature: Harreld F. Schmidt | Date: Month 12 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 0144695

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865 4-204R T-50 12/18/87

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

012538

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 D 0 0 0 0 0 4 1 3 5	5 9 1 4 9		

3. Generator's Name and Mailing Address
RAPID LINE MANUFACTURING
4900 Clyde Park S.W., Grand Rapids, MI 49509

4. Generator's Phone (616) 531-3400

A. State Manifest Document Number INA 0159149

B. State Generator's ID

5. Transporter 1 Company Name VALLEY CITY REFUSE DISPOSAL, INC.

6. Use EPA ID Number IN 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 IN D 0 1 6 3 6 0 2 6 5

G. State Facility's ID

H. Facility's Phone (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE PAINT RELATED MATERIAL, Flammable Liquid, NA1263	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.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good 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
Randy Winstead		6	20	87

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Jim Reitsma		6	22	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 in Item 19.

Printed/Typed Name	Signature	Month	Day	Year
Harold E. Schmidt		6	23	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 0159149

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865 4-126R T-63 11/3/87 gm

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

012537

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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Form Approved OMB No. 2000 0404 Expires 7 31 86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. / Manifest Document No.: MIG0000041357 / 9754 2

2. Page 1 of: 1

Information in the shaded areas is not required by Federal law

3. Generator's Name
RAPID LINE MANUFACTURING
4900 Clyde Park, SW, Grand Rapids, MI 49509
4. Generator's Phone (616) 531-3400

A. State Manifest Document Number: IN097542
B. State Generator's ID:

5. Transporter 1 Company Name: VALLEY CITY REFUSE DISPOSAL, INC.
6. US EPA ID Number: MID055853733
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.
GENERATOR					
WASTE PAINT RELATED MATERIAL Flammable Liquid NA1263	1	R D M	1 1 1 0	G	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

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

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

TRANSPORTER					
17. Transporter 1 Acknowledgement of Receipt of Materials					Date
Printed/Typed Name	Signature	Month	Day	Year	
		0 [illegible]			
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
[illegible]		0 [illegible]		

IN097542

EPA Form 8700-22A (Rev. 11-85)

UHWM 2/LP2

T.S.D. DETACH AND RETAIN THIS COPY

MRR 2-125R T63

012536

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

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. M I G O O O O O 4 1 3 5 | Manifest Document No. 4 7 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
RAPID LINE MANUFACTURING
4900 CLYDE PARK,S.W. GRAND RAPIDS, MI.49509
4. Generator's Phone (616) 531-3400

A. State Manifest Document Number: INA 0144734
B. State Generator's ID:

5. Transporter 1 Company Name: VALLEY CITY REFUSE DISPOSAL, INC.
6. Use EPA ID Number: M I D 9 8 1 9 5 6 0 6 3
C. State Transporter's ID:
D. Transporter's Phone: (616) 235-1500

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

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
420 S. Colfax, P.O. Box 190
Griffith, IN 46319-0190
10. Use EPA ID Number: I N D 0 1 6 3 6 0 2 6 5
G. State Facility's ID:
H. Facility's Phone: (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE PAINT RELATED MATERIAL FLAMMABLE LIQUID NA1263	5	D M	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 government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good 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
RONALD T. KATZBAN	Ronald T. Katzban	04	14	88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Roger Norton	Roger Norton	04	14	88

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

19. Discrepancy Indication Space

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

Printed/Typed Name	Signature	Month	Day	Year
HAROLD F. Schmidt	Harold F. Schmidt	04	19	88

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

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
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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

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 0144734

0015217

DNR

MICHIGAN DEPARTMENT OF NATURAL RESOURCES

DO NOT WRITE IN THIS SPACE

ATT. ☐ DIS. ☐ REJ. ☐ PR. ☐

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. 2050-0039 Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MIGD000041356 Manifest Document No. 134466

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
RAPID LINE MANUFACTURING
4900 CLYDE PARK, S.W. GRAND RAPIDS, MI. 49509

4. Generator's Phone (616) 531-3400

A. State Manifest Document Number MI 1313446

B. State Generator's ID

5. Transporter 1 Company Name: VALLEY CITY REFUSE DISPOSAL, INC.

6. US EPA ID Number: MID981956063

C. State Transporter's ID

D. Transporter's Phone (616) 235-1500

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
420 S. Colfax, P.O. Box 190
Griffith, IN 46319-0190

10. US EPA ID Number: IND016360265

G. State Facility's ID

H. Facility's Phone (219) 924-4370

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER).	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.	N/H
a.	X WASTE PAINT RELATED MATERIAL FLAMMABLE LIQUID NA1263	5	DM	175	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.

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GENERATOR

Printed/Typed Name: RONALD J VADZBAN | Signature: Ronald J. Vadzban | Date: Month Day Year

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: [illegible] | Signature: Roger Hunter | Date: 01 12 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: Alvin Whitaker | Date: 01 12 88

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. 9/86)

PA 511u Rev. 9/86

2047CTO 7/8

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00133345

DNR

MICHIGAN DEPARTMENT OF NATURAL RESOURCES

DO NOT WRITE IN THIS SPACE

ATT. ☐ DIS. ☐ REJ. ☐ PR. ☐

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. 2050-0039 Expires 9-30-88

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.

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. / Manifest Document No.: MIG0000041351 / 13209

2. Page 1 of 1

Information in the shaded areas is not required by Federal law

3. Generator's Name and Mailing Address
RAPID LINE MANUFACTURING
4900 CLYDE PARK, S.W. GRAND RAPIDS, MI. 49509

4. Generator's Phone (616) 531-3400

A. State Manifest Document Number: MI 1313209

B. State Generator's ID

5. Transporter 1 Company Name: VALLEY CITY REFUSE DISPOSAL, INC.

6. US EPA ID Number: MID981956063

C. State Transporter's ID

D. Transporter's Phone: (616) 235-1500

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
420 S. Colfax, P.O. Box 190
Griffith, IN 46319-0190

10. US EPA ID Number: IND016360265

G. State Facility's ID

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

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER).	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.	N/H
GENERATOR 3.	X HM WASTE PAINT RELATED MATERIAL (RQ85) FLAMMABLE LIQUID NA1263	1	DM	220	G	F003	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.

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Printed/Typed Name: Dan Clark — Signature: Dan Clark — Date: Month Day Year 8 12 25 88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Roger Norton — Signature: Roger Norton — Date: Month Day Year 8 12 25 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: Alvin Whitaker — Date: Month Day Year 8 12 26 88

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

2047C150 9/29/88

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001336

(012)

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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: SOG

Manifest Document No: 001

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
Ray's Auto Body
3151 Glenwood-Dyer Road Lynwood, Ill. 60411

4. Generator's Phone (312) 757-6660

A. State Manifest Document Number:

B. State Generator's ID: 0311685003

5. Transporter 1 Company Name: Super Cartage

6. US EPA ID Number: ILD052631696

C. State Transporter's ID: 1008

D. Transporter's Phone: 312-243-1110

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 Avenue
Griffith, Ind. 46319

10. US EPA ID Number: IND016360265

G. State Facility's ID: 9160890002

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	15. Waste No.
a. Flammable Liquid RA1263 Waste Paint Related Material	X	2	DM	110	1	D001
b.						
c.						
d.						

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above: 1=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.
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GENERATOR

Printed/Typed Name: Ray's Auto Body

Signature:

Month Day Year: 1 13 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 in Item 19.

Printed/Typed Name: HAROLD F. SCHMIDT

Signature:

Month Day Year: 2 10 87

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

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

MRK 2-125R TCS 18

TSDF COPY

012534

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER: 5-83-2

TO:	FROM:
T/S/D FACILITY American Chemical Service Inc.	Generator Raymark Inc.
E.P.A. ID Code No. IND 016 360 265	E.P.A. ID Code No. IND 006061477
Address 420 S. Colfax Ave.	Address 1204 Darlington Ave.
Destination Griffith, Ind. 46319	Origin Crawfordsville, Ind. 47933
Phone 219-924-4370	Phone 317-362-3500

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
191	Degreaser still bottoms	none	UN1710	F002	1045 gal.	none
6	Spent alcohol soln.	07	UN1230	F005	330 gal.	flammable liquid
1	Spent mineral spirits	01	UN1268	D001	55 gal.	none

PLACARDS REQUIRED

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding $____ Per ____

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

FREIGHT CHARGES PREPAID ☐ COLLECT ☐

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

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY ____
E.P.A. ID Code No. ____
Address ____
Destination ____

EMERGENCY RESPONSE INFORMATION

CONTACT Name Dennis Ward
Phone 317-362-3500
National Response Center 1-800-424-8802 in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature ____ Date 5/12/83

TRANSPORTER #1 ~~Strand Trucking Co.~~ E.P.A. ID No. ~~ILD 000645810~~
Address ~~4633 Cal-Sag Rd.~~
City ~~Crestwood~~ State ~~Ill.~~ Zip ~~60445~~ Phone ____
This is to certify acceptance of the hazardous waste shipment.
Transporter No. 1 Signature ____ Date ____

TRANSPORTER #2 ~~American Chemical Services, Inc.~~ E.P.A. ID No. ~~IND 016360265~~
Address ~~420 S. Colfax Ave.~~
City ~~Griffith~~ State ~~Ind.~~ Zip ~~46319~~ Phone ~~219-924-4370~~
This is to certify acceptance of the hazardous waste shipment.
Transporter No. 2 Signature ____ Date ____

TREATMENT/STORAGE/DISPOSAL FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.
T/S/D FACILITY Signature ____ Date ____

T/S/D F COPY To204RT-50 EPA 6-3-83

HAZARDOUS WASTE

HAZARDOUS WASTE

006118

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER: 4-82-4

TO:	FROM:
T/S/D FACILITY: American Chem. Services Inc.	Generator: Raybestos
E.P.A. ID Code No.: 016 360 265	E.P.A. ID Code No.: 006061477
Address: 420 S. Colfax Ave.	Address: 1204 Darlington Ave.
Destination: Griffith, Ind. 46319	Origin: Crawfordsville, Ind. 47933
Phone: 219-924-4370	Phone: 317-362-3500

HAZARDOUS WASTE

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
4	Spent Mineral Spirits	01	UN1268	D001	195 gal.	none
15	spent alcohol soln.	07	UN1230	F005	825 gal.	Flammable Liquid
2	spent acetone soln.	07	UN1090	F003	110 gal.	"
3	spent trichlorethylene	none	UN1710	F002	165 gal.	none

PLACARDS REQUIRED

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding $____ Per ____

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

FREIGHT CHARGES: PREPAID ☐ COLLECT ☐

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

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY ____
E.P.A. ID Code No. ____
Address ____
Destination ____

EMERGENCY RESPONSE INFORMATION

CONTACT Name: Dennis Ward
Phone: 317-362-3500
National Response Center 1-800-424-8802
in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature ____ Date 4/15/82

TRANSPORTER #1 Strand Trucking Co. E.P.A. ID No. ILT 000645810
Address 4695 Cal-Sag Rd.
City Crestwood, Illinois 60445 State Ill. Zip 60406 Phone 385-3440

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 1 Signature ____ Date ____

TRANSPORTER #2 ____ E.P.A. ID No. ____
Address ____
City ____ State ____ Zip ____ Phone ____

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 2 Signature ____ Date ____

TREATMENT/STORAGE/DISPOSAL FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.
T/S/D FACILITY Signature ____ Date ____

T/S/D F COPY To 204K T-50 GRM 4/15/82

002452

HAZARDOUS WASTE MANIFEST

HAZARDOUS WASTE

THIS SHIPPING ORDER must be legibly filled in, in ink, in Indelible Pencil, or in Carbon, and retained by the Agent.

MANIFEST DOCUMENT NUMBER: 2-81-8

TO:	FROM:
T/S/D FACILITY American Chem. Services Inc.	Generator Raybestos Friction Mtls. Co.
E.P.A. ID Code No. 016 360 265	E.P.A. ID Code No. IND 006061477
Address 420 S. Colfax Ave.	Address 1204 Darlington Ave.
Destination Griffith, Ind. 46319	Origin Crawfordsville, Ind. 47933
Phone 219-924-4370	Phone 317-362-3500

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz Mat I.D. No.	EPA Haz Waste No	WEIGHT	LABELS REQUIRED (or Exemption No.)
8	Spent Mineral Spirits	combustible liquid	UN1268	D001	440 gal	none
2	spent alcohol soln.	flammable liquid	UN1230	F005	110 gal	flammable liquid
6	Spent acetone soln.	flammable liquid	UN1090	F003	330 gal	flammable liquid

PLACARDS REQUIRED

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

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

(Signature of Consignor)

FREIGHT CHARGES: PREPAID ☐ COLLECT ☐

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

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY _____
E.P.A. ID Code No. _____
Address _____
Destination _____

EMERGENCY RESPONSE INFORMATION

CONTACT Name Dennis Ward
Phone 317-362-3500
National Response Center 1-800-424-8802
in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date 2/17/81

TRANSPORTER #1 ~~Strand Trucking Co.~~ E.P.A. ID No. ILT 000646810
Address ~~4699 Cal-Sag Rd.~~
City ~~Crestwood, Illinois 60445~~ State IL Zip 60406 Phone ~~312-385-8440~~ 385-8440

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature _____ Date 2/17/81

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY TRAILER SPOTTED 2/18/81 AT DOCK PUMPED 15 DRUMS TO 204 F. T-50 3/4/81 Jim Murphy

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

T/S/D FACILITY Signature _____ PUMPED 1 DRUM TO 232 F. T-50 3/13/81 Date 2/19/81 by Jim Murphy

TRANSPORTER #1 COPY

002453

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

Is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER: 8-82-10

TO:	FROM:
T/S/D FACILITY American Chemical Services, Ind.	Generator Raymark Corporation
E.P.A. ID Code No. IND 016360265	E.P.A. ID Code No. IND 006061477
Address 420 S. Colfax Ave.	Address 1204 Darlington Ave.
Destination Griffith, IN. 46319	Origin Crawfordsville, IN. 47933
Phone 219-924-4370	Phone 317-362-3500

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz.Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
10	Spent Alcohol Solution	07	UN1230	F005	550 gal	Flammable Liquid
9	Spent Acetone Solution	07	UN1090	F003	495 gal	Flammable Liquid
9	Spent Mineral Spirits	01	UN1268	D001	495 gal	None
11	Spent Trichlorethylene	None	UN1710	F002	605 gal	None

PLACARDS REQUIRED

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding $____ Per ____

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

FREIGHT CHARGES: PREPAID ☐ COLLECT ☐

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

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY ____
E.P.A. ID Code No. ____
Address ____
Destination ____

EMERGENCY RESPONSE INFORMATION

CONTACT Name ~~Dennis Ward~~
Phone ~~317-362-3500~~
National Response Center 1-800-424-8802 in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature ____ Date ____

TRANSPORTER #1 ~~Strand Trucking Co.~~ E.P.A. ID No. ~~ILD 000640819~~
Address ~~4699 Cal-Sag Rd.~~
City ~~Crestwood~~ State ~~IL~~ Zip ~~60445~~ Phone ~~312-385-3440~~

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature ____ Date ____

TRANSPORTER #2 ____ E.P.A. ID No. ____
Address ____
City ____ State ____ Zip ____ Phone ____

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature ____ Date ____

TREATMENT/STORAGE/DISPOSAL FACILITY

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

T/S/D FACILITY Signature ____ Date ____

HAZARDOUS WASTE

T/S/D F COPY On dock
To 204K T-50 ERM 9.10.82 ~~9.8.82~~

002451

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. / Manifest Document No.: MND043164962
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: RAYMOND — AUTO BODY 1075 PIGLET Butler RTE.
A. State Manifest Document Number: MN 0042153
B. State Generator's ID:
4. Generator's Phone (612) 488-2588 ST PAUL MN 55104
5. Transporter 1 Company Name: AUTOBODY SUPPLY, INC
6. US EPA ID Number: MND023023377
C. State Transporter's ID:
D. Transporter's Phone:
7. Transporter 2 Company Name: ABC SERVICES
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, INDIANA 46319
10. U.S 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	Waste No.
a. WASTE PAINT RELATED MATERIAL FLAMMABLE LIQUID NA1263 F003	X	5	DM	25	20	F003
b.						
c.						
d.						

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.
Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

GENERATOR — Printed/Typed Name: John W. Krostag — Signature: John Krostag — Date: Month 06 Day 16 Year 86

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials — Printed/Typed Name: Douglas A Weimer — Signature: Douglas A Weimer — Date: Month 06 Day 16 Year 86
18. Transporter 2 Acknowledgement of Receipt of Materials — Printed/Typed Name: FRANK KLEES — Signature: Frank Klees — Date: Month 06 Day 20 Year 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: ATTENDANT — Signature: — Date: Month 06 Day 23 Year 86

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

012006

MINNESOTA POLLUTION CONTROL AGENCY
DIVISION OF SOLID AND HAZARDOUS WASTE
1935 WEST COUNTY ROAD B-2
ROSEVILLE, MN 55113-2785
ATTN: HWIMS

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

For MPCA use only

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MND043148621 — Manifest Document No. 42190
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: Raymond Auto Body, 1075 Pierce Butler Rd, St. Paul, MN 55104
A. State Manifest Document Number: MN 0042190
B. State Generator's ID:
4. Generator's Phone: (612) 488-0588

5. Transporter 1 Company Name: ABC SERVICES, INC.
6. US EPA ID Number: WID076159839
C. State Transporter's ID:
D. Transporter's Phone: 414-671-6222

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

9. Designated Facility Name and Site Address: AMERICAN CHEMICAL SERVICE, 420 SOUTH COLFAX, GRIFFITH, IN 46319
10. U.S EPA ID Number: IND016360265
G. State Facility's ID:
H. Facility's Phone: 219-924-4370

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	FLAMMABLE LIQUID, NOS UN1993	X	4	DM	220	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: John Krostag — Signature: John Krostag — Date: Month 9 Day 4 Year 86

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Kip Nelson — Signature: Kip Nelson — Date: Month 9 Day 4 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 — Signature — Date: Month Day Year

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 PO-00371-01(10 84)

COPY 4: TSDF RETAIN

125 R 762

012007

HAZARDOUS WASTE MANIFEST

ORIGINAL – NOT NEGOTIABLE

10001
MANIFEST DOCUMENT NUMBER

10001
SHIPPER NUMBER

#127
CARRIER NUMBER

NAME OF CARRIER (SCAC)

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND 005158019	RCA CORP HANAWALT RD. MONTICELLO IND. 47960 219-583-5111	
TRANSPORTER # 1	INT190011700	AREA SANITARY SERVICE 503 S. MAIN MONTICELLO IND 47960 219-583-8990	
TRANSPORTER # 2 (if required)	NA	NA	
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chemical Service PO Box 190 GRIFFITH IND 46319 219-92404370	3/19
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	NA	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)
BULK 1600 gals 19 drums		NA	WASTE SOLVENT	NA 9189	NA	NA	VOL.	1600gls		

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 3/18/81

This is to certify acceptance of the hazardous waste shipment.

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

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

TO 1122 T-63 3/19/81

TSDF SIGNATURE — DATE

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TSDF COPY

000636

HAZARDOUS WASTE MANIFEST

ORIGINAL — NOT NEGOTIABLE

10002
MANIFEST DOCUMENT NUMBER

10002
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	IND 005158019	RCA HANAWALT RD. MONTICELLO IND 47960 219-583-5111	
TRANSPORTER # 1	IMT190011700	AREA SANITARY SERVICE 503 S MAIN MONTICELLO IND 47960 219-583-8990	
TRANSPORTER # 2 (if required)	NA	NA	
TSDF TREATMENT STORAGE OR DIS— POSAL FACILITY	IND016360265	AMERICAN CHEMICAL SERVICE PO Box 190 GRIFFITH IND 46319 219-924-4370	3/3/81
TSDF TREATMENT STORAGE OR DIS— POSAL FACILITY	NA	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)
BULK		NA	WASTE SOLVENT 91	NA 89	NA	NA	VOL	1600		

SPECIAL HANDLING INSTRUCTIONS

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

COMMENTS

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

PLACARDS TENDERED
Yes ☒ No ☐

REMIT
C.O.D. TO:
ADDRESS

COD Amt: $

C.O.D. FEE:
PREPAID ☐
COLLECT ☐ $

TOTAL CHARGES: $

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

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

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

_____ Signature

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

_____ (Signature of Consignor)

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

CERTIFICATION

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

R L Hunter 3/30/81
GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

3-30-81
TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

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

TO 109K T-63 3/31/81

TSDF SIGNATURE

3/31/81
DATE

5

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TSDF COPY

000635

HAZARDOUS WASTE MANIFEST

ORIGINAL — NOT NEGOTIABLE

10003
MANIFEST DOCUMENT NUMBER

10003
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	IND005158019	RCA HANAWALT RD MONTICELLO IND 47960 219-583-5111	
TRANSPORTER # 1	IMT190011700	AREA SANITARY SERVICE 503 S MAIN MONTICELLO IND 47960 219-583-8990	
TRANSPORTER # 2 (if required)	NA	NA	
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	AMERICAN CHEMICAL SERVICE PO BOX 190 GRIFFITH IND 46319 219-924-4370	6/16/81
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	NA	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)
BULK		NA	WASTE SOLVENT	NA 9189	NA	NA	VOL	1600		

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
Check box if charges are to be collected

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

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

_____ Signature

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

_____ (Signature of Consignor)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract) agrees 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

R L Hanawalt 6/15/81
GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

6-16-81
TRANSPORTER #1 SIGNATURE & DATE TRANSPORTER #2 SIGNATURE & DATE (if required)

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

6/16/81
TSDF SIGNATURE DATE

TO 125K T-43 6/16/81 0900

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TSDF COPY

000637

HAZARDOUS WASTE MANIFEST

ORIGINAL — NOT NEGOTIABLE

10004
MANIFEST DOCUMENT NUMBER

10004
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	IND005158019	RCA HANAWALT RD. MONTICELLO IND 47960 219-583-5111	
TRANSPORTER # 1	IMT190011700	AREA SANITARY SERVICE 503 S MAIN MONTICELLO IND 47960 219-583-8900	
TRANSPORTER # 2 (If required)	NA	NA	
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	AMERICAN CHEMICAL SERVICE PO BOX 190 GRIFFITH IND 46319 219-924-4370	6/30/81
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	NA	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)
BULK		NA	WASTE SOLVENT	NA 9189	NA	NA	VOL	1600		

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
Check box if charges are to be collected

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

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

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
(Signature of Consignor)

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

CERTIFICATION To WESTAGIT T-50 6/30/81 JPM

This is to certify that the above-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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000638

HAZARDOUS WASTE MANIFEST

ORIGINAL — NOT NEGOTIABLE

10005
MANIFEST DOCUMENT NUMBER

Area Sanitary Svc
NAME OF CARRIER (SCAC)

10005
SHIPPER NUMBER

#177
CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND 005158019	RCA HANAWALT RD MONTICELLO IND 47960 219-583-5111	8/19/81
TRANSPORTER # 1	IMT 190011700	AREA SANITARY SERVICE 503 S MXX MAIN MONTICELLO IND 47960 219-583-8990	8/19/81
TRANSPORTER # 2 (if required)	NA	NA	
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	AMERICAN CHEMICAL SERVICE POBOX 190 GRIFFITH IND 46319 219-924-4370	8/20/81
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	NA	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)
BULK		NA	WASTE SOLVENT Hazardous waste liquid NOS Flash point 0°F, 018°C	NA ~~0120~~ ~~0000~~ 1993	NA	NA	VOL	1600 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
Check box if charges are to be collected

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

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

_____ Signature

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

_____ (Signature of Consignor)

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

CERTIFICATION

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

This is to certify acceptance of the hazardous waste shipment.

Donlevy 8/19/81
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

K Lott 8/19/81
GENERATOR'S SIGNATURE DATE

TO EAST 210K T-50 8/26/81 9AM
TSDF SIGNATURE DATE

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TSDF COPY

000640

HAZARDOUS WASTE MANIFEST

10006
MANIFEST DOCUMENT NUMBER

10006
SHIPPER NUMBER

area Sanitary Serv.
NAME OF CARRIER (SCAC)

#127
CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND 005158019	RCA HAHAWALT RD. MONTICELLO IND 47960 219-583-5111	8/18/81
TRANSPORTER # 1	IMT 190011700	Area Sanitary Service 503 S. Main Monticello Ind 47960 219-583-8990	8/18/81
TRANSPORTER # 2 (If required)	NA	NA	
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND 0163602265	American Chemical Service PO Box 190 Griffith Ind 46319 219-924-4370	8/19/81
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)
Bulk 29		NA	Waste solvent flash point 15°	NA 1993	NA	NA	Vol.	1600 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

8/18/81
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

T-63 8/19/81

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TSDF COPY

000639

HAZARDOUS WASTE MANIFEST

10007
MANIFEST DOCUMENT NUMBER

10007
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	IND.005158019	RCA HANAWALT RD MONTICELLO IND 47960 219-583-5111	10-2-84
TRANSPORTER # 1	IMT 190011700	AREA SANITARY SERVICE 503 S MAIN MONTICELLO IND. 47960 219-583-8990	
TRANSPORTER # 2 (If required)	NA	NA	
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND 016360265	AMERICAN CHEMICAL SERVICE PO BOX 190 GRIFFITH IND 46319 219-924-4370	10/2
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	NA		

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)
Bulk		NA	Hazardous Waste-Liquid NOS Flash Point 0°F, -18°C	NA 1993	NA	NA	VOL	1000		

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

GENERATOR'S SIGNATURE DATE 10-2-84

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE 10-2-84

TRANSPORTER #2 SIGNATURE & DATE (if required)

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

TSDF SIGNATURE 10/2/84 DATE

TO 1245 I-63 10/2/84

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TSDF COPY

000641

HAZARDOUS WASTE MANIFEST

10008

10008
MANIFEST DOCUMENT NUMBER

10008
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	IND 005158019	RCA HANAWALT RD MONTICELLO IND 47960 219-583-5111	10/29/81
TRANSPORTER # 1	IMT 190011700	AREA SANITARY SERVICE 503 S MAIN MONTICELLO IND 47960 219-583-8990	10/29/81
TRANSPORTER # 2 (if required)	NA	NA	
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND 016360265	American Chemical Service POBox 190 Griffith Ind 46319 219-924-4370	10/30/81
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	NA		

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)
Bulk		NA	hazardous waste Liquid NOS flash point 0°F, -18°C	NA 1993	NA	NA	Vol	1600		

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

Scott Sweeney 10/29/81
GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.
Don Turner 10/29/81
TRANSPORTER #1 SIGNATURE & DATE TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.
[signature] 10/30/81
TSDF SIGNATURE DATE

5

STYLE F 50 © LABELMASTER CHICAGO, IL 60626 TO 125 T-63 10/30/81 JPM

TSDF COPY

000642

HAZARDOUS WASTE MANIFEST

10009

MANIFEST DOCUMENT NUMBER
10009

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	IND 005158019	RCA HANAWALT RD MONTICELLO IND 47960 219-583-5111	
TRANSPORTER # 1	IMT 190011700	AREA SANITARY SERVICE 503 S Main Monticello Ind 47960 219-583-8990	2-17-82
TRANSPORTER # 2 (If required)	NA	NA	
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND 016360265	American Chemical Service PO Box 190 Griffith Ind 46319 219-924-4370	2/17/82
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	NA	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)
Bulk		NA	hazardous waste liquid NOS flash point 0°F, -18°C	NA 1993	NA	NA	Vol	1600 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

_____ 2-17-82
GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

_____ 2-17-82
TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

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

_____ 2-17-82
TSDF SIGNATURE DATE

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TSDF COPY

Endock
To 210 F. 2/17/82 GRM T-50
002714

HAZARDOUS WASTE MANIFEST

10010
MANIFEST DOCUMENT NUMBER

10010
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	IND 005158019	RCA Hanawalt Rd. Monticello Ind 47960 219-583-5111	1600
TRANSPORTER # 1	IMT 190011700	Area Sanitary Service 503 S. Main Monticello Ind 47960 219-583-8990	3-3-82
TRANSPORTER # 2 (if required)	NA	NA	
TSDF TREATMENT & STORAGE OR DISPOSAL FACILITY	IND 016360265	American Chemical Service PO Box 190 Griffith In 46319 219-924-4370	3/3/82
TSDF TREATMENT & STORAGE OR DISPOSAL FACILITY	NA	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)
Bulk		NA	hazardous waste liquid NOS flash point 8°F , -18°C	NA 1993	NA	NA	Vol	1600		

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.

GENERATOR'S SIGNATURE — DATE: 3-3-82

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: 3/2/82

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To 109R T-63 GKN 3/3/82

TSDF COPY

002713

HAZARDOUS WASTE MANIFEST

10011

MANIFEST DOCUMENT NUMBER

10011

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	IND 005158019	RCA HANAWALT RD MONTICELLO IND 47690 219-583-5111	5/27/9
TRANSPORTER # 1	IMT 190011700	Area Sanitary Service 503 S. Main Monticello Ind. 47960 219-583-8990	5-27-82
TRANSPORTER # 2 (If required)	NA	NA	
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND 016360265	American Chemical Service PO Box 190 Griffith Ind 46319 219-924-4370	5/27/82
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	NA	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)
Bulk		NA	hazardous waste liquid NOS flash point 8°F, -18°C	NA 1993	NA	NA	Vol	1000 G.		

SPECIAL HANDLING INSTRUCTIONS

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

COMMENTS

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

PLACARDS TENDERED Yes ☒ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt. $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

TOTAL CHARGES: $

FREIGHT CHARGES

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

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

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

_____ Signature

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

_____ (Signature of Consignor)

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

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

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

Anthony L Tomasso 5-27-82
GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

Mike Sumon 5-27-82
TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

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

[illegible] Dunkel 5/27/85
TSDF SIGNATURE DATE

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To 124 Tc T-63 6RM 5.27.82

TSDF COPY

002712

HAZARDOUS WASTE MANIFEST

10012

MANIFEST DOCUMENT NUMBER

10012

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	IND 005158019	RCA HANAWALT RD MONTICELLO IND47960 219-583-5111	
TRANSPORTER # 1	IMT 190011700	Area Sanitary Service 503 S. Main Monticello Ind 47960 219-583-8990	
TRANSPORTER # 2 (if required)	NA	NA	
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND 06360265	American Chemical Service PO Box 190 Griffith Ind 46319 219-924-4370	7/22
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	NA	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)
Bulk	X	NA	hazardous waste liquid NOS flash point 0°F, -18°F	NA 1993	NA	NA	Vol	1600		

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 (Freight 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.

Robert D Duffy Safety Dept 7/22/82

GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

Continuous 7/22/82

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

7/22/85

DATE

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TO 112 K 7-63 GLM 7.22.82

TSDF COPY

002711

HAZARDOUS WASTE MANIFEST

10014
MANIFEST DOCUMENT NUMBER

10014
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	IND 005158019	RCA HANAWALT RD MONTICELLO IND 47960 219-583-5111	8-14-82
TRANSPORTER # 1	IMT 190011700	Area Sanitary Service 503 S. Main Monticello Ind 47960 219-583-8990	
TRANSPORTER # 2 (If required)	NA	NA	8-18-82
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND 016360265	American Chemical Service PO Box 190 Griffith Ind. 46319 2190924-4370	8/19/82
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	NA	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)
Bulk		NA	hazardous waste liquid NOS flash point 0°F, -18°C	NA 1993	NA	NA	Vol.	1600	Frt.	

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.

8-18-82
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

8/18/82
DATE

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TSDF COPY

002710

HAZARDOUS WASTE MANIFEST

10015
MANIFEST DOCUMENT NUMBER

10015
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	IND 005158019	RCA Hanswalt Rd. Monticello, Ind. 47960 219-583-5111	8/18/82
TRANSPORTER # 1	IMT 190011700	Area Sanitary Service 503 S. Main Monticello, Ind. 47960 219-5838009	8/19/82
TRANSPORTER # 2 (if required)	NA	NA	
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND 016360265	American Chemical Service PO Box 190 Griffith, Ind. 46319 219-924-4370	8/19/82
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	NA	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)
Bulk		NA	hazardous waste liquid NOS flash point 0°F, -18°C	NA 1993	NA	NA	Vol. [illegible]	1600 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 ☐ $

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

_____ 8/19/82
GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.
Mike Swanson 8-19-82
TRANSPORTER #1 SIGNATURE & DATE TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.
_____ 8/19/82
TSDF SIGNATURE DATE

5

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TO ATTACH COPY 3 HERE

TSDF COPY

002709

HAZARDOUS WASTE MANIFEST

10016
MANIFEST DOCUMENT NUMBER

10016
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	IND 005158019	RCA HANAWALT RD. MONTICELLO, IND. 47960 219-583-5111	
TRANSPORTER # 1	IMT 190011700	Area Sanitary Service 503 S. Main Monticello, Ind. 47960 219-583-8990	
TRANSPORTER # 2 (if required)	NA	NA	
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND 016360265	American Chemical Service PO Box 190 Griffith, Ind. 46319 219-924-4370	9/1/82
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	NA	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)
Bulk		NA	hazardous waste liquid NOS flash point 0°F, -18°C	NA 1993	NA	NA	Vol.	1000 Gm		

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.

Richard Lukey 9/1/82
GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

_____ 9/1/82
TRANSPORTER #1 SIGNATURE & DATE TRANSPORTER #2 SIGNATURE & DATE (if required)

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

T Dunfee 9/1/82
TSDF SIGNATURE DATE

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TE 210 2 7.50 GAL 9.1.82

TSDF COPY

002107

HAZARDOUS WASTE MANIFEST

10017
MANIFEST DOCUMENT NUMBER
10017
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	IND 005158019	RCA HANAWALT RD., MONTICELLO, IND. 47960 219-583-5111	
TRANSPORTER # 1	IMT 190011700	Area Sanitary Service 503 S. Main Monticello, Ind. 47960 219-583-8990	
TRANSPORTER # 2 (If required)	NA	NA	
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND 016360265	American Chemical Service PO Box 190 Griffith, Ind. 46319 219-924-4370	11/9/82
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	NA	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)
Bulk		NA	hazardous waste liquid NOS flash point 0°F, -18°C	NA 1993	NA	NA	Vol.	16.2		

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.

[signature] 11-2-82
TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (If required)

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

[signature] 11/8/82
TSDF SIGNATURE DATE

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TSDF COPY To 124 R 7-63 GRM 11-8-82

002708

HAZARDOUS WASTE MANIFEST

10018
MANIFEST DOCUMENT NUMBER

10018
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	IND 005158019	RCA HANAWALT RD. MONTICELLO IND 47960 219-583-5111	11-9-82
TRANSPORTER # 1	IMT 190011700	AREA SANITARY SERVICE 503 S. MAIN MONTICELLO IND 47960 219-583-8990	
TRANSPORTER # 2 (if required)	NA	NA	
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND 016360265	AMERICAN CHEMICAL SERVICE PO BOX 190 GRIFFITH IND. 46319 219-924-4370	11/9/82
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	NA	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)
BULK		NA	hazardous waste liquid NOS flash point 0°F, -18°C	NA 1993	NA	NA	VOL	1000		

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

11-9-82
GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

11-9-82
TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

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

11/9/82
TSDF SIGNATURE DATE

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TSDF COPY

TO211R 11.9.82 T-50
EAH
002707

HAZARDOUS WASTE MANIFEST

10019

MANIFEST DOCUMENT NUMBER
10019

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	IND 005158019	RCA HANAWALT RD. MONTICELLO IND 47960 219-583-5111	11/9/82
TRANSPORTER # 1	IHT 190011700	AREA SANITARY SERVICE 503 S. MAIN MONTICELLO IND 47960 219-583-8990	
TRANSPORTER # 2 (if required)	NA	NA	
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND 016360265	AMERICAN CHEMICAL SERVICE PO BOX 190 GRIFFITH IND 46319 219-924-4370	11/10/82
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	NA	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	UNIT 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)
BULK		NA 1993	hazardous waste liquid NOS flash point 0°F, -18°C	NA	NA	NA	VOL	1600		

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.

Willie Sisson 11-9-82

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

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

J Brumfield 11/10/82

TSDF SIGNATURE DATE

5

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TSDF COPY To 125 RT-63 GRM 11.10.82

002708

HAZARDOUS WASTE MANIFEST

10020

MANIFEST DOCUMENT NUMBER

10020

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	IND 005158019	RCA HANAWALT RD. MONTICELLO IND 47960 219-583-5111	11-12-82
TRANSPORTER # 1	IHT 190011700	AREA SANITARY SERVICE 503 S. MAIN MONTICELLO IND 47960 219-583-8990	
TRANSPORTER # 2 (if required)	NA	NA	
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND 016360026	AMERICAN CHEMICAL SERVICE PO BOX 190 GRIFFITH 46319 219-924-4370	11/15/82
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	NA	Indiana 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)
Bulk		NA	hazardous waste liquid NOS flash point C°F,-18 C	NA 1993	NA	NA	Vol.	1100 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 ☐ $

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

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

_____ Signature

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

_____ (Signature of Consignor)

TOTAL CHARGES: $

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

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

CERTIFICATION

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

GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

Mike Lamson 11-15-82

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

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

TSDF SIGNATURE DATE 11/15/82

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TSDF COPY To 124 F.T-63 6/W 11-15-82

002705

HAZARDOUS WASTE MANIFEST

10021
MANIFEST DOCUMENT NUMBER

10021
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	IND 005158019	RCA HANAHALT RD. MONTICELLO IND47960 219-583-5111	11-24-82
TRANSPORTER # 1	IMT 190011700	AREA SANITARY SERVICE 503 S. MAIN MONTICELLO IND 47960 219-583-8990	
TRANSPORTER # 2 (if required)	NA	NA	
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND 016360265	AMERICAN CHEMICAL SERVICES PO BOX 190 GRIFFITH IND 46319 219-924-4370	11/24/82
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	NA	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)
Bulk		NA	hazardous waste liquid NOS flash point 0°F, -18°C	NA 1993	NA	NA	Vol.	1600	/	

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 124 RT-63 6KM 11.24.82

002704

HAZARDOUS WASTE MANIFEST

10022
MANIFEST DOCUMENT NUMBER
10022
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	IND 005158019	RCA HANAWALT RD. MONTICELLO IN 47960 219-583-5111	11/30/82
TRANSPORTER # 1	IMT 198011700	AREA SANITARY SERVICE 503 S. MAIN MONTICCELLO IND 47960 219-583-8990	
TRANSPORTER # 2 (if required)	NA	NA	
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND 016360265	AMERICAN CHEMICAL SERVICE PO BOX 190 GRIFFITH IND 46319 219-924-430-	11/30/82
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	NA	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)
Bulk		NA	hazardous waste liquid NOS flash point 0°F,-18°C	NA 1993	NA	NA	VOL.	1600 G		

SPECIAL HANDLING INSTRUCTIONS

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

COMMENTS

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

PLACARDS TENDERED
Yes ☒ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

TOTAL CHARGES: $

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

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

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

_____ Signature

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

_____ (Signature of Consignor)

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

CERTIFICATION

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

_____ _____
GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

_____ 11-30-82
TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

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

_____ 11/30/82
TSDF SIGNATURE DATE

5

STYLE F 50 © LABELMASTER CHICAGO, IL 60626

To TSDF-63 GRM 11 30 82

TSDF COPY

002703

HAZARDOUS WASTE MANIFEST

10023

MANIFEST DOCUMENT NUMBER

10023

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	IND 005158019	RCA HANAWALT RD. MONTICELLO IND 47960 219-583-5111	12-1-82
TRANSPORTER # 1	IDT 190011700	AREA SANITARY SERVICE 503 S MAIN MONTICELLO IND 47960 219-583-8990	
TRANSPORTER # 2 (if required)	NA	NA	
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND 016360265	AMERICAN CHEMICAL SERVICE PO BOX 190 GRIFFITH IND 46319 219-924-4370	12/1/82
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	NA	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)
Bulk		NA	hazardous waste liquid NOS flash point 0°F, -18°C	NA 1993	NA	NA	Vol.			

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 bills 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.

_____ 12-1-82
TRANSPORTER #1 SIGNATURE & DATE TRANSPORTER #2 SIGNATURE & DATE (if required)

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

_____ 12/1/82
TSDF SIGNATURE DATE

5

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

To 125 RT-63 GICM 12-1-82

TSDF COPY

002766

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. IND004320032 | Manifest Document No. 00074 | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law.

GENERATOR

3. Generator's Name and Mailing Address
Rea Magnet Wire Company
3600 E. Pontiac Street, Ft. Wayne, IN 46896

4. Generator's Phone (219) 424-4252

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Thomas Solvent, Inc. of IN | 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 Company
400 S. Colfax
Griffith, IN
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.	Hazardous Waste Liquid N.O.S. ORM-E NA9189 (odorless mineral spirits)		1	DR	55	GAL	D001
b.							
c.							
d.							

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

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

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

Printed/Typed Name: SHARON R. HUEY | Signature | Month 11 | Day 21 | Year 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: J. Gilkey | Signature | Month 11 | Day 21 | Year 85

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: MURPHY | Signature | Month 11 | Day 21 | Year 85

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

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

204RT-50

TSDF COPY

038102

PO 6995

0312143

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 998586

Ready Metal Mfg Co (Company Name) | 4500 W 47th St (Address)
Chicago (City) | Il (State) | 60643 (Zip)
ILD 006019666 (Generator Number)

WASTE HAULER(S)

Technical Petroleum Co (Hauler Name) | 6233 N Pulaski Chicago 60646 (Hauler Address) | S.W.H. Registration Number 0625 / ILD-005441696

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Serv. (Facility Name) | 420 So Colfax Ave (Address) | 91808902 (Site Number)
Griffith (City) | Ind (State) | 46319 (Zip) | IND. 016360265

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: Flammable | 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: 000550 | (1) GALLONS 2 CU. YDS. (Circle One) 1

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 1-9-81 | C W Huffman (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: 1/21/81

(2) (Authorized Signature) DATE:

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

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

[signature] (Authorized Signature) DATE: 1/21/81

COMMENTS OR SPECIAL INSTRUCTIONS: PUMPED TO 124E 1/22/81 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

000632

PO 6995 (2)

0373650

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 998586

Ready Metal Mfg Co (Company Name) | 4500 W 47th St (Address)
Chicago (City) | IL (State) | 60632 (Zip)
03160000566 (Generator Number) G
ILD 005149752

WASTE HAULER(S)

~~American Chemical Serv~~ (Hauler Name) | ~~420 S. Colfax Ave~~ (Hauler Address)
S.W.H. Registration Number 0625
ILD 005441696

Technical Petroleum Inc (Hauler Name) | 6233 N. Pulaski, Chicago 60646 (Hauler Address)
S.W.H. Registration Number ~~0625001~~

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 006360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint Solvent | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

4005

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Waste Paint Solvent | HAZARD CLASS: Flammable

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: 000550

(1) GALLONS (Circle One)
(2) CU. YDS. 1

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 4-8-81 | Joseph Davis (Authorized Signature)

F005

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (10) (Authorized Signature) DATE: 4/8/81

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

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

[signature] (Authorized Signature) DATE: 4/9/81

COMMENTS OR SPECIAL INSTRUCTIONS: UNLOADED AT DOCK 4/9/81
PUMPED TO 124 TK 4/14/81 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

000633

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

0373654

SPECIAL WASTE HAULING MANIFEST

Authorization Number 998586

Ready Metal Mfg Co (Company Name) | 4500 W 47th St (Address)
Chicago (City) | IL (State) | 60632 (Zip)
03160005666 (Generator Number)
ILD005149752

WASTE HAULER(S)

Technical Petroleum Inc (Hauler Name) | ~~4205 Colfax Ave~~ 6233 N Pulaski Chicago 60646 (Hauler Address)
S.W.H. Registration Number 06250011
ILD005441696

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

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

CHEMICAL SVC.,
~~American Petroleum~~ (Facility Name) | 420 S. Colfax Ave (Address)
Griffith (City) | Ind (State) | 46319 (Zip)
91808902 (Site Number)
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: Waste Paint Solvent
HAZARD CLASS: Flammable
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: 000550
(1) GALLONS (Circle One) (2) CU. YDS. 1

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 8-7-81 (Authorized Signature) F005

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Technical Wave Inc (Authorized Signature) DATE: 8/12/81

(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: 8/12/81

COMMENTS OR SPECIAL INSTRUCTIONS: To Lot T-63 8/13/81 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

000634

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

P0 6995 (4) 0437374

Authorization Number 998586

Ready Metal Mfg. Co. (Company Name) | 4500 W. 47th St. (Address) | 376-9700 (Phone Number) | 0316000566 (Generator Number)

Chicago (City) | Ill. (State) | 60632 (Zip) | ILD005149752 (EPA Number)

WASTE HAULER(S)

Technical Petroleum Inc. (Hauler Name) | 6233 N. Pulaski, Chgo, Il. 60646 (Hauler Address) | S.W.H. Registration Number 0625001

Phone Number | ILD005441696 (EPA Number)

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

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical SVC., (Facility Name) | 420 S. Colfax Ave. (Address) | 91808902 (Site Number)

Griffith (City) | Ind. (State) | 46319 (Zip) | 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: 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: Waste Paint Solvent | HAZARD CLASS: Flammable | UN or NA Number: NA 1993 | EPA HW Number: F005

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: 000550 (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 (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) J. Julian (Authorized Signature) DATE 11/12/81

(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: 11/12/81

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

To 210 R T-SO EWM 12/22/87

001905

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

P06995 5 0554327

Authorization Number 998586

Ready Metal Mfg. Co. (Company Name) | 4500 W. 47th St. (Address) | (312) 376-9700 (Phone Number) | 0316000566 (Generator Number)

Chicago (City) | Il. (State) | 60632 (Zip) | ILD005149752 (EPA Number)

WASTE HAULER(S)

Technical Petroleum Inc. (Hauler Name) | 6233 N. Pulaski, Chgo, Il. 60646 (Hauler Address) | S.W.H. Registration Number 0625001

(312) 463-5200 (Phone Number) | ILD005441696 (EPA Number)

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

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

Amer. Chemical SVC. (Facility Name) | 420 S. Colfax Ave. (Address) | 91808902 (Site Number)

Griffith (City) | Ind. (State) | 46319 (Zip) | (Phone Number) | IND016360265 (EPA Number)

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

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

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: 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:	UN or NA Number	EPA HW Number
Waste Paint Solvent	Flammable	NA-1993	F005

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: 000550 (1) GALLONS (Circle One) (2) CU. YDS.

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 (Authorized Signature) DATE

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) (Authorized Signature) DATE 4/28/82

(2) (Authorized Signature) DATE 4/29/82

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 James Price (Authorized Signature) DATE 4/28/82

COMMENTS OR SPECIAL INSTRUCTIONS

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637 OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-267

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

On dock 4-28-82 GRM To 125 RT-63 GRM 5-3-82

003727

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

PO6995 282 0554328

Authorization Number [illegible]

Ready Metal Mfg. Co. (Company Name) | 4500 W. 47th St. Address | (312) 376-9700 Phone Number | 0316000566 Generator Number

Chicago City | Il. State | 60632 Zip | ILD005149752 EPA Number

WASTE HAULER(S)

Technical Petroleum Inc. Hauler Name | 6233 N. Pulaski, Chgo, Il. 60646 Hauler Address | S.W.H. Registration Number 0625001

(312) 463-5200 Phone Number | ILD005441696 EPA Number

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

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

Amer. Chemical SVC. (Facility Name) | 420 S. Colfax Ave. Address | 91808902 Site Number

Griffith City | Ind. State | 46319 Zip | Phone Number | IND016360265 EPA Number

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: 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: Waste Paint Solvent Flammable

HAZARD CLASS: NA-1993 (UN or NA Number) F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE 2400 (LBS) TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 000330 (1) GALLONS (Circle One) (2) CU. YDS.

METHOD OF SHIPMENT (Circle One) (DRUMS 6 Number) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE: 10-13-82

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 10/13/82

(2) (Authorized Signature) DATE

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

[signature] (Authorized Signature) DATE

COMMENTS OR SPECIAL INSTRUCTIONS

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS, 217 / 782-3637 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

On deck 10.28.82 To 124 RT-63 GKM 11/1/82

003123

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

0554330

Authorization Number

Ready Metal Mfg. Co. (Company Name) | 4500 W. 47th St. (Address) | (312)376-9700 (Phone Number) | 0316000566 (Generator Number)

Chicago (City) | Il. (State) | 60632 (Zip) | ILD005149752 (EPA Number)

WASTE HAULER(S)

Technical Petroleum Inc. (Hauler Name) | 6233 N. Pulaski, Chgo, Il. 60646 (Hauler Address) | S.W.H. Registration Number 0625001

(312)463-5200 (Phone Number) | ILD005441696 (EPA Number)

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

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

Amer. Chemical SVC. (Facility Name) | 420 S. Colfax Ave. (Address) | 91808902 (Site Number)

Griffith (City) | Ind. (State) | 46319 (Zip) | Phone Number | IND016360265 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: 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: Waste Paint Solvent Flammable

HAZARD CLASS: ~~NA-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: ~~000550~~

1 GALLONS (Circle One)
2 CU. YDS.

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 (Authorized Signature) DATE 6-6-83

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) (Authorized Signature) DATE 6/6/83

(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 6/6/83

COMMENTS OR SPECIAL INSTRUCTIONS.

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS, 217 / 782-3637 OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

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

REV. # 3

SITE COPY - PART 3

To 2047 7:50 6/7/83

CJ5333

HAZARDOUS WASTE MANIFEST

ORIGINAL – NOT NEGOTIABLE

71982
MANIFEST DOCUMENT NUMBER

Superior Oil Co. Inc.
NAME OF CARRIER (SCAC)

#109
SHIPPER NUMBER
CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND000780903	RECLAIMED ENERGY CO. INC/1500 WESTERN AVE CONNERSVILLE IND 47331 (317-825-7101)	7/19/82
TRANSPORTER # 1	IND039994915	SUPERIOR OIL CO. INC./400 W. REGENT ST. INDIANAPOLIS, INA 46225 (317-783-6681)	7/19/82
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	AMERICAN CHEMICAL/PO BOX 190/GRIFFITH, IND 46319 (219-929-9370)	7/22/82
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGE (For Carri Use Only
2900gal	X	F005	HAZARDOUS WASTE, LIQUID N.O.S. NA 1993 WASTE HAULER PERMIT IN4919-3000-11	NA1993				2900gal		

SPECIAL HANDLING INSTRUCTIONS

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

COMMENTS

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

PLACARDS TENDERED
Yes ☐ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

TOTAL CHARGES: $

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

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

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

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

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

CERTIFICATION

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

GENERATOR'S SIGNATURE DATE 7/19/82

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

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

TSDF SIGNATURE DATE 7/22/82

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TSDF COPY

003730

HAZARDOUS WASTE MANIFEST

494
MANIFEST DOCUMENT NUMBER

SUPERIOR OIL CO. 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	IND000780403	RECLAIMED ENERGY CO. INC. / 1500 WESTERN AVE CONNERSVILLE, IND (317-825-7101)	10-15-82
TRANSPORTER # 1	IND039994977	SUPERIOR OIL CO. INC. / 400 WEST REGENT ST INDIANAPOLIS, IND (317-783-6681)	10-15-82
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	AMERICAN CHEMICAL / P.O. BOX 1907 GRIFFITH IND (219-924-4730)	10-15-82
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
6000 gal	X	F005	HAZARDOUS WASTE LIQUID NOS (FLAMMABLE LIQUID) WASTE HAULER PERMIT IN-4919-3000-11	NA 9189				6000		

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 10/15/82

This is to certify acceptance of the hazardous waste shipment.

Ken Gabbon 10-15-82
TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

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

TSDF SIGNATURE — DATE 10/15/82

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TRANSPORTER #2 To 210 E T-50 6:PM 10/15

003754

HAZARDOUS WASTE MANIFEST

493
MANIFEST DOCUMENT NUMBER

SUPERIOR OIL COMPANY
NAME OF CARRIER

SHIPPER NUMBER

(SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND000780403	Reclaimed Energy Co., Inc/1500 Western Avenue Connersville, Indiana 47331 (317-825-7101)	
TRANSPORTER # 1	IND039994975	Superior Oil Company/400 W. Regent St/ Indpls IN 46225 (317-783-6681)	
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chemical/P. O.Box 190 / Griffith, IN 46319 (219-924-4370)	9/23/85
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)
5000 gals	X	F005	Hazardous Waste Liquid NOS (NA9189) (Flammable Liquid) Waste Hauler Permit IN 4919-3000-11	NA9189				5000 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: 9 22 85

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

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

TSDF SIGNATURE — DATE: 9/23/85

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TSDF COPY To 210 RT-5

003733

HAZARDOUS WASTE MANIFEST

448

MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

SUPERIOR OIL COMPANY

NAME OF CARRIER (SCAC) CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND000780403	Reclaimed Energy Co., Inc/1500 Western Avenue Connersville, Indiana 47331 (317-825-7101)	
TRANSPORTER # 1	IND039994975	Superior Oil Company/400 W. Regent St/ Indpls IN 46225 (317-783-6681)	
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chemical / P. O. Box 190 / Griffith, IN 46319 (219-924-4370)	7/13/82
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
5000 gals	X	F005	Hazardous Waste, Liquid NOS (NA9189) (FLAMMABLE LIQUID) Waste Hauler Permit IN 4919-3000-11	NA9189						

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 7/13/82 DATE

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TO/11 F T TSDF COPY 7.13.82

003729

HAZARDOUS WASTE MANIFEST

449
MANIFEST DOCUMENT NUMBER

SUPERIOR OIL ~~KENOCO~~ COMPANY
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	IND000780403	Reclaimed Energy Co., Inc/1500 Western Avenue Connersville, Indiana 47331 (317-825-7101)	
TRANSPORTER # 1	IND039994975	Superior Oil Company Inc/400 W. Regent Street Indianapolis, Indiana 46225 (317-783-6681)	
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chemical / P. O. Box 190 / Griffith, IN 46319 (219-924-4370)	8/10/82
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
5000 gals	X	F005	FLAMMABLE LIQUID Hazardous Waste, Liquid NOS Waste Hauler Permit IN 4919-3000-11	NA1993						

SPECIAL HANDLING INSTRUCTIONS

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

COMMENTS

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

PLACARDS TENDERED
Yes ☐ No ☐

REMIT C.O.D. TO:
ADDRESS

COD Amt: $

C.O.D. FEE:
PREPAID ☐
COLLECT ☐ $

TOTAL CHARGES: $

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

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

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

_____ Signature

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

_____ (Signature of Consignor)

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

CERTIFICATION

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

Dave Zinn 8/10/82
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

8/10/82
DATE

5

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TSDF COPY To 210 RT-50 61M 8.10.82

003731

HAZARDOUS WASTE MANIFEST

450
MANIFEST DOCUMENT NUMBER

Superior Oil Company
NAME OF CARRIER (SCAC)

SHIPPER NUMBER
31-704
CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND000780403	Reclaimed Energy Co., Inc/1500 Western Avenue Connersville, Indiana 47331 (317-825-7101)	
TRANSPORTER # 1	IND039994975	Superior Oil Company Inc/400 W. Regent St Indianapolis, Indiana 46225 (317-783-6681)	
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chemical/P. O. Box 190/Griffith, Indiana 46319 (219-924-4370)	8/30/85
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)
6000 gals	X	F005	Hazardous Waste, Liquid NOS (flammable liquid)	NA9189						
			Waste Hauler Permit IN 4919-3000-11							

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 collected ☐

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 Dwila DATE 8/30/85

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TSDF COPY TO 210 R 7-50 GR-IN 8-30-82

003732

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER

31-125

TO: T/S/D FACILITY	AMERICAN CHEMICAL SVC
E.P.A. ID Code No.	IND 016360765
Address	POBX 192
Destination	GRIFFITH, IN
Phone	
FROM: Generator	REGAL ENERGY
E.P.A. ID Code No.	IND 000730403
Address	1500 W BSTBRN AVE
Origin	CANNELSVILLE IN 47331
Phone	317-765-7181

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
4800	Hazardous Waste Liquid	Flammable	F005	NA 9189		

PLACARDS REQUIRED

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

$_____ Per _____

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

_____ (Signature of Consignor)

FREIGHT CHARGES PREPAID ☐ COLLECT ☐

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

HAZARDOUS WASTE

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY _____
E.P.A. ID Code No. _____
Address _____
Destination _____

EMERGENCY RESPONSE INFORMATION

CONTACT Name _____
Phone _____
National Response Center 1-800-424-8802 in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date _____

TRANSPORTER #1 SUPERIOR OIL CO E.P.A. ID No. IND 039994975
Address 400 W REGENT ST
City _____ State _____ Zip _____ Phone 317-783-6681

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature _____ Date _____

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY

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

T/S/D FACILITY Signature _____ Date 2/11/83

T/S/D F COPY TO 21ET-50 EPM 3.14.83

005357

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER: 504

TO:	FROM:
T/S/D FACILITY: AMERICAN CHEMICAL	Generator: RECLAIMED ENERGY CO.
E.P.A. ID Code No. IND [illegible]	E.P.A. ID Code No. IND [illegible]
Address P.O. BOX [illegible]	Address [illegible] WESTPORT AVE.
Destination [illegible] IND 46311	Origin CONNERSVILLE IND. 47331
Phone (219) 924-9370	Phone (317) 825-7101

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
[illegible]	HAZARDOUS WASTE	FLAMMABLE	F 002	N/A		
GALS	LIQUID NOS	LIQUID	F-001,	9139		
			F 005			

HAZARDOUS WASTE

PLACARDS REQUIRED

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

$_____ Per _____

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

_____
(Signature of Consignor)

FREIGHT CHARGES PREPAID ☐ COLLECT ☐

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

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY _____
E.P.A. ID Code No. _____
Address _____
Destination _____

EMERGENCY RESPONSE INFORMATION

CONTACT Name _____
Phone _____

National Response Center 1-800-424-8802
in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date _____

TRANSPORTER #1 [illegible] E.P.A. ID No. [illegible]
Address [illegible]
City [illegible] State [illegible] Zip [illegible] Phone [illegible]

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature _____ Date _____

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY

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

T/S/D FACILITY Signature _____ Date _____

T/S/D F COPY T0211KT-50 ORM 5-12-83

035361

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER: 568

TO: T/S/D FACILITY	American Chemical
E.P.A. ID Code No.	TXD016368265
Address	P. O. Box 190
Destination	Griffith, IN 46319
Phone	219-924-4370
FROM: Generator	Reclaimed Energy Co., Inc.
E.P.A. ID Code No.	IND000780403
Address	1500 Western Avenue
Origin	Connersville, IN 47331
Phone	317-825-7101

HAZARDOUS WASTE

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
5500	gals Hazardous Waste Liquid NOS	Flammable	F002/ F003/ F005	NA9189	18 Cal	

PLACARDS REQUIRED

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

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

FREIGHT CHARGES: PREPAID ☐ COLLECT ☐

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

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY _____
E.P.A. ID Code No. _____
Address _____
Destination _____

EMERGENCY RESPONSE INFORMATION

CONTACT Name _____
Phone _____
National Response Center 1-800-424-8802
in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date _____

TRANSPORTER #1 Superior Oil Company E.P.A. ID No. [illegible]
Address 400 W. Regent St.
City Indianapolis State IN Zip 46225 Phone 317-783-0681

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 1 Signature _____ Date _____

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 2 Signature _____ Date 5/3/83

TREATMENT/STORAGE/DISPOSAL FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.
T/S/D FACILITY Signature _____ Date 5/3/83

T/S/D F COPY

TO211-T-50
GPM 5-3-83

035880

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER: 567

TO: T/S/D FACILITY: American Chemical	FROM: Generator: Reclaimed Energy Co Inc
E.P.A. ID Code No.: IND016360265	E.P.A. ID Code No.: IND000780403
Address: P. O. Box 190	Address: 1500 Western Avenue
Destination: Griffith, Indiana 46319	Origin: Connersville, IN 47331
Phone: 219-924-4370	Phone: 317-825-7101

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
6000	gals Hazardous Waste Liquid NOS	Flammable	F002/ F003/ F005	NA9189	11900	1

PLACARDS REQUIRED

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

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

FREIGHT CHARGES: PREPAID ☐ COLLECT ☐

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

HAZARDOUS WASTE

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY _____
E.P.A. ID Code No. _____
Address _____
Destination _____

EMERGENCY RESPONSE INFORMATION

CONTACT Name _____
Phone _____
National Response Center 1-800-424-8802
in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date _____

TRANSPORTER #1 Superior Oil Company E.P.A. ID No. IND099994975
Address 400 W. Regent St.
City Indianapolis, State IN Zip 46225 Phone 317-783-6561

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature _____ Date _____

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY

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

T/S/D FACILITY Signature _____ Date _____

T021OK
T-50 GRM 4.4.83

T/S/D F COPY

005309

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

Is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER: 566-

TO: T/S/D FACILITY	American Chemical
E.P.A. ID Code No.	IND016360265
Address	P. O. Box 490
Destination	Griffith, Indiana 46319
Phone	219-924-4370
FROM: Generator	Reclaimed Energy Co Inc
E.P.A. ID Code No.	IND000780403
Address	1500 Western Avenue
Origin	Connersville, Indiana 47331
Phone	317-825-7101

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
~~5000~~	gals Hazardous Waste, Liquid NOS	Flammable	F005	NA9189		
4800						

PLACARDS REQUIRED

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

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

FREIGHT CHARGES: PREPAID ☐ COLLECT ☐

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

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY _____
E.P.A. ID Code No. _____
Address _____
Destination _____

EMERGENCY RESPONSE INFORMATION

CONTACT Name _____
Phone _____
National Response Center 1-800-424-8802 in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date _____

TRANSPORTER #1 Superior Oil Company E.P.A. ID No. IND039994975
Address 400 W. Regent Street
City Indianapolis State IN Zip 46225 Phone 317-783-6681

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 1 Signature _____ Date _____

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.
T/S/D FACILITY Signature _____ Date 3/15/83

T/S/D F COPY

To 211 RT-60
6244, 3-18-83

035356

HAZARDOUS WASTE

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER: 564

TO: American Chemical T/S/D FACILITY	FROM: Reclaimed Energy Co., Inc. Generator
E.P.A. ID Code No. IND016360265	E.P.A. ID Code No. IND000780403
Address P. O. Box 190	Address 1500 Western Avenue
Destination Griffith, Indiana 46319	Origin Connersville, Indiana 47331
Phone 219-924-4370	Phone 317-825-7101

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
6000	Hazardous Waste, Liquid NOS	Flammable	F005	NA9189	45M	

PLACARDS REQUIRED

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

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

(Signature of Consignor)

FREIGHT CHARGES: PREPAID ☐ COLLECT ☐

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

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY _____
E.P.A. ID Code No. _____
Address _____
Destination _____

EMERGENCY RESPONSE INFORMATION

CONTACT Name _____
Phone _____

National Response Center 1-800-424-8802
in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date _____

TRANSPORTER #1 Peoples Oil Company E.P.A. ID No. IND039994975
Address 400 W. Regent St. 46225
City Indianapolis State IN Zip 46225 Phone 317-783-9561

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature _____ Date _____

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY

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

T/S/D FACILITY Signature _____ Date _____

T/S/D F COPY To 210 R T-50 GRM 2-11-83

005356

HAZARDOUS WASTE

HAZARDOUS WASTE MANIFEST

HAZARDOUS WASTE

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER: 563

1-11

TO: T/S/D FACILITY	American Chemical	FROM: Generator	Reclaimed Energy Co Inc
E.P.A. ID Code No.	~~IND016360265~~	E.P.A. ID Code No.	~~IND069730493~~
Address	~~P. O. Box 190~~	Address	1500 Western Avenue
Destination	~~Griffith, Indiana 46319~~	Origin	Connersville, Indiana 47331
Phone	~~219-924-4370~~	Phone	317-825-7101

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
6000	Hazardous Waste, Liquid NOS	Flammable Liq.	F005	NA9189	~~55~~ 1	
BULK					~~55~~	
					5300	
	Waste Hauler Permit					
	IN 4919-3000-11					

PLACARDS REQUIRED

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

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

FREIGHT CHARGES: PREPAID ☐ COLLECT ☐

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

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY _____
E.P.A. ID Code No. _____
Address _____
Destination _____

EMERGENCY RESPONSE INFORMATION

CONTACT Name _____
Phone _____

National Response Center 1-800-424-8802
in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date _____

TRANSPORTER #1 Superior Oil Company E.P.A. ID No. ~~IND000777473~~
Address 400 W. Regent St.
City Indianapolis State IN Zip 46225 Phone ~~317-783-6691~~

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature _____ Date _____

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY

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

T/S/D FACILITY Signature _____ Date _____

T/S/D F COPY To 210 KT-50 GKM 1-4-83

(JF8315)

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.1.5.4.7.6.6.7.1.7	0160200		

3. Generator's Name and Mailing Address
REFINERS TRANSPORT & TERMINAL CORP
1.7 AVE. 1 JOLIET RD
LOCKPORT, IL 60525

A. State Manifest Document Number: INA 0160200
B. State Generator's ID:

4. Generator's Phone (312) 447-5550

5. Transporter 1 Company Name: REFINERS TRANSPORT & TERMINAL CORP
6. Use EPA ID Number: I.L.D.9.8.4.7.6.6.7.1.7
C. State Transporter's ID:
D. Transporter's Phone: 447-5550

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
402 S. COLFAX AVE.
GRIFFITH, IN 46319-2190
10. Use EPA ID Number: I.N.D.1.4.3.6.2.2.6.5
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. FLAMMABLE LIQUID N.O.S. (FLAMMABLE) UN-1993	001	T	00680	1	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: WASTE SOLVENTS
K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information

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

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good 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
[illegible]	[signature]	01	13	87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year
ART WITHIS	[signature]	01	16	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
F DUNFEE	F Dunfee	01	16	87

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/126-2675.

INA 0160200

EPA Form 8700-22 (Rev. 9-86) DISTRIBUTION:
Previous editions are obsolete.
State Form 11865
2 IDEM TSD 1/2

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

0016797

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

0884077 (1–7)

Authorization Number (8–13)

Regal Business Machines (Company Name) | 209 W. Illinois (Address) | 670-0250 (Phone Number) | 0 3 1 6 0 8 0 0 0 2 G (14–24 Generator Number)

City | State | Zip | EPA Number

WASTE HAULER(S)

Technical Petroleum Co. (Hauler Name) | 6233 N. Pulaski (Hauler Address)
Chicago, Il. 60646
S.W.H. Registration Number 0 6 2 5 0 0 1 (25–31)
463-5200 (Phone Number)
ILD 0 0 5 4 4 1 6 9 6 (EPA Number)

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

~~American Chemical Svc.~~ (Facility Name) | 420 S. Colfax Ave. (Address)
9 1 8 0 8 9 0 2 (39–46 Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip) | 219-924-4310 (Phone Number) | IND 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: Mineral Spirits | 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
Mineral Spirits	Combustible	~~N A~~ 1 9 9 3	

WEIGHT FOR D.O.T. USE: 324 (LBS) TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: ~~50~~ (47–52) GALLONS (Circle One) CU. YDS. (53)

METHOD OF SHIPMENT (Circle One) (DRUMS 1 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: 6-4-84

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) _____ (Authorized Signature) DATE: __/__/__ (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: 6/4/84 (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

204ET-50

037273

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. MND981198906 | Manifest Document No. 43406 | 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 Region Trk & Equip
1705 Arthur St. N.E.
Mpls, MN 55413

A. State Manifest Document Number MN 0043406 GENERAT

4. Generator's Phone (612) 781-5918

B. State Generator's ID

5. Transporter 1 Company Name: ABC SERVICES, INC. | 6. US EPA ID Number: WID076159839 | C. State Transporter's ID | D. Transporter's Phone 414-657-6222

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

9. Designated Facility Name and Site Address: AMERICAN CHEMICAL SERVICE
420 SOUTH COLFAX, GRIFFITH, IN 46319 | 10. U.S EPA ID Number: IND016360265 | G. State Facility's ID | H. Facility's Phone 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No
a.	X	2	DM	110	G	D001
b.						
c.						
d.						

a. FLAMMABLE LIQUID NOS UN1993

J. Additional Descriptions for Materials Listed Above: A - 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.

GENERATOR — Printed/Typed Name: DONALD J. BUCKLI | Signature | Date: Month 7 Day 15 Year 86

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials — Printed/Typed Name: R.P. Nelson | Signature | Date: Month 9 Day 5 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: C.L. Miller | Signature | Date: Month 9 Day 15 Year 86

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

12387695 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. IL D000506594 | 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
Regis Chemical Company
8210 Austin Avenue, Morton Grove, IL 60053

A. State Manifest Document Number INA 0111123

4. Generator's Phone (312) 967-6000

B. State Generator's ID 0311955013 4979(Ind)

5. Transporter 1 Company Name: Phillips and Martin

6. Use EPA ID Number: TL0041550559

C. State Transporter's ID 0594-001(IL)

D. Transporter's Phone 834-9755

7. Transporter 2 Company Name

8. Use EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

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

10. Use EPA ID Number: IND 016360265 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. Flammable Waste Solvents, Liquid UN1993	55	gal	2750	1 (gal)	D001
b. Chlorinated Waste Solvents, Liquid UN1593	55	gal	550	1 (gal)	F001
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.

GENERATOR

Printed/Typed Name: David N. Baehr | Signature: David N. Baehr | Date: Month 10 Day 15 Year 87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JEFF FITE | Signature: Jeff Fite | Date: Month 10 Day 15 Year 87

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

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: HAROLD F. SCHMIDT | Signature: Harold F. Schmidt | Date: Month 10 Day 15 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 0111123

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

49-204R T-50 10/6/87
1-204R T-50 10/23/87
95-55 GAL 212R T-50 11/1/87
5-15 GAL 204R T50 4/13/88

012533

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. ILD005065594 | 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
Regis Chemical Company
8210 Austin Avenue, Morton Grove, IL 60053

A. State Manifest Document Number INA 0111122

4. Generator's Phone (312) 967-6000

B. State Generator's ID 031955013 4979(Ind)

5. Transporter 1 Company Name Phillips and Martin | 6. US EPA ID Number ILD 041 550 559 | C. State Transporter's ID 0594-001(IL) | D. Transporter's Phone 834-9755

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 9180890002 | H. Facility's Phone 219-924-4370

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. Flammable Waste Solvents, Liquid UN1993	55	DM	220	(gal) 1	D001
b. Chlorinated Waste Solvent, Liquid UN1593	55	DM	880	(gal) 1	F001
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: David N. Dehr | Signature: David N. Dehr | Date: Month 7 Day 10 Year 87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JEFF FITE | Signature: Jeff Fite | Date: Month 7 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: HAROLD F SCHNEIDER | Signature | Date: Month 7 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 0111122

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865 23-24R T50 B / 32-204R T50 B

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

012532

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. ILD 005065594 — Manifest Document No.

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

3. Generator's Name
Regis Chemical Company
8210 Austin Ave., Morton Grove, IL 60053

4. Generator's Phone (312) 967-6000

A. State Manifest Document Number IN 093045

B. State Generator's ID 03119550113 4979 (IN)

5. Transporter 1 Company Name Phillips and Martin — 6. US EPA ID Number IL1010411551051519

C. State Transporter's ID 0594-001 (IL)

D. Transporter's Phone 839-9755

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 U.S. 6 GRAMPLE
GRIFFITH IN 46319

10. US EPA ID Number IND 006026655

G. State Facility's ID

H. Facility's Phone (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a. Flammable Waste Solvents, Liquid UN1993	05	55gal. drum	825	1 6.7	D001
b. Chlorinated Waste Solvent, Liquid UN1593 n	01	55gal. drum	55	1 F.3	F001
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.

Printed/Typed Name: David N. Dahr — Signature: David N. Dahr — Month 01 Day 08 Year 87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JEFF FITE — Signature: Jeff Fite — Month 1 Day 15 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 in Item 19.
Printed/Typed Name: RONALD F. SCHMITT — Signature — Month 01 Day 15 Year 87

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

T.S.D. DETACH AND RETAIN THIS COPY

15-20476 F50 13
1-1187 F050 MRK

IN 093045

012531

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.: ILD005065594 | 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
Regis Chemical Company
8210 Austin Avenue, Morton Grove, Illinois 60053

4. Generator's Phone (312) 967-6000

A. State Manifest Document Number: INA 0111125
B. State Generator's ID: 0311955013-4979(IND)

5. Transporter 1 Company Name: Phillips and Martin
6. Use EPA ID Number: ILD041550559
C. State Transporter's ID: 0594-001(IL)
D. Transporter's Phone: 834-9755

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

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

10. Use EPA ID Number: 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. Flammable Waste Solvents, Liquid UN1993	33	55G D M	1815	G	F003
b. Chlorinated Waste Solvents, Liquid UN1593	3	55G D M	165	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.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good 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: David M. Bielic | Signature: David M. Bielic | Month: 04 | Day: 26 | Year: 88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JEFF FITE | Signature: Jeff Fite | Month: 4 | Day: 26 | Year: 88

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

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Warren F Schmidt | Signature: Warren F Schmidt | Month: 04 | Day: 26 | Year: 88

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

203RTSO 4/7M

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 0111125

0015342

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.: ILD 005065594 | 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
Regis Chemical Company
8210 Austin Avenue, Morton Grove, IL 60053

A. State Manifest Document Number: INA 0111124

4. Generator's Phone (312) 967-6000

B. State Generator's ID: 0311955013 4979(Ind)

5. Transporter 1 Company Name: Phillip and Martin

6. Use EPA ID Number: ILD041550559

C. State Transporter's ID: 991-001(IL)

D. Transporter's Phone: 834-9755

7. Transporter 2 Company Name:

8. Use EPA ID Number:

E. State Transporter's ID:

F. Transporter's Phone:

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

10. Use EPA ID Number: IN D 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. Flammable Waste Solvents, Liquid UN1993	29	55 gal DM	1595	(gal) 1	D001
b. Chlorinated Waste Solvents, Liquid UN1593	14	55 gal DM	770	(gal) 1	F001
c. ACCEPT 29 DR (a)					
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.

GENERATOR

Printed/Typed Name	Signature	Date Month	Day	Year
David N. Bahr	David N. Bahr	1	2	88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year
JEFF FITE	Jeff Fite	1	5	88

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year
JEFF FITE	Jeff Fite	3	7	88

FACILITY

19. Discrepancy Indication Space
REJECT 2 DRUMS (a) - 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 in Item 19.

Printed/Typed Name	Signature	Month	Day	Year
HAROLD F Schmidt	Harold F Schmidt	03	07	88

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

INA 0111124

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865 26a-203K T-50 1/13/88
13b-203K T-50 1/13/88
16-203K T-50 1/13/88

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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

2a rejected - 3/7/88 16-203K T-50 3/7/88

0015343

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

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: I L D 0 0 5 0 6 5 5 9 4
Manifest Document No.: 0 0 1 0 2
2. Page 1 of 1
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Regis Chemical Company
8210 Austin Avenue, Morton Grove, Illinois 60053

A. State Manifest Document Number: INA 0111130

4. Generator's Phone (312) 967-6000

B. State Generator's ID: 0311955013

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: IL0311
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 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: 9180890002
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, nos, Flammable liquid UN1993 (solvent)	1	55G			F003
	055	D M	2 8 0 5	1G	
b. Hazardous Waste, nos, ORM-E, NA9189 (methylene chloride UN1593)	3	55G			F002
	003	D M	1 6 5	1G	
c. Waste, Flammable liquid, nos, Flammable liquid UN1993 (ethylene dichloride UN1184)		55G			D001
	009	D M	4 9 5	1G	
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
lla. mixed waste solvents
llb. chlorinated waste solvents (methylene chloride)
llc. ignitable waste solvents (ethylene dichloride)

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

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good 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: DAVID N. BAEHR — Signature: David N Baehr — Date (Month Day Year): 9 15 89

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Leonard M Strand — Signature: Leonard M Strand — Date (Month Day Year): 9 15 89

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

FACILITY

19. Discrepancy Indication Space
50-20YRTSO 9/19 32-20YRTSO 9/19 1-20YRTSO 9/19
1 - MARINE SNALE 3/6/90 01038)
8-20YR TSO 9/19

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: A. WHITAKER — Signature: A Whitaker — Date (Month Day Year): 9.15.89

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 0111130

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

0016794

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 0 5 0 6 5 5 9 4 — 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
Regis Chemical Company
8210 Austin Avenue, Morton Grove, Illinois 60053

A. State Manifest Document Number: INA 0111129

B. State Generator's ID: 0311955013

4. Generator's Phone (312) 967-6000

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: IL0311

D. Transporter's Phone: 312-385-8440

7. Transporter 2 Company Name

8. Use EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical 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: 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, nos, Flammable liquid UN1993 (solvent)	34 ~~55~~	55G D M	1870 ~~1925~~	G	F003
b. Hazardous Waste, nos, ORM-E, NA9189 (methylene chloride UN1593)	3	55G D M	165	G	F002
c. Waste, Flammable liquid, nos, Flammable liquid UN1993 (ethylene dichloride UN1184)	42	55G D M	2310	G	D001
d.					

J. Additional Descriptions for Materials Listed Above
D - 312 - 331 - 8440

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
11a. mixed waste solvents
11b. chlorinated waste solvents (methylene chloride)
11c. ignitable waste solvents (ethylene dichloride)

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

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good 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: DAVID N BAEHR — Signature: David N Baehr — Date: Month 04 Day 18 Year 89

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: THOMAS STRAND — Signature: Thomas Strand — 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
A: 1A-1AFT63 4/21 — 33A-204RT50 4/21
B: 2B-204RT50 4/21 — 1B-3SM-[482B] 5/21
C: 42-1AFT63 4/21

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: STEVE KULAVIK — Signature: Steve Kulavik — Date: Month 04 Day 18 Year 89

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

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 0111129

0016795

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. T I D 0 0 5 0 6 5 5 9 4 | Manifest Document No. 0 0 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
Regis Chemical Company
8210 Austin Avenue, Morton Grove, Illinois 60053

4. Generator's Phone (312) 967-6000

A. State Manifest Document Number: INA 0111128

B. State Generator's ID: 0311955013

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: IL 0311

D. Transporter's Phone: 312-385-8440

7. Transporter 2 Company Name

8. Use EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

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

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

G. State Facility's ID: 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, nos, Flammable liquid UN1993 (solvent)	50	55G DM	2750	1G	F003
b. Hazardous Waste, nos, ORM-E, NA9189 (methylene chloride UN1593)	02	55G DM	0110	1G	F002
c. Waste, Flammable liquid, nos, Flammable liquid UN1993 (ethylene dichloride UN1184)	07	55G DM	0385	1G	D001
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
11a. mixed waste solvents
11b. chlorinated waste solvents (methylene chloride)
11c. ignitable waste solvents (ethylene dichloride)

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

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good 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: David N. Buehr — Signature: David N. Buehr — Date: Month 08 Day 06 Year 89

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: THOMAS STRAND — Signature: [signature] — Date: Month 08 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
35A-204RT50 2/1 15A-204RT50 2/8
7C-204RT50 2/1 2B-118RT63 2/13

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: WALTER ALVIN — Signature: [signature] — Date: Month 08 Day 06 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 0111128

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

00016796

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. ILD005065594 Manifest Document No. 00104
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
Regis Chemical Company
8210 Austin Ave, Morton Grove, Illinois 60053
4. Generator's Phone (708) 967-6000

A. State Manifest Document Number: INA 0111132
B. State Generator's ID: 0311955013
C. State Transporter's ID: IL031-0024
D. Transporter's Phone: 312-331-8440
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID: N/A
H. Facility's Phone: 312-786-3400

5. Transporter 1 Company Name: Strand Trucking
6. Use EPA ID Number: ILD984774489
7. Transporter 2 Company Name:
8. Use EPA ID Number:
9. Designated Facility Name and Site Address: American Chemical Services, 420 S. Colfax Ave, Griffith, IN 46319
10. Use EPA ID Number: INA016360265

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE, Flammable liquid, nos, Flammable Liquid UN-1993 (solvent)	29	55G DM	1595	G	F003
b. Hazardous Waste, nos, ORM-E, NA9189 (methylene chloride UN 1593)	3	55G DM	165	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
11a. Mixed Waste Solvents
11b. Chlorinated Waste Solvents (methylene Chloride)

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

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good 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: DAVID N BAEHR — Signature: David N Baehr — Date: Month 06 Day 15 Year 90

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials — Printed/Typed Name: Leo Strand — Signature: Leo Strand — Date: Month 06 Day 15 Year 90
18. Transporter 2 Acknowledgement of Receipt of Materials — Printed/Typed Name: — Signature: — Date: Month . Day . Year .

FACILITY
19. Discrepancy Indication Space N — 29-212TCP50 6/18 — B — 3-212TCP50 6/15

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: JAMES MURPHY — Signature: James Murphy — Date: Month 06 Day 18 Year 90

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

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
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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

0013274

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 0111132

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

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: I·L·D·0·0·5·0·6·5·5·9·4
Manifest Document No.: 0·0·1·0·3
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
Regis Chemical Company
8210 Austin Avenue, Morton Grove, Illinois 60053
4. Generator's Phone (312) 967-6000

A. State Manifest Document Number: INA 0111131
B. State Generator's ID: 0311955013
C. State Transporter's ID: IL0311-0024
D. Transporter's Phone: 312-331-8440
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID: N/A
H. Facility's Phone: 312-786-3400

5. Transporter 1 Company Name: Strand Trucking
6. US EPA ID Number: I·L·D·9·8·4·7·7·4·4·8·9
7. Transporter 2 Company Name:
8. US EPA ID Number:
9. Designated Facility Name and Site Address
American Chemical Services
420 S. Colfax Avenue
Griffith, IN 46319
10. US EPA ID Number: I·N·A·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, nos, Flammable liquid UN1993 (solvent)	·5·4	55G D·M	·2·9·7·0	1G	F003
b. Hazardous Waste, nos, ORM-E, NA9189 (methylene chloride UN1593)	· ·1	55G D·M	· · ·5·5	1G	F002
c. Waste, Flammable liquid, nos, Flammable liquid UN1993 (ethylene dichloride UN1184)	· ·1	55G D·M	· · ·5·5	1G	D001
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
lla. mixed waste solvents
llb. chlorinated waste solvents (methylene chloride)
llc. ignitable waste solvents (ethylene dichloride)

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, 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 N BAEHR — Signature: David N. Baehr — Date: Month 3 Day 21 Year 90

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Leo Strand — Signature: Leo Strand — Date: Month 3 Day 21 Year 90

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

FACILITY

19. Discrepancy Indication Space
B
49-204TZTSD
3 - MARINE SHALE 2/13/90 915939
2 - MARINE SHALE 2/20/90 010756
1-117TZ63 3/26
C
1-204TZ30 3/21

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 3 Day 27 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 0111131

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

00182-3

STATE OF MICHIGAN

WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS) ☐ Act 136 Waste ☐ Other MI 0188774

IDENTIFICATION

Generator's Name	Primary Transporter's Name	Treatment, Storage or Disposal Facility
REHAU PLASTIKS, INC.	THOMAS SOLVENT COMPANY	AMERICAN CHEMICAL
Site Address 1110 North Clay Street Sturgis MI 49091	**Transporters Address** 1180 N. Raymond Road Battle Creek MI 49016	**Facility Address** 420 S. Colfax Griffith IN 46319
Phone Number (616) 651-7845	**Phone Number** (616) 963-5565	**Phone Number** (219) 924-4370
Generator's Site EPA I.D. Number MID 082855347	**Transporter's EPA I.D. Number** MID 039939021	**Facility Site EPA I.D. Number** IND 016360265

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 Ink Thinning Compound	Flammable Liquid	NA 1142	07	18	DR		XX			990		F003
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.

① Generator Signature: Jeffrey Samson — Date Shipped MO. DAY YEAR: 3/1/83

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 AA 6107 146 71 C

② Transporter Signature: R. L. Jackson — Date(s) Received: 3/1/83

Subsequent Transporter Vehicle I.D. No's

③ Subsequent transporter(s) signature(s)

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.

④ TSDF Signature: T. Rimbee — ☒ Accepted ☐ Rejected — Date Received: 3/7/83

Facility Site EPA I.D. Number: IND 016360265

Describe any significant discrepancies between manifest and shipment

Was a Surcharge Assessed? ☐ Yes ☒ No

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 800—292-4706 OR OUT-OF-STATE AT 517—373-7660 AND THE NATIONAL RESPONSE CENTER AT 800—424-8802 24 HOURS PER DAY.

TO 204 RT-506 KM 3-22-83

TSDF COPY

053862

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. / Manifest Document No.: M I D 9 8 2 8 5 5 3 4 7 / 0 0 0 0 8

2. Page 1 of: 1

Information in the shaded areas is not required by Federal law

3. Generator's Name
REHAU PLASTICS, INC.
1110 N. CLAY ST., STURGIS, MI 49091

4. Generator's Phone (616) 651-7845

A. State Manifest Document Number: IN 093230

B. State Generator's ID:

5. Transporter 1 Company Name: HAVILAND PRODUCTS

6. US EPA ID Number: M I D 0 0 6 0 2 8 4 9 2

C. State Transporter's ID:

D. Transporter's Phone:

7. Transporter 2 Company Name:

8. US EPA ID Number:

E. State Transporter's ID:

F. Transporter's Phone:

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
420 S. COLFAX
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:

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	15. Waste No.
a. WASTE PAINT RELATED MATERIAL FLAMMABLE LIQUID NA-1263	0 1	D M	0 1 2 6	G	F003
b. PLACARDED FLAMMABLE NA-1263					
c.					
d.					

GENERATOR

J. Additional Descriptions for Materials Listed Above
IN CASE OF SPILL: CONTAIN

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, 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
Kimberlee Nelson		0 6	2 3	8 7

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials — Date

Printed/Typed Name	Signature	Month	Day	Year

18. Transporter 2 Acknowledgement of Receipt of Materials — Date

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

19. Discrepancy Indication Space

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

Printed/Typed Name	Signature	Month	Day	Year
HAROLD F SCHMIDT		0 6	2 6	8 7

IN 093230

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

T.S.D. DETACH AND RETAIN THIS COPY

MAR 15-204R T5

012529

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 082855347	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.

GENERATOR

3. Generator's Name and Mailing Address
Conad Plastics Co.
1110 N. Clay St.
Sturgis, MI 49091
4. Generator's Phone (616) 651-7845

A. State Manifest Document Number: INA 0155091
B. State Generator's ID:

5. Transporter 1 Company Name: Haviland Products Co.
6. US EPA ID Number: MID006240402
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 Cennpial Service Co.
420 S. Colfax
Griffith, IN
10. US EPA ID Number: IND016320265
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 Paint Related Materials Flammable Liquid UN 1993 (contains toluene)	19	DM	1045	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
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.

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Printed/Typed Name	Signature	Date Month	Day	Year
Kimberlee S. Nelson	Kimberlee Nelson	11	9	87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year
Alan B. Peery	Alan B. Peery	11	9	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
HAROLD F. SCHMIDT	Harold F. Schmidt	11	12	87

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PAGE 8 (white) TRANSPORTER 2 COPY

5

8-204R T-50 11/11/87
8-204R T-50 11/12/87
3-204T T-50 11/13/87

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 0155091

012530

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.: MID082855347 2849 2

2. Page 1 of: 1

Information in the shaded areas is not required by Federal law

3. Generator's Name
REHAU PLASTICS
1110 NORTH CLAY STREET., STURGIS., MI 49091

4. Generator's Phone (616) 651-7845

A. State Manifest Document Number: IN 028492

B. State Generator's ID:

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

6. US EPA ID Number: ILD069506160

C. State Transporter's ID: 0079

D. Transporter's Phone: 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., INC.
420 SOUTH COLFAX AVENUE
GRIFFITH., IN. 46319

10. US EPA ID Number: IND016360265

G. State Facility's ID:

H. Facility's Phone: 219-924-4270

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. XX WASTE FLAMMABLE LIQUID., n.o.s. FLAMMABLE LIQUID UN 1993	20	DM	01/1/1010	G.	F 003 F 005
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] DAVIES | Signature | Month 12 Day 16 Year 91

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: JACK MCCLOSKEY | Signature | Date: Month 12 Day 16 Year 91

18. Transporter 2 Acknowledgement of Receipt of Materials

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

FACILITY

19. Discrepancy Indication Space

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

Printed/Typed Name: [illegible] | Signature | Month 12 Day 16 Year 91

IN 028492

EPA Form 8700-22A (Rev. 11-85)

UHWM 2/LP2

T.S.D. DETACH AND RETAIN THIS COPY

MRK 2 01 4 9 5 0 T S D B

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.: MID082855347 | 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
REHAU, INCORPORATED
1110 N. Clay St. Sturgis, MI 49091

A. State Manifest Document Number: INA 0155082

4. Generator's Phone (616) 651-7845

B. State Generator's ID:

5. Transporter 1 Company Name: NAVILAND PRODUCTS | 6. Use EPA ID Number: MID0060284 92 | C. State Transporter's ID:

D. Transporter's Phone:

7. Transporter 2 Company Name: SOLVENT DISTILLERS | 8. Use EPA ID Number: MID 980684088 | E. State Transporter's ID:

F. Transporter's Phone:

9. Designated Facility Name and Site Address: ~~PETROCHEM PROCESSING~~ AMERICAN CHEMICAL SVC, Griffith, IN | 10. Use EPA ID Number: MID016320265 | G. State Facility's ID:

H. Facility's Phone:

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. Flammable liquid NOS (Waste Ink Thinning Compound) UN1993 Code 08 (contains Toluene)	15	DM	825	gal	F003
b.					
c. Accepted 12 Drums	012	DM	1060	G	F003
d. Rejected 3 Drums					

J. Additional Descriptions for Materials Listed Above
F005
IN CASE OF SPILL CONTAIN

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
RESTRICTED WASTE BANNED FROM LAND DISPOSAL
WASTE CONTAINS: ACETONE 0.05 mg/liter
METHYL ETHYL KETONE 0.05 mg/liter
TOLUENE 1.12 mg/liter

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, 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
Kimberlee S. Nelson	Kimberlee S. Nelson	04	11	88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
KEITH SAVACOOL	Keith Savacool	04	11	88

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

19. Discrepancy Indication Space
Rejected 3 Drums - MATERIAL Does NOT Match Preshipment Sample - Material NOT Pumpable

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
Ronald F. Schmidt	Ronald F. Schmidt	04	11	88

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State Form 11865 204 TCT 50-12 4/12 M

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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 0155082

0015338

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.: MID082855347 | 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: REHAU® INCORPORATED, 1110 N. Clay St., Sturgis, MI 49091

4. Generator's Phone (616) 651-7845

A. State Manifest Document Number: INA 0155083

B. State Generator's ID:

5. Transporter 1 Company Name: HAVILAND PRODUCTS | 6. Use EPA ID Number: MID006028492 | C. State Transporter's ID: | D. Transporter's Phone:

7. Transporter 2 Company Name: SOLVENT DISTILLERS | 8. Use EPA ID Number: MID098068488 | E. State Transporter's ID: | F. Transporter's Phone:

9. Designated Facility Name and Site Address: AMERICAN CHEMICAL SVC, GRIFFITH, IN 46319 | 10. Use EPA ID Number: IND016360265 | G. State Facility's ID: | H. Facility's Phone:

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. Flammable Liquid NOS (Waste Ink Thinning Compound) UN1993 Code 08 (contains Toluene)	16	DM	880		F003
b.					
c.					
d. 14 Drums Accepted 2 Drums Rejected	04	DR	00770	G	F003

J. Additional Descriptions for Materials Listed Above: F005 - IN CASE OF SPILL CONTAIN

K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information: **RESTRICTED WASTE** BANNED FROM LAND DISPOSAL
WASTE CONTAINS: ACETONE 0.05 mg/liter
METHYL ETHYL KETONE 0.05/mg/liter
TOLUENE 1.12 mg/liter

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

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good 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: Kimberlee S. Nelson | Signature: Kimberlee S. Nelson | Date Month 04 Day 25 Year 88

TRANSPORTER — 17. Transporter 1 Acknowledgement of Receipt of Materials — Printed/Typed Name: KEITH SAVACOOL | Signature: Keith Savacool | Date Month 04 Day 26 Year 88

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

FACILITY — 19. Discrepancy Indication Space: 2 Drums Rejected - MATL Docs NOT MATCH Pre-SHIPment 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: Harold F Schmidt | Signature: Harold F Schmidt | Date Month 04 Day 25 Year 88

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

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

204R TSD 4/26M

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 0155083

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: M·I·D·0·8·2·8·5·5·3·4·7
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
REHAU® INCORPORATED
1110 N. Clay St.
Sturgis, MI 49091

A. State Manifest Document Number: INA 0155084
B. State Generator's ID:

4. Generator's Phone (616) 651-7845

5. Transporter 1 Company Name: HAVILAND PRODUCTS
6. Use EPA ID Number: M·I·D·0·0·6·0·2·8·4·9·2
C. State Transporter's ID:
D. Transporter's Phone:

7. Transporter 2 Company Name: SOLVENTS DISTILLER
8. Use EPA ID Number: M·I·D·0·9·8·0·6·8·4·0·8
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SVC
GRITTIFTH 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:

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. Flammable Liquid NOS (Waste Ink Thinning Compound) UN1993 Code 08 (contains Toluene)	26	D·M	1439	GAL	F005 F003
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
F005 IN CASE OF SPILL - CONTAIN

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
RESTRICTED WASTE BANNED FROM LAND DISPOSAL
WASTE CONTAINS: ACETONE 0.05 mg/liter
METHYL ETHYL KETONE 0.05 mg/liter
TOLUENE 1.12 mg/liter

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GENERATOR

Printed/Typed Name	Signature	Month	Day	Year
Kimberlee S. Nelson	Kimberlee S. Nelson	08	05	88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
KEITH SAVAGOOL	Keith Savagool	08	05	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
FRANK PRICE	Frank Price	8	5	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 0155084

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

23-204K T50 2/4
2-204K T50 2/4
1 (25 GAL) 204 K T509/13 5 PAILS (30 GAL) ASH

0015310

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

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. M·I·D·0·8·2·8·5·5·3·4·7
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
REHAU INCORPORATED
1110 N. Clay St.
Sturgis, MI 49091
4. Generator's Phone (616) 651-7845

A. State Manifest Document Number: INA 0155085
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone

5. Transporter 1 Company Name: HAVILAND PRODUCTS
6. Use EPA ID Number: M·I·D·0·9·6·6·0·2·8·4·9·2
7. Transporter 2 Company Name: SOLVENTS DISTILLERS
8. Use EPA ID Number: M·I·D·0·9·8·0·6·8·4·0·8
9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
GRIFFITH, IN 46319
10. Use EPA ID Number: I·N·D·0·1·6·3·6·8·2·6·5

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. Flammable Liquid NOS (Waste Ink Thinning Comp) UN 1993 Code 08 (contains Toluene)	17	D·M	925	GAL.	F003/ F005
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
IN CASE OF SPILL - CONTAINI
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
RESTRICTED WASTE BANNED FROM LAND DISPOSAL
WASTE CONTAINS: ACETONE 0.05 mg/liter
METHYL ETHYL KETONE 0.05 mg/liter
TOLUENE 1.12 mg/liter

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GENERATOR — Printed/Typed Name: Kimberlee S. Hart — Signature: Kimberlee S. Hart — Date: Month 09 Day 20 Year 88

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: KEITH SAVAGE — Signature — Date: Month 09 Day 20 Year 88
18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Date: Month Day Year

FACILITY
19. Discrepancy Indication Space
13204TC150 9/21 6 PAILS (36 GAL) - ASHCLOVE 12/5/88
90101
3204TC150 9/21
1 (19 GAL) 204TC150 11/18/88
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: Glenn Whitaker — Signature — Date: Month 09 Day 20 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 0155085

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

0015341

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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. MND066868742 — Manifest Document No. 31905E

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

GENERATOR

3. Generator's Name and Mailing Address
Rehm's Body Shop
2255 S. E. Marion Road Rochester, MN 55904

4. Generator's Phone (507) 288-2736

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 Company
420 S. Colfax Avenue
Griffith, IN 46319

10. US EPA ID Number
IND016360265

G. State Facility's ID

H. Facility's Phone 219-924-4370

	11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	HM	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	RQ WASTE PAINT RELATED MATERIAL (F003 & F005) FLAMMABLE LIQUID NA1263		1	DM	55	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

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: STEPHEN SEERUP — Signature — Month Day Year: 09 23 91

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Month Day Year

FACILITY

19. Discrepancy Indication Space

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

Printed/Typed Name — Signature — Month Day Year

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

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

12 05 C 63 4/6

TSDF COPY

0018272

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. MND066887434242 Manifest Document No. 11305F

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
Rehm's Body Shop
2255 S.E. Marion Road., Rochester, MN 55904
4. Generator's Phone (507) 288-2736

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 708-429-1660

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 IND015850265

G. State Facility's ID

H. Facility's Phone 219-924-4370

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. RQ WASTE PAINT RELATED MATERIAL (F003) FLAMMABLE LIQUID NA 1263		1	DM	055	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.

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Printed/Typed Name [illegible] Rehm | Signature [signature] | Month Day Year 12 06 89

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name STEPHEN SEERUP | Signature Stephen Seerup | Month Day Year 12 06 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 Whitaker A. | Signature [signature] | Month Day Year 12 14 89

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

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

126VCT63 12/12

TSDF COPY

0016792

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

DO NOT WRITE IN THIS SPACE

Please print or type. (Form designed for use on elite (12-pitch) typewriter) *Form Approved OMB No. 2000 0404 Expires 7 31 86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. | Manifest Document No.: IL D 0 6 5 1 0 5 6 7 7

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

3. Generator's Name: RELIABLE ELECTRIC-FIXER
11333 HARRISON ST
FRANKLIN PK, IL 60131

A. State Manifest Document Number: IN 093098

4. Generator's Phone: (312) 455-0014

B. State Generator's ID: 0310965033

5. Transporter 1 Company Name: STRAUD TRUCKING CO

6. US EPA ID Number: I L D 0 6 4 0 4 8 1 1 0

C. State Transporter's ID: 0040-11-0311

D. Transporter's Phone: 815-4440

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
W. C. S. COLFAX AVE
GRIFFITH IN 46319

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

G. State Facility's ID

H. Facility's Phone: 219-924-4570

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 TRICHLORETHYLENE ORM-A UN-1710	1 1 1	DM	1 1 0 0	1	F001
b. WASTE 1,1,1 TRICHLOROETHANE ORM-A UN-2831	1 9	DM	1 4 9 5	1	F001
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.

Printed/Typed Name	Signature	Month	Day	Year
KEN HENRICK		1 1	1 1	8 7

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
STAN STRAUD		1 1	1 1	8 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 F SCHMIDT		0 1	1 3	8 7

IN 093098

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

T.S.D. DETACH AND RETAIN THIS COPY

20-14 TG3 B
9-131 TG3 B

012524

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

0436024

Authorization Number 997794

Reliable Electric Co. (Company Name) | 1333 Addison St. (Address) | 455 8010 (Phone Number) | 0 31 096 0033 G (Generator Number)

Franklin Park (City) | Illinois (State) | 60131 (Zip) | ILD 005105077 (EPA Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) | 201 W. 155th St. S. Holland, Il. (Hauler Address) | S.W.H. Registration Number 0 079 008

596 3377 (Phone Number) | ILD069506160 (EPA Number)

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

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

Ameriaan Chemical Service (Facility Name) | 420 S. Colfax Ave. (Address) | 918089 02 (Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip) | 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: Trichlorethlene | 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) Trichlorethlene | HAZARD CLASS: ORM-A | UN or NA Number: UN1710 | EPA HW Number:

WEIGHT FOR D.O.T. USE: 46,000 LBS TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS OR GAL. | QUANTITY OF WASTE DELIVERED: 004200 | GALLONS (Circle One) 2 CU. YDS

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Louis Tarzara 7901 (Authorized Signature) DATE 8-3-81

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 08/03/81

(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

(Authorized Signature) DATE 8/3/81

COMMENTS OR SPECIAL INSTRUCTIONS To #2 still T-63 8/3/81 jm

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS, 217 / 782-3637 OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

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

REV. # 3

SITE COPY - PART 3

000631

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

0213788

SPECIAL WASTE HAULING MANIFEST

Authorization Number 9 9 7 7 9 4

Reliable Electric Co. (Company Name) | 11333 Addison Street (Address) | ILD#005105077

Franklin Park (City) | Illinois (State) | 60131 (Zip)

0 3 1 0 9 6 0 0 3 3 G — Generator Number

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) | 201 W. 155th St., S. Holland, Il. (Hauler Address) | S.W.H. Registration Number 0 0 7 9 0 2 6

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 Ave. (Address) | 9 1 8 0 8 9 0 2 Site Number

Griffith (City) | Indiana (State) | 46319 (Zip)

IND#016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Trichlorethlene

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:
Trichlorethlene	~~None~~ ORM-A

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 0 0 5 0 0 0

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.

UN 1710

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 4/6/81 Linda Langan (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) Don Owen (Authorized Signature) DATE: 04 06 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: 4 6 81

COMMENTS OR SPECIAL INSTRUCTIONS: 4000 TO #2 STILL T-63 4/6/81 gjm
1000 TO 1A T-63 4/6/81 gjm

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

000630

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

0435982

Authorization Number 9 9 7 7 9 4

Reliable Electric Co. (Company Name) | 11333 Addison St. (Address) | 4558010 (Phone Number) | 03109600336 (Generator Number)

Franklin Park (City) | Illinois (State) | 60131 (Zip) | ILD 0051 050 77 (EPA Number)

WASTE HAULER(S)

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

[redacted] (Phone Number) | [redacted] (EPA Number)

Strand Trucking (Hauler Name) | 13642 Kenton Crestwood, Il. 60445 (Hauler Address) | S.W.H. Registration Number 0024001

385 8440 (Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | 420 S. Colfax Ave. (Address) | 9180 8902 (Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip) | 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: Trichlorethlene | 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
Trichbrethylene	ORM-A	UN 1710	

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: 003740 | 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: [signature] (Authorized Signature) DATE: 3/31/82

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. Linnell (Authorized Signature) DATE: 3/31/82

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

[signature] (Authorized Signature) DATE 3 B L 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. # 3

SITE COPY - PART 3

On dock 3.31.82 6 PM
TO 122 R T-63 6RM 4.1.82

003750

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

0482412

Authorization Number 997795

Reliable Electric Co. (Company Name) | 11333 Addison St. (Address) | 455 8010 (Phone Number) | 031 0960 033 G (Generator Number)

Franklin Park, (City) | Illinois (State) | 60131 (Zip) | IL D0 05105 077 (EPA Number)

WASTE HAULER(S)

Strand Trucking (Hauler Name) | 13642 Kenton, Crestwood, Il. (Hauler Address) | S.W.H. Registration Number 002 4001

385 8440 (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 Chemical Service (Facility Name) | 420 S. Colfax Ave. (Address) | 918 08 902 (Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip) | 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: Organic 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: 1,1,1,Trichlorethane | HAZARD CLASS: ORM-A | UN2831 (UN or NA Number) | F001 (EPA HW Number)

WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 002090 | 1 GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) (DRUMS 38 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 Linda Lazara (Authorized Signature) | DATE: 4-30-82

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) L. Purbush (Authorized Signature) | DATE: 4/30/82

(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 O Bus (Authorized Signature) | DATE: 4-30-82

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 4.30.82 GRM
To IB T-63 GRM 5.7.82

003125

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

0482413

Authorization Number 997794

Reliable Electric Company (Company Name) | 11333 Addison St. (Address) | 455 8010 (Phone Number) | 0 31 096 003 3 G (Generator Number)

Franklin Park, (City) | ILLINOIS (State) | 60131 (Zip) | ILD 005 1 050 77 (EPA Number)

WASTE HAULER(S)

Strand Trucking (Hauler Name) | 13642 Kenton, Crestwood, Il.60445 (Hauler Address) | S.W.H. Registration Number 00 240 01

317 385 8440 (Phone Number) | IND 016 360 265 (EPA Number)

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

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | 420 S. Colfax (Address) | 918 089 02 (Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip) | 768 340 0 (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: Organic 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
~~Trichlorethylene~~	~~ORM-A~~	UN1710	E001

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: 001870 (1 GALLONS / 2 CU. YDS. (Circle One)) 1

METHOD OF SHIPMENT (Circle One) (DRUMS 34 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 Linda Lamara (Authorized Signature) DATE 4-30-82

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) L. Lindell (Authorized Signature) DATE: 4/30/82

(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 4/30/82

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

On dock 4-30-82 GRM
To 122RT-63 GRM 5-7-82

003720

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

0482414

Authorization Number ~~9 97 79 4~~

Reliable Electric Co. (Company Name) | 11333 Addison Street (Address) | 3124558010 (Phone Number) | 0 31 096 0033 (Generator Number)

Franklin Park (City) | Illinois (State) | 60131 (Zip) | ILD 0 0510 50 77 (EPA Number)

WASTE HAULER(S)

Strand Trucking (Hauler Name) | 13642 Kenton Crestwood, Ill. (Hauler Address) | S.W.H. Registration Number 0 024 001

3123858440 (Phone Number) | ~~IND016360265~~ (EPA Number)

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

(Phone Number) | ILD000646816 (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | 420 S. Colfax (Address) | 918089002 (Site Number)

Griffith (City) | Indiana (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: Organic 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
Trichlorethylene	ORM-A	UN 1710	F001

WEIGHT FOR D.O.T. USE ~~LBS~~ TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS OR GAL. | QUANTITY OF WASTE DELIVERED: 00110 | (1) GALLONS (Circle One) (2) CU. YDS.

METHOD OF SHIPMENT (Circle One) (DRUMS 20 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] 7.21.82 (Authorized Signature) DATE 7-21-82

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 7/21/82

(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 7/21/82

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. # 3

SITE COPY - PART 3 On dock 7.22.82 To IAKT-63 6WM 8.5.82

0037

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

0482415

Authorization Number

Reliable Electric Co. (Company Name) | 11333 Addison Street (Address) | 455-8010 (Phone Number) | 0 3 1 0 9 6 0 0 3 3 G (Generator Number)

Franklin Park (City) | Illinois (State) | 60131 (Zip) | I L D 0 0 5 1 0 5 0 7 7 (EPA Number)

WASTE HAULER(S)

Strand Trucking (Hauler Name) | 13642 Kenton, Crestwood, Il. (Hauler Address) | S.W.H. Registration Number 0 0 2 4 0 0 1

~~XXX-XXXX~~ 385-8440 (Phone Number) | (EPA Number)

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

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | 420 S. Colfax (Address) | 9 1 8 0 8 9 0 2 (Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip) | 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: 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: 1,1,1, Trichloroethane | HAZARD CLASS:

U N 2 8 3 1 (UN or NA Number) | F 0 0 1 (EPA HW Number)

WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 0 0 0 9 1 8 | 1 GALLONS (Circle One) / 2 CU. YDS. | 1

METHOD OF SHIPMENT (Circle One) (DRUMS 17 (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 Linda Lagman (Authorized Signature) DATE 10-15-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) L Lundell (Authorized Signature) DATE 10/15/82

(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 Berg (Authorized Signature) DATE 10/15/82

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 10-15-82 Toilet-63 6PM 11-23

003740

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

0645592

Authorization Number 997794

TO BE COMPLETED BY WASTE GENERATOR

Reliable Electric Co.	11333 Addison Street	31 2455801 0	031 096 003 3 G
(Company Name)	Address	Phone Number	Generator Number
Franklin Park	Illinois	60131	ILD 005105 077
City	State	Zip	EPA Number

WASTE HAULER(S)

Strand Trucking	13642 Kenton, Crestwood, Il. 60445	S.W.H. Registration Number 0 024 001
Hauler Name	Hauler Address	
	3123858440	I ~~ND 0 1 6 3 6 0 2 6 5~~ 00846510
	Phone Number	EPA Number
Hauler Name	Hauler Address	S.W.H. Registration Number
	Phone Number	EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service	420 S. Colfax			91 80 89 02
(Facility Name)	Address			Site Number
Griffith	Indiana	46319	3127683400	I ND 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: Organic 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
Trichlorethylene	ORM-A	UN 1710	F001

WEIGHT FOR D.O.T. USE 18,000 (LBS) TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 001540 (1 GALLONS (Circle One) 2 CU. YDS.)

METHOD OF SHIPMENT (Circle One) (DRUMS 24 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 Gymad Parry (Authorized Signature) DATE 6-18 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) Jim Batten (Authorized Signature) DATE 6/18/82

(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 O. Burke (Authorized Signature) DATE 6/21/82

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

On dock 6-18-82
To 122 T-T-63 6KW 6-23-82

003755

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

0645594

Authorization Number

Reliable Electric Co. (Company Name)	11333 Addison St. (Address)		3124558010 (Phone Number)	031096003 3 G (Generator Number)
Franklin Park (City)	Illinoia (State)	60131 (Zip)		IL D0 05105 07 7 (EPA Number)

WASTE HAULER(S)

Strand Trucking (Hauler Name)	13642 Kenton Crestwood, Il. (Hauler Address)		S.W.H. Registration Number 0024001
		385-8440 (Phone Number)	(EPA Number)
(Hauler Name)	(Hauler Address)		S.W.H. Registration Number
		(Phone Number)	(EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name)	420 S. Colfax (Address)			91808902 (Site Number)
Griffith (City)	Indiana (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: Organic 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:		
Trichlorethylene	ORM-A	UN 1710 (UN or NA Number)	F001 (EPA HW Number)

WEIGHT FOR D O T. USE _____ LBS / TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 001296 (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) 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 Linda Lappin (Authorized Signature) DATE: 10-15-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) R. Pickell (Authorized Signature) DATE: 10/15/82 (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

M. Graul (Authorized Signature) DATE: 10/15/82 (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 / 426-26

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 10-15-82 To I20 TE T-63 GRM 10-20-82

003739

IL 532 610
EPC 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

0675012

Authorization Number ____

Reliable Electric Co. (Company Name) | 11-33 Addison St. (Address) | 455 8010 (Phone Number) | 03 1096 0033 G (Generator Number)

Franklin Park (City) | Illinoia (State) | 60131 (Zip) | ILD 0 0510 5077 (EPA Number)

WASTE HAULER(S)

Strand Trucking (Hauler Name) | 13642 Kenton, Crestwood Il. (Hauler Address) | S.W.H. Registration Number 0024001

385-8440 (Phone Number) | EPA Number

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

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

Griffith (City) | Indiana (State) | 46319 (Zip) | 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: 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:	UN or NA Number	EPA HW Number
Trichlorethylene	ORM-A	UN 1710	F001

WEIGHT FOR D.O.T. USE ____ LBS / TONS (circle one)

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

QUANTITY OF WASTE DELIVERED 001350 | GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) (DRUMS 25 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 Linda Pazara (Authorized Signature) DATE: 10-15-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) R. Lindwall (Authorized Signature) DATE: 10/15/82

(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 10/15/82

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 10.15.82 To 120 E T-63 EKM 10.20.82

003738

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

0314030

SPECIAL WASTE HAULING MANIFEST

Authorization Number ____

Reliable Electric Co. (Company Name) | 11333 Addison St. (Address)
Franklin Park (City) | Illinois (State) | 60131 (Zip)
031 09 60 033 G — Generator Number
ILD#005105077

WASTE HAULER(S)

Strand Trucking (Hauler Name) | 13642 Kenton, Crestwood, Il. (Hauler Address)
S.W.H. Registration Number 00 24002
~~IND#016360265~~
ILT#000646810

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) | Indiana (State) | 46319 (Zip)
9 180 8902 — Site Number
IND#0 16360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Organic Solvent
WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	WEIGHT FOR D.O.T. USE (LBS / TONS circle one)
1,1,1,Trichlorethane	ORM-A	1155
	UN#2831	

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

QUANTITY OF WASTE DELIVERED: 110

(1) GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) (DRUMS) 2 TANK TRUCK OPEN TRUCK OTHER (Specify) Vac

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 8-29-83 Linda Lamara (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: 8/29/83

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

_____ (Authorized Signature) DATE: 8-29-83

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

To 117RT-63 ERM 8-30-83

SITE COPY - PART 3

05340

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

0675013
1 7

Authorization Number 8 13

TO BE COMPLETED BY WASTE GENERATOR

Reliable Electric Co.	11333 Addison St.	3124558010	03 10 960 033 G
(Company Name)	Address	Phone Number	14 Generator Number 24
City	State	Zip	IL D0 051 050 77 EPA Number

WASTE HAULER(S)

American Chem.	Colfax St. Griffith, Ind	312 768 3400	S.W.H. Registration Number 0024001 (25 31)
Hauler Name	Hauler Address	Phone Number	EPA Number

Strand Trucking	13642 Kenton Crestwood, Ill.	3123858440	S.W.H. Registration Number (32 38) ILT0006468 10
Hauler Name	Hauler Address	Phone Number	EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service	420 S. Colfax			918089 02 (39 Site Number 46)
(Facility Name)	Address			
Griffith	Indiana	46319	312 768 3400	IND016360265
City	State	Zip	Phone Number	EPA Number
Alternate (Facility Name)	Address			39 Site Number 46
City	State	Zip	Phone Number	EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Organic 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:		
Trichlorethylene	ORM-A	un1710 (UN or NA Number)	F001 (EPA HW Number)

WEIGHT FOR D.O.T. USE: 13,000 (LBS) TONS (circle one)

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

QUANTITY OF WAS DELIVERED: 001100 (47 52) (GALLONS) (circle One) 2 CU. YDS. 1 (53)

METHOD OF SHIPMENT (Circle One): (DRUMS 20 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 Linda Langara (Authorized Signature) DATE 1-10-83

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: 1/10/83 (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 Pu (Authorized Signature) DATE 1/10/83 (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 1.10.83 To 118 RT. 63 64 2.2.83

005331

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

0675015

Authorization Number

TO BE COMPLETED BY WASTE GENERATOR

Reliable Electric Co. (Company Name)	11333 Addison St. (Address)	3124558010 (Phone Number)	0310960033 G (Generator Number)	
Franklin Park, (City)	Illinois (State)	60131 (Zip)	ILD0051050 77 (EPA Number)	

WASTE HAULER(S)

Strand Trucking (Hauler Name)	13642 Kenton, Crestwood, Ill. (Hauler Address)	S.W.H. Registration Number 00240 02	
		312-385-8440 (Phone Number)	ILT0)0064681 0 (EPA Number)
(Hauler Name)	(Hauler Address)	S.W.H. Registration Number	
		(Phone Number)	(EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Services (Facility Name)	420 S. Colfax (Address)			918 08 902 (Site Number)
Griffith IN (City)	Indiana (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: 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:		
1,1,1, Trichloroethane		UN2831 (UN or NA Number)	F001 (EPA HW Number)

WEIGHT FOR D.O.T. USE 4,210 (LBS) TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 1045 GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) (DRUMS 19 (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 Linda Lazzara (Authorized Signature) DATE: 4-22-83

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 Schiff (Authorized Signature) DATE: 4/22/83

(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 T Davis (Authorized Signature) DATE: 4/22/83

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 117 Tr T-63 6CM 4-22-83

CJ5330

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

0717571
1 7

Authorization Number ____ 8 13

Reliable Electric Co. (Company Name) | 11333 Addison St. (Address) | 3124558010031096003 3 G (Phone Number 1-14 / Generator Number 15-24)

Franklin Park (City) | Illinois (State) | 60131 (Zip) | ILD051050770 (EPA Number)

WASTE HAULER(S)

American Chemical (Hauler Name) | Colfax St. Griffith, Inc. (Hauler Address) | S.W.H. Registration Number 00240 02 (25-31)

312 768 3400 (Phone Number) | ____ (EPA Number)

Strand Trucking (Hauler Name) | 13642 Kenton Crestwood, Ill. (Hauler Address) | S.W.H. Registration Number ____ (32-38)

3123858440 (Phone Number) | ILT0006468 10 (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | 420 S. Colfax (Address) | 9180 89 02 (39-46 Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip) | 312768 3400 (Phone Number) | IND016360265 (EPA Number)

____ (Alternate (Facility Name)) | ____ (Address) | ____ (39-46 Site Number)

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

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Organic 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
Trichlorethylene	ORM-A	UN1710	F001

WEIGHT FOR D.O.T. USE 18800 (LBS) TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 1650 (47-52) (1) GALLONS (Circle One) (2) CU. YDS. 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS 20 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 Linda Lazzara (Authorized Signature) | DATE: 4-22-83

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) Jean Lefait (Authorized Signature) | DATE: 4/22/83 (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 F. Dues (Authorized Signature) | DATE: 4/25/83 (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 4-25-83

To 120 RT-63
6RM 6-3-83
CJ5334

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

0797452

Authorization Number

TO BE COMPLETED BY WASTE GENERATOR

Reliable Electric Co. (Company Name)	11333 Addison St. (Address)	312-455-8010 (Phone Number)	0 3 1 0 9 6 0 0 3 3 G (Generator Number)
Franklin Park (City)	Illinois (State)	60131 (Zip)	I L D 0 0 5 1 0 5 0 7 7 (EPA Number)

WASTE HAULER(S)

American Chemical (Hauler Name)	Colfax St. Griffith, Ind. (Hauler Address)	312-768-3400 (Phone Number)	S.W.H. Registration Number 0 0 2 4 0 0 2 (25–31); XXXXXXXXXXXX (EPA Number)
Strand Trucking Co. (Hauler Name)	13642 Kenton, Crestwood, Il. (Hauler Address)	312-385-8440 (Phone Number)	S.W.H. Registration Number (32–38); I L T 0 0 0 6 4 6 8 1 0 (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name)	420 S. Colfax (Address)			9 1 8 0 8 9 0 2 (39–46 Site Number)
Griffith (City)	Indiana (State)	46319 (Zip)	312-768-3400 (Phone Number)	I N D 0 1 6 3 6 0 2 6 5 (EPA Number)
Alternate (Facility Name)	Address			39 Site Number 46
City	State	Zip	Phone Number	EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Organic 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		
Trichlorethylene	ORM-A	U N 1 7 1 0 (UN or NA Number)	F 0 0 1 (EPA HW Number)

WEIGHT FOR D.O.T. USE ~~LBS~~ TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 2310 (47–52) 1 GALLONS 2 CU. YDS. (Circle One) 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS) 42 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 Linda Lazzara (Authorized Signature) DATE 8-29-83

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROP... THE DESTINATION AS INDICATED:

RT AND I ACKNOWLEDGE

2310 gal

(1) Jean Schmitt (Authorized Signature) 8/29/83 (54–59)

(2) (Authorized Signature) / / (60–65)

DISPOSAL, STORAGE, OR TREATMENT FACILITY

...E YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE ...

Michael C. Pusey (Authorized Signature) DATE 8/29/83 (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 Lock To 120 K T-63 Gal 9-6-83

CJ5341

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. 2060-0404 Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. ILD005105077 — 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
Reliable Electric
11333 Addison St.
Franklin Park, Il. 60131

4. Generator's Phone (312) 455-8010

A. Illinois Manifest Document Number IL 1125311

B. Illinois Generator's ID 0 3 1 0 9 6 0 3 3

5. Transporter 1 Company Name: American Chemical Service — 6. US EPA ID Number

C. Illinois Tranporter's ID 0 0 2 4

D. (312) 768-3400 Transporter's Phone

7. Transporter 2 Company Name: Strand Trucking Co. — 8. US EPA ID Number IND065366265

E. Illinois Transporter's ID 0 3 1 1

F. (312) 385-8440 Transporter's Phone

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

10. US EPA ID Number IND 006 386 810

G. Illinois Facility's ID 0 7 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. — 13. Total Quantity — 14. Unit Wt/Vol — I. Waste No.

	HM						
a.	X	Trichlorethylene	UN1710	27	DM	Gallons	1	EPA HW Number F 0 0 1
b.	X	1,1,1, Trichloroethane	UN2831	34/36	DM	Gallons	1	EPA HW Number F 0 0 1
c.								EPA HW Number
d.								EPA HW Number

Authorization Number

1485
1980

J. Additional Descriptions for Materials Listed Above — odes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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
LINDA LAZZARA	Linda Lazzara	10 26 84

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month Day Year
Leonard M STRAND	Leonard M Strand	10 26 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	Signature	Date Month Day Year
MICHAEL E BICAS	Michael E Bicas	10 26 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

Hold for Crude.

U91212

STATE OF WISCONSIN

Mail Copies To: State of Wisconsin
Department of Natural Resources
Bureau of Solid Waste Mgt.
Box 7094
Madison, Wisconsin 53708

FOR DNR USE ONLY

Form 4400-66 Rev. 7-84
Chapter 144, Wis. Stats.

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. WID 006 07[illegible] 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
RELIABLE ELECTRIC / UTILITY PRODUCTS
4565 N. 60 ST MILWAUKEE WIS 532[illegible]

A. State Manifest Document Number: WI 15666
B. State Generator's ID:

4. Generator's Phone (414) 35[illegible]

5. Transporter 1 Company Name: ABC SERVICES
6. US EPA ID Number: WID 074 959 339
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 SERVICES
490 S. CALFAX AVE
GRIFFITH INDIANA 46319
10. US EPA ID Number: IND 000 626 465
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 NA1993	1	TT	600	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
DO NOT BREATH VAPORS

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

Printed/Typed Name	Signature	Date (Month Day Year)
MICK KLEIN	Mick Klein	12 20 84

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)
Lee Gerow	Lee Gerow	12 20 84

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	FDunfee	12 20 84

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

211K T-50

Distribution: 1 — BSWM 4 — Facility
2 — Generator 5 — Generator
3 — BSWM 6 — Transporter
BSWM Copies 1 & 3 mail to above.

COPY 4

UU1200

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

0862201 (1–7)

Authorization Number ____ (8–13)

Reliable Electric (Company Name)	11333 Addison St. (Address)	3124558010 (Phone Number)	031 096 0033 G (14 Generator Number 24)	
Franklin Park (City)	Illinois (State)	60131 (Zip)	ILD 005 105 077 (EPA Number)	

WASTE HAULER(S)

Steand Truck (Hauler Name)	B642 Kenton Crestwood, Ill. (Hauler Address)	3123858440 (Phone Number)	S.W.H. Registration Number 0024002 (25–31)	ILD006466810 (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 (Facility Name)	520 S. Colfax (Address)				9180890Z (39–46 Site Number)
Griffith (City)	Indiana (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: Organic 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: 1,1,1, Trichloroethane

HAZARD CLASS:

UN2831 (UN or NA Number)

F001 (EPA HW Number)

WEIGHT FOR D.O.T. USE 16,104 (LBS) TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 001320 (47–52) (GALLONS) 2 CU. YDS. (Circle One) 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS 24 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 Linda Lazzara (Authorized Signature) DATE: 5-14-84

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Jim Bates (Authorized Signature) DATE: 5/14/84 (54–59)

(2) ____ (Authorized Signature) DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

Michael Dwyer (Authorized Signature) DATE: 5/14/84 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: ____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS, 217 / 782-3637 OUTSIDE ILLINOIS, 800 / 424-8802 or 202 / 426-2675

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

REV. 8 4

SITE COPY–PART 3

120 T-63

007263

STATE OF ILLINOIS

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

0862203

Authorization Number

TO BE COMPLETED BY WASTE GENERATOR

Reliable Electric (Company Name) | 11333 Addison (Address) | 312-455-8010 (Phone Number) | 0 3 1 0 9 6 0 0 3 3 G (Generator Number)

Franklin Park (City) | Illinois (State) | 60131 (Zip) | I L D 0 0 5 1 0 5 0 7 7 (EPA Number)

WASTE HAULER(S)

Strand Trucking (Hauler Name) | 13642 Kenton, Crestwood, Ill. (Hauler Address) | S.W.H. Registration Number 0 0 2 4 0 0 2

312-385-8440 (Phone Number) | I L D0 0 06 4 6 81 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 S. Colfax (Address) | 9 1 8 0 8 9 0 2 (Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip) | 312-768-3400 (Phone Number) | I ND 0 16 3 60 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: ~~TRICHLOROETHYLENE~~ Organic 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
Trichlorethylene	ORM-A	U N 1 7 1 0	F 0 0 1

WEIGHT FOR D.O.T. USE 19459 (LBS) TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 001595 (GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) (DRUMS 200 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 Linda Ramsey (Authorized Signature) DATE: 8-31-84

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: 8/31/84

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

[signature] (Authorized Signature) DATE: 8/31/84

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

122-T-63

007271

IL 532-610
PC 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

0862206
1 7

Authorization Number ____ 8 13

Reliable Electric (Company Name) | 11333 Addison (Address) | 312-455-8010 (Phone Number) | 0310960033 XXXXXXXXXX (Generator Number) 14 G 24

Franklin Park (City) | Illinois (State) | 60131 (Zip) | IL D000510507 7 (EPA Number)

WASTE HAULER(S)

Strand Trucking (Hauler Name) | 13642 Kenton, Crestwood, Il. (Hauler Address) | S.W.H. Registration Number 0824002 25 31

312-385-8440 (Phone Number) | ILD000646481 (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 (Address) | 9 1 8 0 8 9 0 2 39 Site Number 46

Griffith (City) | Indiana (State) | 46319 (Zip) | 312-768-3400 (Phone Number) | IN D 01 63 6 0 26 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: Organic 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: 1,1,1, Trichlorethane ORM-A

HAZARD CLASS: UN2831 (UN or NA Number) F001 (EPA HW Number)

WEIGHT FOR D.O.T. USE 3692 LBS (circle one) TONS

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

QUANTITY OF WASTE DELIVERED: 00 9495 47 52 (1 GALLONS (Circle One) 2 CU. YDS. 1) 53

METHOD OF SHIPMENT (Circle One) (DRUMS 9 Number) TANK TRUCK OPEN TRUCK (OTHER (Specify) UAN)

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 Linda Panzara (Authorized Signature) DATE: 8-31-84

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) Jim Batt (Authorized Signature) DATE: 8 31 84 54 59

(2) ____ (Authorized Signature) DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO X

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

Michael O'Dea (Authorized Signature) DATE: 9 8 31 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

120 K T-63

007269

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

0862207 (1–7)

Authorization Number ____ (8–13)

Reliable Electric Co. (Company Name) | 11333 Addison (Address) | 312-455-8010 (Phone Number) | 0 3 1 0 9 6 0 0 3 3 G (14–24) Generator Number

Franklin Park, (City) | Illinois (State) | 60131 (Zip) | I L D 0 0 5 1 0 5 0 7 7 EPA Number

WASTE HAULER(S)

Strand Trucking (Hauler Name) | 13642 Kenton (Hauler Address) Crestwood, Ill. | S.W.H. Registration Number 0 0 2 4 0 0 2 (25–31)

312-385-8440 (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 ____ (32–38)

____ (Phone Number) | ____ EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical (Facility Name) | 420 S. Colfax (Address) | 9 1 8 0 8 9 0 2 (39–46) Site Number

Griffith (City) | Indiana (State) | 46319 (Zip) | 312-768-3400 (Phone Number) | I ND 0 1 6 3 6 0 2 6 5 EPA Number

____ (Alternate (Facility Name)) | ____ (Address) | ____ (39–46) Site Number

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

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Organic 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: 1,1,1, Trichlorethane | HAZARD CLASS: ORM-A

U N 2 8 3 1 (UN or NA Number) | F 0 0 1 (EPA HW Number)

WEIGHT FOR D.O.T. USE 7560 LBS TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 00660 (47–52) GALLONS (Circle One) 2 CU. YDS. 1 (53)

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) DATE: 6-18-84

660 gal

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTIT[Y] THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature)

(2) ____ (Authorized Signature)

[...]SPORT AND I ACKNOWLEDGE

DATE: 06 18 84 (54–59)

DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

[...]OUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED [...] SITE SPECIFIED ABOVE.

[signature] (Authorized Signature) DATE: 6/19/84 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: ____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637 OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

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

REV. 8 4

SITE COPY–PART 3

120E T-63

UU7200

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

0862209 (1–7)

Authorization Number (8–13)

Reliable Electric (Company Name) | 11333 Addison (Address) | 312-455-8010 (Phone Number) | 0 3 1 0 9 6 0 0 3 3 G (14–24 Generator Number)

Franklin Park (City) | Illinois (State) | 60131 (Zip) | I L D 0 0 5 1 0 5 0 7 7 (EPA Number)

WASTE HAULER(S)

Strand Trucking (Hauler Name) | 13642 Kenton, Crestwood, Il. (Hauler Address) | S.W.H. Registration Number 0 0 2 4 0 0 2 (25–31)

312-385-8440 (Phone Number) | I LD 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 (Address) | 9 1 8 0 8 9 0 2 (39–46 Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip) | 312-768-3400 (Phone Number) | I ND 01 6 3 6 0 2 6 5 (EPA Number)

Alternate (Facility Name) | Address | (39–46 Site Number)

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Organic 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: Trichlorethylene | HAZARD CLASS: ORM-A | U N 1 7 1 0 (UN or NA Number) | F 0 0 1 (EPA HW Number)

WEIGHT FOR D.O.T. USE 2447 LBS / TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 00 1760 (47–52) | 1 GALLONS (Circle One) 2 CU. YDS. 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS 41 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 Linda Tarzan (Authorized Signature) DATE: 8-31-84

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) Jim Battle (Authorized Signature) DATE: 8 31 84 (54–59)

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

(Authorized Signature) DATE 9/31/84 (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

122 R. T-63

00T270

IL 532-610
PC 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

0862210
1 7

Authorization Number ____ 8 13

) BE COMPLETED BY
ASTE GENERATOR

Reliable Electric Co. (Company Name) | 11333 Addison Street (Address) | 3 12 455-8010 (Phone Number) | 0 3 1 0 9 6 0 0 3 3 G (14 Generator Number 24)

(City) | (State) | (Zip) | I L D 0 0 5 1 0 5 0 7 7 (EPA Number)

WASTE HAULER(S)

Strand Trucking (Hauler Name) | 13642 Kenton Crestwood, Il. (Hauler Address) | S.W.H. Registration Number 0 0 2 4 0 0 2 (25 31)

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 (32 38)

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | Colfax St., [redacted]. (Address) | 9 1 8 0 8 9 0 2 (39 Site Number 46)

Griffith (City) | Indiana (State) | 46319 (Zip) | 312-768-3400 (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: Organic 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: Trichloroethylene | HAZARD CLASS: ORM-A | UN 1710 (UN or NA Number) | F001 (EPA HW Number)

WEIGHT FOR D.O.T. USE 17850 (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 1 8 7 0 (47 52) (1 GALLONS 2 CU. YDS. (Circle One)) 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS 34 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: 3.2.84

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) DATE: 3/2/84 (54 59)

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

[signature] (Authorized Signature) DATE: 3/5/84 (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 122 FT-63 ERM 3.2.84 0017261

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

0797451 (1–7)

Authorization Number ____ (8–13)

TO BE COMPLETED BY WASTE GENERATOR

Reliable Electric Co (Company Name) | 11333 Addison (Address) | 3124558010 (Phone Number) | 0310960033 G (14 Generator Number 24)

Franklin Park (City) | Illinois (State) | 60131 (Zip)

ILD005105077 (EPA Number)

WASTE HAULER(S)

Strand Trucking (Hauler Name) | 13642 Kenton, Crestwood, Ill. (Hauler Address) | S.W.H. Registration Number 0024002 (25–31)

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 S Colfax (Address) | 21808902 (39 Site Number 46)

Griffith (City) | Indiana (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: Organic 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: 1,1,1, Trichloroethane | HAZARD CLASS: ORM-A | UN2831 (UN or NA Number) | F001 (EPA HW Number)

WEIGHT FOR D.O.T. USE 16875 (LBS) TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 001485 (47–52) (1 GALLONS 2 CU. YDS. (Circle One)) 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS) 27 (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 Linda Lozzara (Authorized Signature) | DATE: 1-6-84

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) Jim Butler (Authorized Signature) | DATE: 1/6/84 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

Michael Burg (Authorized Signature) | DATE: 1/6/84 (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 IBFT-63 GRM 1-20-84

007260

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

0717575
1 7

Authorization Number 8 13

Reliable Electric Co. (Company Name) | 11333 Addison St. (Address) | 3125558010 (Phone Number) | 03 109 600 33 (14 Generator Number) G 24

Franklin Park (City) | Illinois (State) | 60131 (Zip) | ILD 00 510 5077 (EPA Number)

WASTE HAULER(S)

[redacted] (Hauler Name) | [redacted] (Hauler Address) | S.W.H. Registration Number 25 31

Phone Number | EPA Number

Strand Trucking (Hauler Name) | 13642 Kenton, Crestwood, Ill. (Hauler Address) | S.W.H. Registration Number 0024002 (32 38)

3123858440 (Phone Number) | ILD000646810 (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Services (Facility Name) | 420 S. Colfax (Address) | 91808902 (39 Site Number 46)

Griffith, (City) | Indiana (State) | 46319 (Zip) | 312-768-3400 (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: Organic 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
Trichloroethylene	ORM-A	4N1710	F001

WEIGHT FOR D.O.T. USE 19375 LBS TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 001705 (47 52) GALLONS (Circle One) 2 CU. YDS. 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS 31 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 Linda Lazzara (Authorized Signature) DATE 1-6-84

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) Jim Butler (Authorized Signature) DATE 1/6/84 (54 59)

(2) (Authorized Signature) DATE ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

Michael C Berg (Authorized Signature) DATE 1/6/84 (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 122 E 7-63 61'41 1-24-84

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STATE OF ILLINOIS

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

0717576

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number

Reliable Electric (Company Name) | 11333 Addison (Address) | 3124558010 (Phone Number) | 0310960033 G (Generator Number)

Franklin Park (City) | Ill. (State) | 60131 (Zip) | FLD005105077 (EPA Number)

WASTE HAULER(S)

Strand Trucking (Hauler Name) | 13642 Kenton, Crestwood, Ill (Hauler Address) | 3123858440 (Phone Number) | S.W.H. Registration Number 0024002 | FLD000646810 (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) | 91808902 (Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip) | 3127683400 | 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: Organic Solvent | HAZARD CLASS: ORM-A | UN1710 (UN or NA Number) | F001 (EPA HW Number)

WEIGHT FOR D.O.T. USE 19,459 LBS TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WAZTE DELIVERED: 001595 (47–52) 1 GALLONS (Circle One) 2 CU. YDS. 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS 29 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 Linda Lazzara (Authorized Signature) DATE: 5-14-84

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Jim Batten (Authorized Signature) DATE: 5/14/84 (54–59)

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

Michael E. Bruce (Authorized Signature) DATE: 5/14/84 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

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

REV. # 4

SITE COPY - PART 3

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1. 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

0645591

Authorization Number

Reliable Electric (Company Name) | 11333 Addison (Address) | 312-455-8010 (Phone Number) | 0310960033 G (Generator Number)

Franklin Park (City) | Illinois (State) | 60131 (Zip) | ILD0051 05077 (EPA Number)

WASTE HAULER(S)

Strand Trucking (Hauler Name) | 13642 Kenton Crestwood, Il. (Hauler Address) | S.W.H. Registration Number 00240 02

312-385-8440 (Phone Number) | ILD0006 46810 (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) | Indiana (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: ~~Organic Solvent~~ 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: Organic Solvent

HAZARD CLASS: ORM-A

UN or NA Number: UN 1710

EPA HW Number: Fool

WEIGHT FOR D.O.T. USE: 33390 (LBS) TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 002915 (1) GALLONS (Circle One) (2) CU. YDS. 1

METHOD OF SHIPMENT (Circle One) (DRUMS 53 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 Linda Lazzara (Authorized Signature) DATE: 6-18-84

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) Thomas Paul Strand (Authorized Signature) DATE: 06/18/84

(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.

Michael C. Dwyer (Authorized Signature) DATE: 6/18/84

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

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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 1 0 5 0 7 7
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: Reliable Electric, 11333 Addison Street, Franklin Park, IL 60131
4. Generator's Phone (312) 455-8010
A. Illinois Manifest Document Number: IL 1301258
B. Illinois Generator's ID: 0 3 1 0 9 6 5 0 3 3

5. Transporter 1 Company Name: American Chemical Service
6. US EPA ID Number: I N D 0 1 6 3 6 0 2 6 5
C. Illinois Tranporter's ID: 0 0 2 4
D. ( ) Transporter's Phone

7. Transporter 2 Company Name: Strand Trucking Company
8. US EPA ID Number: I L D 0 0 0 6 4 6 8 1 0
E. Illinois Transporter's ID:
F. (312) 385-8440 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. 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	Hazardous Trichlorethylene UN1710	4 2	DM	2 3 1 0	1	EPA HW Number: F 0 0 1; Authorization Number:
b.	X	1,1,1, Trichloroethane UN2831	2 5	DM	1 3 7 5	1	EPA HW Number: F 0 0 1; 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: Ken Herbik | Signature: Ken Herbik | Date: Month 9 Day 20 Year 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Leonard M STRAND | Signature: Leonard M Strand | Date: Month 9 Day 20 Year 85

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

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: MICHAEL C. BURKE | Signature: Michael C Burke | Date: Month 9 Day 20 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 this 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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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 05 1 050 7 7 — Manifest Document No.

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

GENERATOR

3. Generator's Name and Mailing Address: Reliable Electric, 11333 Addison Street, Franklin Park, Il. 60131

4. Generator's Phone (312) 455-8010

A. Illinois Manifest Document Number: IL 1301252

B. Illinois Generator's ID: 0 3 10 9 65 0 3 3

5. Transporter 1 Company Name: Strand Trucking — 6. US EPA ID Number: IL D 00 06 4 68 1 0

C. Illinois Tranporter's ID: 03 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 Service, 420 S. Colfax Ave., Griffith, Indiana 46319 — 10. US EPA ID Number: IN D0 16 3 60 26 5

G. Illinois Facility's ID: 9 1 8 08 90 0 02

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. HAZARDOUS Trichlorethylene UN1710	X	37	DM	2035		EPA HW Number F0 0 1 / Authorization Number
b.						EPA HW Number / Authorization Number
c.						EPA HW Number / Authorization Number
d.						EPA HW Number / Authorization Number

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above
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: Linda Lazzara — Signature: Linda Lazzara — Date (Month Day Year): 03 05 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: JAMES BATTEN — Signature: James Batten — Date (Month Day Year): 03 05 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 D. BURGO — Signature: Michael D Burgo — Date (Month Day Year): 3 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

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

IBKT-63

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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. I LD 005105077 — 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
Reliable Electric
11333 Addison St.
Franklin Park, Il. 60131

4. Generator's Phone (312) 455-8010

A. Illinois Manifest Document Number: IL 1125312

B. Illinois Generator's ID: 013/10/9/6/5/0/3/3

5. Transporter 1 Company Name: Strand Trucking Co.

6. US EPA ID Number: ILD000646838

C. Illinois Tranporter's ID: 0024

D. (312) 385-8440 Transporter's Phone

7. Transporter 2 Company Name

8. US EPA ID Number: ILD000646810

E. Illinois Transporter's ID: 1011

F. ( ) Transporter's Phone

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

10. US EPA ID Number: IND016360265

G. Illinois Facility's ID: 9/1/8/0/8/9/0/0/0/2

H. Facility's Phone: (312) 768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. Hazardous Trichlorethylene UN1710	X	30	DM	1650		EPA HW Number: T0101 / 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: LINDA LAZZARA — Signature: Linda Lazzara — Date: Month 03 Day 01 Year 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Leonard M Strand — Signature: Leonard M Strand — Date: Month 3 Day 01 Year 85

18. Transporter 2 Acknowledgement or Receipt of Materials

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

FACILITY

19. Discrepancy Indication Space

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

Printed/Typed Name: Michael D Burgo — Signature: — Date: Month 3 Day 11 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

IAET-63

038077

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 005105077 | 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
RELIABLE ELECTRIC
11333 ADDISON ST.
FRANKLIN PARK, IL. 60131

4. Generator's Phone (312) 455-8010

A. Illinois Manifest Document Number: IL 615625288

B. Illinois Generator's ID: 0 3 1 0 9 6 1 0 3 3

5. Transporter 1 Company Name: American Chemical Service
6. US EPA ID Number: IND 016360265
C. Illinois Transporter's ID: 0 0 2 4
D. 312 768-3400 Transporter's Phone

7. Transporter 2 Company Name: Strand Trucking Co,
8. US EPA ID Number: ILD 000646810
E. Illinois Transporter's ID:
F. 312 385-8440 Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Service
420 S. Co/Fax Ave.
Griffith, INDIANA 46319
10. US EPA ID Number: IND016360265
G. Illinois Facility's ID: 9 1 8 0 8 9 0 0 0 2
H. Facility's Phone: 312 768-3400

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 Trichlorethylene Mixture UN1710 ORM-A	X	~~24~~ 26	DM	1430 ~~1320~~	1	EPA HW Number: F 0 0 1 Authorization Number: 0 0 0 0 0 1
b. Waste Trichlorethane Mixture UN2831 ORM-A	X	~~5~~ 2	DM	~~660~~ 495	1	EPA HW Number: F 0 0 2 Authorization Number: 0 0 0 0 0 1
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

1430
8,
660

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

Unless I am a small quantity generator who has been exempted by statute or regulation from the 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity economically practicable and I have selected the method of treatment, storage, or disposal curre threat to human health and the environment.

under Section ermined to be nt and future

Printed/Typed Name	Signature	Month Day Year
KEN HERBIK	Ken Herbik	09 24 86

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month Day Year
STAN STRAND	Stan Strand	09 24 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

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

Hold 463

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. IL0067480400 | Manifest Document No. 0.0.00.1 | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
RELIABLE LININGS + COATINGS
4141 WASHINGTON BLVD
HILLSIDE IL 60162

A. State Manifest Document Number: INA 0345009

B. State Generator's ID:

4. Generator's Phone (708) 544-2400

5. Transporter 1 Company Name: LANDCREEK MOTOR TRANSIT | 6. Use EPA ID Number: IND.0.0.9.8.4.2.8.2.4 | C. State Transporter's ID: 1875 | D. Transporter's Phone: 219-462-4181

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

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
420 S COLFAX AVE
GRIFFITH IN 46319 0990

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: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	L Waste No.
a. FLAMMABLE LIQUID N.O.S. FLAMMABLE UN-1993.	0.1.0	DM	0.0.5.5.0	1	F005
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: L. L. COPPOLETTA | Signature | Date: Month 04 Day 25 Year 90

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials — Printed/Typed Name: Rick Lewis | Signature | Date: Month 6/ Day 11 Year 90
18. Transporter 2 Acknowledgement of Receipt of Materials — Printed/Typed Name | Signature | Date: Month . Day . Year .

FACILITY
19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: STEVE KILLMUICK | Signature | Date: Month 6 Day 21 Year 90

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0345009

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

COPY 5. TSD COPY

P.O. 123TCT 63 54 10 CAL 204K TSO 6/11/90
1- MARINE SINGLE 5/29/90 013315 45 CAL MARINE SINGLE 6/26/90 911012

0018271

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.9.8.1.9.5.7.4.3.4			

3. Generator's Name and Mailing Address
RELIABLE POWER PRODUCTS, INC.
11411 ADDISON ST.
FRANKLIN PARK, IL 60131

4. Generator's Phone (312) 455-0014

A. State Manifest Document Number: INA 0146753
B. State Generator's ID: 0310965033

5. Transporter 1 Company Name: STRAND TRUCKING CO.
6. Use EPA ID Number: I.L.F.0.0.0.6.4.6.8.1.0
C. State Transporter's ID:
D. Transporter's Phone: (312) 585-8440

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

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
420 S. COLFAX AVE.
GRIFFIN, 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) 924-4570

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE TRICHLOROETHYLENE ORM-A UN1710	1 1	D M	6 0 5	1	F001
b. WASTE TRICHLOROETHANE ORM-A UN2831	6	DM	330	1	F001
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.

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GENERATOR

Printed/Typed Name	Signature	Date Month	Day	Year
KEN HERBIK		10	24	87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year
THOMAS STRAND		10	24	87

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year

FACILITY

19. Discrepancy Indication Space
2A-1BTCT63102
6B-1BTCT63103

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
A. WHITAKER		10	25	87

EPA Form 8700-22 (Rev. 9-86) Previous editions are obsolete.
State Form 11865
9A-1BTCT63102B

DISTRIBUTION:
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PAGE 3 (light green) TSD MAIL TO TSD STATE
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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 0146753

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 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I·L·D·9·8·1·9·5·7·4·5·4 | 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
RELIABLE POWER PRODUCTS, INC
11411 ADDISON STREET
FRANKLIN PARK, IL 60131
4. Generator's Phone (312) 455-0014

A. State Manifest Document Number INA 0146752
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone 317/385-8440
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone 219/924-4570

5. Transporter 1 Company Name: STRAND TRUCKING CO | 6. US EPA ID Number: I·L·D·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 AVE.
GRIFFIN, 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)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
GENERATOR a.	WASTE TRICHLOROETHYLENE ORM-A UN 1710	0 4	D M	2 5 0	1	F001
b.	WASTE TRICHLOROTHANE ORM-A UN 2831	1 2	D M	0 5 0	1	F001
c.						
d.						

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above: 1. GALLONS

15. Special Handling Instructions and Additional Information

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

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

Printed/Typed Name: KEN HERRIK | Signature | Date: Month 1 1 | Day 2 3 | Year 8 7

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: THOMAS STRAND | Signature | Date: Month 1 1 | Day 2 3 | Year 8 7
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 E SCHMIDT | Signature | Date: Month 1 1 | Day 2 4 | Year 8 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.

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

12a 20ŕ T-50 11/24/87
36a 18ŕ T-63 11/25/87
12b 18ŕ T-63 12/7/87

INA 0146752

012526

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. IL0981957434 | 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
RELIABLE POWER PRODUCTS, INC.
11411 ADDISON STREET, FRANKLIN PARK, IL 60131

A. State Manifest Document Number: INA 0146751

4. Generator's Phone (312) 455-0014

B. State Generator's ID: 0310965033

5. Transporter 1 Company Name: STRAND TRUCKING CO.

6. Use EPA ID Number: ILD000646810

C. State Transporter's ID:

7. Transporter 2 Company Name

8. Use EPA ID Number

D. Transporter's Phone:

E. State Transporter's ID:

F. Transporter's Phone:

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
420 S. COLFAX AVENUE
GRIFFIN, 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 TRICHLOROETHYLENE ORM-A UN 1710	1	DM	2035	P	F001
b. WASTE TRICHLOROETHANE ORM-A UN 2831	1	DM	449	1	F001
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.

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GENERATOR

Printed/Typed Name	Signature	Date (Month / Day / Year)
KEN HERBIK	Ken Herbik	08 / 08 / 87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month / Day / Year)
TRUCK DRIVER		08 / 10 / 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)
HAROLD F SCHMIDT	Harold F Schmidt	08 / 10 / 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 0146751

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

012525

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. 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
Reliance Electric
716 N. Edgewood Ave. Wood Dale, IL 60191

A. Illinois Manifest Document Number: 1522807

4. Generator's Phone (312) 766-6690

B. Illinois Generator's ID: 0 4 3 1 2 0 5 0 1 6

5. Transporter 1 Company Name: Landgrebe Motor Transit

6. US EPA ID Number: Ind 009842824

C. Illinois Transporter's ID: 1 8 7 5

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 South Colfax Avenue
Griffith, Indiana 46319

10. US EPA ID Number: Ind 016360265

G. Illinois Facility's ID

H. Facility's Phone: 219 / 32 - 1470

	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 (HM) Waste Flammable Liquid, Nos (Flammable Liquid, UN1993)	001	DM	00055	G	F003
b.						
c.						
d.						

GENERATOR

J. Additional Descriptions for Materials Listed Above
a. Xylene-Xylol

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)
Tim Olson	Tim Olson	01 09 87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)
Fred Koselke	Fred Koselke	01 09 87

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)

FACILITY

19. Discrepancy Indication Space

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

Printed/Typed Name	Signature	Date (Month Day Year)
HAROLD F. Schmidt	Harold F. Schmidt	01 09 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

GM 1-123R TG3 6

012527

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. **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
Reliance Electric
716 N. Edgewood Ave. Wood Dale, Illinois 60191

4. Generator's Phone (**312**) **766-6690**

A. Illinois Manifest Document Number: **IL 1522806**

B. Illinois Generator's ID: **0 4 3 1 2 0 5 0 1 6**

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

C. Illinois Transporter's ID: **1 8 7 5**

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 South Colfax Avenue
Griffith, Indiana 46319

10. US EPA ID Number: **IND 016360265**

G. Illinois Facility's ID

H. Facility's Phone: **(219) 924-4370**

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	**Waste Flammable Liquid, Nos Flammable Liquid, UN 1993**	X	001	DM	00055	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
Xylene-Xylol

K. Handling Codes for Wastes Listed Above In Item #14
1 = Gallons 2 = Cubic Yards

15. Special Handling Instructions and Additional Information

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Printed/Typed Name	Signature	Date (Month Day Year)
Robert Glusik	Robert Glusik	02 17 86

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)
Clifford Biff		02 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 in item 19.

Printed/Typed Name	Signature	Date (Month Day Year)
WRITAKER		2 18 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 RT-50 ✓ 011940

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. . . . SQG . . . . . 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
RELIANCE ELECTRIC CO.
716 N. EDGEWOOD AVE., WOOD DALE, IL., 60191
4. Generator's Phone 312) 766-6690

A. State Manifest Document Number INA 0160089
B. State Generator's ID SQG
C. State Transporter's ID
D. Transporter's Phone 219-462-4181
E. State Transporter's ID
F. Transporter's Phone

5. Transporter 1 Company Name LANDGREBE MOTOR TRANSIT
6. Use EPA ID Number I N D 0 0 6 4 2 8 2 4
7. Transporter 2 Company Name
8. Use EPA ID Number

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
420 S. COLFAX AVE.,
GRIFFITH, INDIANA, 46319
10. Use EPA ID Number I N D 0 0 1 6 3 6 0 2 6 5
G. State Facility's ID
H. Facility's Phone (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. Waste Flammable Liquid, NOS Flammable Liquid, UN1993	0 01	D M	0 0 8 5 5	G	F003
b.					
c.					
d.					

855 gal
110
965

J. Additional Descriptions for Materials Listed Above
xylene - XYLOL

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.
If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR

Printed/Typed Name	Signature	Month	Day	Year
ROBERT GLUSZIK		02	24	89

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
DENNY STALBAUM		02	24	89

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

19. Discrepancy Indication Space

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

Printed/Typed Name	Signature	Month	Day	Year
WHITAKER A.		2	27	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.

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 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

124 - 2/28

INA 0160089

0016793

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. ILD006390553 Manifest Document No. 38726

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
RELIANCE UNIVERSAL 1915 INDUSTRIAL AVE.
ZION, IL. 60099

A. Illinois Manifest Document Number ILD 1535125

4. Generator's Phone (312) 872-1000

B. Illinois Generator ID 0 9 7 2 0 0 0 0 0 4

5. Transporter 1 Company Name Vanderhyden Trans

6. US EPA ID Number ILD048294904

C. Illinois Transporter's ID 1 2 3 2 8 5 7 6 1

D. Transporter's Phone

7. Transporter 2 Company Name

8. US EPA ID Number

E. Illinois Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
American Chemicals
420 S Colfax
Griffith, Ind 46219

10. US EPA ID Number IND016360265

G. Illinois Facility's ID 0 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 WASTE FLAMMABLE LIQUID N.O.S.	001	TT	05000	1	EPA HW Number F003 Authorization Number 0 0 0 0 3 9
b.	UN 1993					EPA HW Number Authorization Number
c.						EPA HW Number Authorization Number
d.						EPA HW Number Authorization Number

GENERATOR

J. Additional Descriptions for Materials Listed Above
F003 F005 D001

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: VIRGINIA NYGUIST Signature: Virginia Nyguist Date: Month 11 Day 20 Year 86

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Tom Guntner Signature: Tom Guntner Date: Month 11 Day 20 Year 86

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

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.
Printed/Typed Name: F DUNFEE Signature: F Dunfee Date: Month 11 Day 20 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

all 121.T63 Od 1941

STATE OF ILLINOIS — ENVIRONMENTAL PROTECTION AGENCY, DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0810
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. 2050-0039. 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 is required by Illinois law.
ILD006390553	39076		

3. Generator's Name and Mailing Address: RELIANCE UNIVERSAL 1915 INDUSTRIAL AVE ZION, IL. 60099
4. Generator's Phone: 872-1000
A. State Manifest Document Number: IE 1784038
B. State Generator ID:
C. State Transporter ID:
D. Transporter Phone:
5. Transporter 1 Company Name: VANDERHYDEN TRANSPORT
6. US EPA ID Number: ILD048294904
E. State Transporter ID:
7. Transporter 2 Company Name:
8. US EPA ID Number:
F. State Transporter ID:
9. Designated Facility Name and Site Address: AMERICAN CHEMICAL SERVICE, INC. 1305 E. 25TH ST. DANVILLE, IL 61832
10. US EPA ID Number: ILD 016360265
G. State Facility ID:
H. 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.	X WASTE FLAMMABLE LIQUID N.O.S. FLAMMABLE LIQUID UN 1993	001	TT	0500	1
b.					
c.					
d.					XX EPA/Other Number

J. Additional Descriptions for Materials Listed Above: F003, F005, D001
K. Handling Codes for Wastes Listed Above: In Item 11: 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)
VIRGINIA NYQUIST	Virginia Nyquist	010687

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)
MARK T. JUELHER		010687

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	010787

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. #8

GENERATOR COPY – PART 1- DO NOT REMOVE PART 1 FROM SET UNTIL COMPLETED.

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FACILITY COPY - PART 3

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012499

STATE OF ILLINOIS — ENVIRONMENTAL PROTECTION AGENCY, DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0610 — LPC 62 8/8

Please print or type (Form designed for use on elite (12-pitch) typewriter.) — EPA Form 8700-22 (3-84) — (Form Approved. OMB No. 2050-0039. Expires 9-30-88)

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. ILD006390553 — Manifest Document No. 39107 — 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
RELIANCE UNIVERSAL
1915 INDUSTRIAL AVE ZION IL 60099

A. State Manifest Document Number: IL 1794099

B. State Generator's ID: 0970200000

4. Generator's Phone (312 872-1000

5. Transporter 1 Company Name: VANDERHYDEN TRANS

6. US EPA ID Number: ILD048294904

C. State Transporter's ID: 0512785767

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 CHEMICALS
420 S COLFAX
GRIFFITH IND 46219

10. US EPA ID Number: IND016360265

G. State Facility's ID: 5213890002

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	
a.	X	WASTE FLAMMABLE LIQUID N.O.S. (FLAMMABLE LIQUID UN 1993)	001	TT	0500	L
b.						
c.						
d.						

I. Waste No.: XX HW 10 / 0 1 1 5 9 / XX / XX

J. Additional Descriptions for Materials Listed Above
F003 F005 D001

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	Month	Day	Year
VIRGINIA NYQUIST	Virginia Nyquist	01	09	87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
MARK J. SOECHTER	Mark J. Soechter	01	09	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
FDUNFEE	FDunfee	01	09	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.

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FACILITY COPY - PART 3

all-120RTG3 13

012500

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.: ILDO063905530005 1

2. Page 1 of: 1

Information in the shaded areas is not required by Federal law

3. Generator's Name
RELIANCE UNIVERSAL

4. Generator's Phone: 312 872-1000

A. State Manifest Document Number: IN 063794

B. State Generator's ID: 0972000004

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

6. US EPA ID Number: ILD 06 95 0 6 16 0

C. State Transporter's ID: 0079

D. Transporter's Phone: 312-597-3377

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
420 S. COLFAX AVE.
GRIFFITH, IND. 46319

10. US EPA ID Number: IND 0 0 1 63 60 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. WASTE FLAMMABLE LIQUID N.O.S. FLAMMABLE LIQUID	001	TT	5000	1	F003
b. UN 1993					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
F003 F005 D001

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, 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
VIRGINIA NYQUIST		05	06	87

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
GARY DAHEN	GARY DAHEN	05	06	87

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

TRANSPORTER

19. Discrepancy Indication Space

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

Printed/Typed Name	Signature	Month	Day	Year
EDUNFEE	EDunfee	05	06	87

FACILITY

EPA Form 8700-22A (Rev. 11-85)

UHWM 2/LP2

T.S.D. DETACH AND RETAIN THIS COPY

117E T63 012501

IN 063794

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.: I LD 0 0 63 9 05 53 0 06 0 0

2. Page 1 of: 1

Information in the shaded areas is not required by Federal law

3. Generator's Name: RELIANCE UNIVERSAL 1915 INDUSTRIAL AVE.

4. Generator's Phone: ZION, IL. 60099 312 872-1000

A. State Manifest Document Number: IN 063795

B. State Generator's ID: 0972000004

5. Transporter 1 Company Name: VANDERHYDEN TRANSPORT CO.

6. US EPA ID Number: I L D 0 4 82 94 9 0 4

C. State Transporter's ID:

D. Transporter's Phone: 0318385-7671

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: I ND 0 16 3 60 2 65

G. State Facility's ID:

H. Facility's Phone: 312-768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	15. Waste No.
a. WASTE FLAMMABLE LIQUID N.O.S. FLAMMABLE LIQUID N.O.S. UN 1993	0 0 1	TT	05000	1	F003
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: F003 F005 D001

K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, 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: VIRGINIA NYQUIST | Signature | Month 07 Day 08 Year 87

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: TIMOTHY CARRENO | Signature | Month 07 Day 15 Year 87

18. Transporter 2 Acknowledgement of Receipt of Materials

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

TRANSPORTER

19. Discrepancy Indication Space

FACILITY

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

Printed/Typed Name: EDUNFEE | Signature: EDunfee | Month 07 Day 08 Year 87

0972000004

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

T.S.D. DETACH AND RETAIN THIS COPY

all IAZR T03 13

012502

IN 063795

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.
ILD 0 0 6 3 0 5 5 3	0 0700		

3. Generator's Name and Mailing Address
RELIANCE UNIVERSAL 1915 INDUSTRIAL AVE.
ZION, IL. 60099

A. State Manifest Document Number: INA 011712

4. Generator's Phone (312) 872-1000

B. State Generator's ID: 097200004

5. Transporter 1 Company Name: VANDERHYDEN TRANSPORT CO.

6. Use EPA ID Number: ILD048 2 9 4 9 0 4

C. State Transporter's ID: 0318

D. Transporter's Phone: 312-385-7671

7. Transporter 2 Company Name

8. Use EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
420 S. COLFAX AVE.
GRIFFITH, IND. 46319

10. Use EPA ID Number: IN D0 1 6 3 6 0 2 6 5

G. State Facility's ID

H. Facility's Phone: 312-768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE FLAMMABLE LIQUID N.O.S. FLAMMABLE LIQUID N.O.S. UN 1993	001	T	5000	P	F003
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
F003 F005 D001

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, 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: VIRGINIA NYQUIST
Signature: Virginia Nyquist
Date: Month 07 Day 18 Year 87

TRANSPORTER

17. Transporter Acknowledgement of Receipt of Materials
Printed/Typed Name: Timothy Carroll
Signature:
Date: Month 7 Day 1 Year 7

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: Dave Ohlendorf
Signature: D. Ohlendy
Date: Month 7 Day 21 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: F DUNFEE
Signature: F Dunfee
Date: Month 07 Day 22 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 011712

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

012503

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.
IL D 0 0 6 [illegible] 5 5 3	b 0 8 6 4		

3. Generator's Name and Mailing Address
RELIANCE UNIVERSAL 1915 INDUSTRIAL AVE.
ZION, IL. 60099

A. State Manifest Document Number: INA 0117713

4. Generator's Phone (312) 872-1000

B. State Generator's ID: 097200004

5. Transporter 1 Company Name	6. US EPA ID Number	C. State Transporter's ID	
VANDERHYDEN TRANSPORT CO.	IL D 04 82 94 904	0318	
7. Transporter 2 Company Name	8. US EPA ID Number	D. Transporter's Phone	312385-7671
		E. State Transporter's ID	
		F. Transporter's Phone	

9. Designated Facility Name and Site Address	10. US EPA ID Number	G. State Facility's ID	
AMERICAN CHEMICAL SERVICES 420 S. COLFAX AVE. GRIFFITH, IN. 46319	I N D 0 1 6 3 6 0 2 6 5	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	Unit Wt/Vol.	14. Waste No.
a. WASTE FLAMMABLE LIQUID N.O.S. FLAMMABLE LIQUID N.O.S.	0 01	T	5 0 0 0	1	F003
b. UN 1993					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
F003 F005 D001

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

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

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good 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
VIRGINIA NYQUIST		08	06	87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year
Tom Gauthier		08	06	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
T DUNFEE		08	06	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

122R-T033

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 0117713

012504

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 00 6 39 0 55 3 — Manifest Document No. 9 1 4
2. Page 1 of 1
Information in the shaded areas is not required by Federal law

3. Generator's Name
RELIANCE UNIVERSAL 1915 INDUSTRIAL AVE.
ZION, IL. 60099
4. Generator's Phone (312) 872-1000

A. State Manifest Document Number IN 063796
B. State Generator's ID 0972000004
C. State Transporter's ID 0318
D. Transporter's Phone 312-385-7671
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone 312-768-3400

5. Transporter 1 Company Name: VANDERHYDEN TRANSPORT CO.
6. US EPA ID Number: I L D 04 82 9 490 4
7. Transporter 2 Company Name
8. US EPA ID Number

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
420 COLAX AVE.
GRIFFITH, IN. 46319
10. US EPA ID Number: I N D 0 16 36 0 26 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	15. Waste No.
GENERATOR a. WASTE FLAMMABLE LIQUID N.O.S. FLAMMABLE LIQUID N.O.S. UN 1993	00 1	T T	05 00 0	1	F003
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
F003 F005 D001

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, 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
VIRGINIA NYQUIST		0 8	11	8 7

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Timothy Greenia		08	11	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
E DUNFEE		08	11	87

IN 063796

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122R TC3 B

UHWM 2/LP2

012505

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.: ILD 006 390 553 / 00970

2. Page 1 of: 1

Information in the shaded areas is not required by Federal law

3. Generator's Name: RELIANCE UNIVERSAL 1915 INDUSTRIAL AVE. ZION, IL. 60099

4. Generator's Phone (312) 872-1000

A. State Manifest Document Number: IN 063797

B. State Generator's ID: 0972000004

5. Transporter 1 Company Name: VANDERHYDEN TRANSPORT

6. US EPA ID Number: ILD048294904

C. State Transporter's ID: 0318

D. Transporter's Phone: 312-385-7671

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: IND016360265

G. State Facility's ID

H. Facility's Phone: 312-768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a. WASTE FLAMMABLE LIQUID N.O.S. FLAMMABLE LIQUID N.O.S. UN 1993	001	TT	00500	1	F003
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: F003 F005 D001

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, 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: VIRGINIA NYQUIST | Signature | Month Day Year: 08 17 87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Timothy Cecchia | Signature | Month Day Year: 08 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: T DUNLEE | Signature | Month Day Year: 08 17 87

EPA Form 8700-22A (Rev. 11-85)

122R TG3 B

UHWM 2/LP2

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IN 063797

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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. / Manifest Document No.: I LD 0 06 3 90 5 53 1 00 8

2. Page 1 of: X

Information in the shaded areas is not required by Federal law

3. Generator's Name: RELIANCE UNIVERSAL 1915 INDUSTRIAL AVE.

4. Generator's Phone (312) 872-1000

ZION, IL. 60099

A. State Manifest Document Number: IN 063798

B. State Generator's ID: 0972000004

5. Transporter 1 Company Name: VANDERHYDEN TRANSPORT CO.

6. US EPA ID Number: I L D0 48 2 94 90 4

C. State Transporter's ID: 0318

D. Transporter's Phone: 312-385-7671

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 COLFAX AVE.
GRIFFITH, IN. 46319

10. US EPA ID Number: I N D0 16 3 60 2 65

G. State Facility's ID

H. Facility's Phone: 312-768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a. WASTE FLAMMABLE LIQUID N.O.S. FLAMMABLE LIQUID N.O.S.	0 0 1	T T	0 5 0 0 0	1	F003
b. UN 1993					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: F003 F005 D001

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, 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: VIRGINIA NYQUIST | Signature | Month 0 1 Day 8 20 Year 8 7 Date

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Timothy Crepia | Signature | Month 0 1 Day 8 Year 8 7 Date

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Month Day Year Date

FACILITY

19. Discrepancy Indication Space

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

Printed/Typed Name: T DUNFEE | Signature | Month 08 Day 20 Year 87

IN 063798

EPA Form 8700-22A (Rev. 11-85)

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1234 TG3 UHWM 2/LP2

012507

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 LD 0 06 3 90 5 53 1 12 0

2. Page 1 of: 1

Information in the shaded areas is not required by Federal law

3. Generator's Name: RELIANCE UNIVERSAL 1915 INDUSTRIAL AVE.

4. Generator's Phone ( ): ZION, IL. 60099 312 872-1000

A. State Manifest Document Number: IN 063809

B. State Generator's ID: 0972000004

5. Transporter 1 Company Name: VANDERHYDEN

6. US EPA ID Number: I L D0 4 82 9 490 4

C. State Transporter's ID: 0318

D. Transporter's Phone: 312-385-7671

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 CEHMICAL SERVICE 420 COLFAX AVE, GRIFFITH, IN. 46319

10. US EPA ID Number: I N D0 1 63 6 02 6 5

G. State Facility's ID

H. Facility's Phone: 312-768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	15. Waste No.
a. WASTE FLAMMABLE LIQUID N.O.S. FLAMMABLE LIQUID N.O.S. UN 1993	0 0 1	T T	0 5 0 0	1	F003
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: F003 F005 D001

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, 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: VIRGINIA NYQUIST | Signature | Month 0 9 | Day 01 | Year 8 7

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: TIMOTHY GREENIA | Signature | Month 09 | Day 01 | Year 87 | Date

18. Transporter 2 Acknowledgement of Receipt of Materials

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

TRANSPORTER

19. Discrepancy Indication Space

FACILITY

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

Printed/Typed Name: FDUNTEE | Signature: FDuntee | Month 09 | Day 01 | Year 87

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

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IN 063809

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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.: ILD0063905313134

2. Page 1 of 1

Information in the shaded areas is not required by Federal law

3. Generator's Name: RELIANCE UNIVERSAL 1915 INDUSTRIAL AVE.
ZION, IL. 60099

4. Generator's Phone (312 872-1000

A. State Manifest Document Number: IN 063820

B. State Generator's ID: 0972000004

5. Transporter 1 Company Name: VANDERHYDEN TRANSPORT CO.

6. US EPA ID Number: ILD048294904

C. State Transporter's ID: 0318

D. Transporter's Phone: 312-385-7671

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 COLFAX AVE.
GRIFFITH, IN. 46319

10. US EPA ID Number: IND016360265

G. State Facility's ID

H. Facility's Phone: 312-768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a. WASTE FLAMMABLE LIQUID N.O.S. FLAMMABLE LIQUID N.O.S. UN 1993	001	TT	05000	1	F003
b.					
c.					
d.					

GENERATOR

J. Additional Descriptions for Materials Listed Above: F003 F005 D001

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, 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
VIRGNIA NYQUIST	Virginia Nyquist	08	04	87

IN 063820

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
[illegible]	[illegible]	08	04	87

Date

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

Date

FACILITY

19. Discrepancy Indication Space

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

Printed/Typed Name	Signature	Month	Day	Year
FOUNTEE	[illegible]	08	04	87

090487

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UHWM 2/LP2

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012509

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.: ILD006390553 1242

2. Page 1 of: 1

Information in the shaded areas is not required by Federal law

3. Generator's Name: RELIANCE UNIVERSAL 1915 INDUSTRIAL AVE.
ZION, IL. 60099

4. Generator's Phone (312) 872-1000

A. State Manifest Document Number: IN 063819

B. State Generator's ID: 0972000004

5. Transporter 1 Company Name: VANDERHYDEN

6. US EPA ID Number: ILD044829490

C. State Transporter's ID: 0318

D. Transporter's Phone: 312-385-7671

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 COLFAX AVE,
GRIFFITH, IN. 46319

10. US EPA ID Number: IND001636265

G. State Facility's ID

H. Facility's Phone: 312-768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a. WASTE FLAMMABLE LIQUID N.O.S. FLAMMABLE LIQUID N.O.S. UN 1993	001	TT	05000	1	F005
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: F003 F005 D001

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, 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
VIRGINIA NYQUIST		05	15	87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date
[illegible]	[signature]	5/17/87

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 in Item 19.

Printed/Typed Name	Signature	Month	Day	Year
F DUNFEE	F Dunfee	05	18	87

IN 063819

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 0 0 6 3 9 0 5 5 3 1 3 2 3

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

3. Generator's Name: RELIANCE UNIVERSAL 1915 INDUSTRIAL AVE. ZION, IL. 60099

4. Generator's Phone (312) 872-1000

A. State Manifest Document Number: IN 063818

B. State Generator's ID: 0972000004

5. Transporter 1 Company Name: VANDERHYDEN

6. US EPA ID Number: I L D 0 4 8 2 9 4 9 0 4

C. State Transporter's ID: 312-385-7671

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 COLFAX AVE, GRIFFITH, IN. 46319

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

G. State Facility's ID:

H. Facility's Phone: 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. WASTE FLAMMABLE LIQUID N.O.S., FLAMMABLE LIQUID N.O.S. UN 1993	001	TT	0500	1	F005
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: F005 F003 D001

K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information

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GENERATOR

Printed/Typed Name: VIRGINIA NYQUIST | Signature | Month Day Year: 09 28 87

IN 063818

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: TIMOTHY CRZENIA | Signature | Date: 09 28 87

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Date

FACIL

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: DUNTEE | Signature | Month Day Year: 09 28 87

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10L5242A 2/86

Division of Land Pollution Control - Manifest
Indiana State Board of Health
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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.: ILD 0 1 6 3 1 9 0 5 1 5 1 3 1 4 0 4

2. Page 1 of: 1

Information in the shaded areas is not required by Federal law

3. Generator's Name: RELIANCE UNIVERSAL 1915 INDUSTRIAL AVE. ZION, IL. 60099

4. Generator's Phone (312) 872-1000

A. State Manifest Document Number: IN 063811

B. State Generator's ID: 097200000403187

5. Transporter 1 Company Name: VANDERHYDEN

6. US EPA ID Number: I L D 0 4 8 2 9 4 9 0 4

C. State Transporter's ID:

D. Transporter's Phone: 312-385-7671

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 COLF AVE. GRIFFITH, IN. 46319

10. US EPA ID Number: I N D 0 1 6 3 6 0 2 6 1 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. WASTE FLAMMABLE LIQUID N.O.S. ~~FLAMMABLE LIQUID N.O.S.~~ UN 1993	0 1	T	0 5 0 0	1	F003
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: F003 F005 D001

K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information

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

Signature: Virginia Nyquist

Month 0 9 Day 2 9 Year 8 7

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: ROMEY COPPAGE

Signature: Romey L Coppage

Month 0 9 Day 2 9 Year 8 7

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name:

Signature:

Month Day Year

FACILITY

19. Discrepancy Indication Space

WT TK 163 M

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

Printed/Typed Name: ED DUNFEE

Signature: E Dunfee

Month 0 9 Day 2 9 Year 8 7

IN 063811

012512

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. ILD006390553 — Manifest Document No.

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

3. Generator's Name
RELIANCE UNIVERSAL 1915 INDUSTRIAL AVE.
ZION, IL. 60099
4. Generator's Phone (312) 872-1000

A. State Manifest Document Number IN 063812
B. State Generator's ID 0972000004

5. Transporter 1 Company Name VANDERHYDEN — 6. US EPA ID Number ILD048294904 — C. State Transporter's ID 0318 — D. Transporter's Phone 312-385-7671

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 COLFAX AVE. GRIFFITH, IN — 10. US EPA ID Number IND016360265 — G. State Facility's ID — H. Facility's Phone 312-768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a. WASTE FLAMMABLE LIQUID FLAMMABLE LIQUID N.O.S. UN 1993	001	TT	050	1	F003
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: F003 F005 D001

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, 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: VIRGINIA NYQUIST — Signature — Month/Day/Year: 10 02 87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials — Printed/Typed Name: Timothy Carroll — Signature — Date: 10 02 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 in Item 19.

Printed/Typed Name: FDUNFEE — Signature — Month/Day/Year: 10 02 87

IN 063812

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. / Manifest Document No.: ILD006398055 / 13123

2. Page 1 of: 1

Information in the shaded areas is not required by Federal law

3. Generator's Name: RELIANCE UNIVERSAL INC. 1915 INDUST.

4. Generator's Phone (312) 872-1000

ZION IL 60099

A. State Manifest Document Number: IN 063813

B. State Generator's ID: U 0972000004

5. Transporter 1 Company Name: VANDERHYDEN

6. US EPA ID Number: ILD 048 29 4 9 0 4

C. State Transporter's ID: 312-385-7671

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 COLFAX AVE.
GRIFFITH IN 46319

10. US EPA ID Number: IN D 016360265

G. State Facility's ID

H. Facility's Phone: 312-768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a. WASTE FLAMMABLE LIQUID N.O.S. FLAMMABLE LIQUID N.O.S. UN 1993	001	TT	05000	1	F005
b.					
c.					
d.					

GENERATOR

J. Additional Descriptions for Materials Listed Above: F005 F003 D001

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, 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
JOE FINNEGAN		10	7	87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials — Date

Printed/Typed Name	Signature	Month	Day	Year
Timothy Creech				

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 DUNLEE	P Dunlee	10	07	87

IN 063813

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. / Manifest Document No.: IL DO 0 63 9 05 53 015640

2. Page 1 of: 1

Information in the shaded areas is not required by Federal law

3. Generator's Name: RELIANCE UNIVERSAL 1915 INDUSTRIAL AVE. ZION, IL.

4. Generator's Phone: (312) 872-1000

A. State Manifest Document Number: IN 063817

B. State Generator's ID: 0972000004

5. Transporter 1 Company Name: VANDERHYDEN

6. US EPA ID Number: IL DO 4 82 9 49 0 4

C. State Transporter's ID: 312-385-7671

7. Transporter 2 Company Name:

8. US EPA ID Number:

D. Transporter's Phone:

E. State Transporter's ID:

F. Transporter's Phone:

9. Designated Facility Name and Site Address: AMERICAN CHEMICAL SERVICES 420 COLFAX AVE. GRIFFITH, IN.

10. US EPA ID Number: IN D 01 6 36 02 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	15. Waste No.
a. WASTE FLAMMABLE LIQUID FLAMMABLE LIQUID N.O.S. UN 1993	001	T T	05 000	1	F003
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: F003 F005 D001

K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, 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: VIRGINIA NYQUIST | Signature | Month Day Year: 10 15 87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: TIMOTHY GRZENIA | Signature | Date: 10/15/87

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 in item 19.

Printed/Typed Name: F DUNFEE | Signature | Month Day Year: 10 15 87

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IN 063817

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. / Manifest Document No.: ILD 006 390 555 / 301 618
2. Page 1 of: 1
Information in the shaded areas is not required by Federal law

3. Generator's Name: RELIANCE UNIVERSAL 1915 INDUSTRIAL AVE. ZION, IL. 60099
A. State Manifest Document Number: IN 063814
4. Generator's Phone: (312) 872-1000
B. State Generator's ID: IL 0972000004
5. Transporter 1 Company Name: MR. FRANK
6. US EPA ID Number: ILD 006 950 816 0
C. State Transporter's ID: 03180079
D. Transporter's Phone: 312-596-3377
7. Transporter 2 Company Name:
8. US EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:
9. Designated Facility Name and Site Address: AMERICAN CHEMICAL SERVICE 420 COLFAX AVE. GRIFFITH, IN.
10. US EPA ID Number: 46319 IND 016 360 265
G. State Facility's ID:
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. WASTE FLAMMABLE LIQUID FLAMMABLE LIQUID N.O.S. UN 1993	001	T T	0500	1	F003
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: F003 F005 D001

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.

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Printed/Typed Name: NYQUIST VIRGINIA NQUIST | Signature | Month Day Year: 10 21 87

IN 063814

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: RICH WHITE | Signature | Date: 10 21 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 in Item 19.
Printed/Typed Name: F DUNFEE | Signature: F Dunfee | Month Day Year: 10 21 87

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. / Manifest Document No.: ILD 006 390 553 01654
2. Page 1 of: 1
Information in the shaded areas is not required by Federal law

3. Generator's Name
RELIANCE UNIVERSAL
1915 INDUSTRIAL DRIVE ZION, IL. 60099

A. State Manifest Document Number: IN 063815

4. Generator's Phone (312) 872-1000

B. State Generator's ID: 098 0972000004

5. Transporter 1 Company Name: VANDERHYDEN
6. US EPA ID Number: ILD 048 294 904
C. State Transporter's ID: 312-385-7671
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 COLFAX AVE,
GRIFFITH, IN. 46319
10. US EPA ID Number: IND 010 366 265
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.
GENERATOR a. WASTE FLAMMABLE LIQUID N.O.S. FLAMMABLE LIQUID N.O.S. UN 1993	001	TT	05000	1	F003
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
F005 F003 D001

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, 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
VIRGINIA NEQUIST		10	26	87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials — Date

Printed/Typed Name	Signature	Month	Day	Year

18. Transporter 2 Acknowledgement of Receipt of Materials — Date

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

19. Discrepancy Indication Space

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

Printed/Typed Name	Signature	Month	Day	Year
P DUNFEE				10 26 87

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IN 063815

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. / Manifest Document No.: ILD 006 390 553 01 690

2. Page 1 of: 1

Information in the shaded areas is not required by Federal law

3. Generator's Name: RELIANCE UNIVERSAL
1915 INDUSTRIAL AVE, ZION, IL. 60099

4. Generator's Phone (312) 872-1000

A. State Manifest Document Number: IN 063834

B. State Generator's ID:

5. Transporter 1 Company Name: VANDERHYDEN

6. US EPA ID Number: ILD 048 294 904

C. State Transporter's ID: 0318

D. Transporter's Phone: 312-385-767

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 CHEMICALS
420 S. COLFAX
GRIFFITH, IN. 46219

10. US EPA ID Number: IND 016 360 265

G. State Facility's ID: 0180800002

H. Facility's Phone: 312-768-3400

11. DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	15. Waste No.
a. WASTE FLAMMABLE LIQUID N.O.S, UN 1993	001	TT	05000	1	F003
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: F003 F005 D001

K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information:

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, 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: VIRGINIA NYQUIST — Signature: [signature] — Month 10 Day 27 Year 87

IN 063834

TRANSPORTER

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

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

FACILITY

19. Discrepancy Indication Space:

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

Printed/Typed Name: T DUMEE — Signature: T Dumee — Month 10 Day 28 Year 87

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: I LD 0 0639055 3 | Manifest Document No.: 01 746
2. Page 1 of: 1 | Information in the shaded areas is not required by Federal law

3. Generator's Name and Mailing Address:
RELIANCE UNIVERSAL
1915 INDUSTRIAL AVE.
ZION, IL. 60099
4. Generator's Phone (312 872-1000

A. State Manifest Document Number: IN 063839
B. State Generator's ID: 0972000004

5. Transporter 1 Company Name: VANDERHYDEN TRANS
6. US EPA ID Number: I LD 04 8 2 9 490 4
C. State Transporter's ID: 0318
D. Transporter's Phone: 312-385-7671

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 CHEMICALS
420 S. COLFAX
GRIFFITH, IN. 46219
10. US EPA ID Number: I N D 0 1 6 360265
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. X WASTE FLAMMABLE LIQUID N.O.S. UN 1993	00 1	T T	0 50 0 0 1		F003
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: F003 F005 D001

K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information:

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, 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
VIRGINIA NYQUIST		1 1	0 4	8 7

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials — Date

Printed/Typed Name	Signature	Month	Day	Year

18. Transporter 2 Acknowledgement of Receipt of Materials — Date

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

19. Discrepancy Indication Space:

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

Printed/Typed Name	Signature	Month	Day	Year
T DUNLEE	T Dunlee	11	05	87

IN 063839

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. / Manifest Document No.: IL D0 0 63 9 05 53 0 1 84 4

2. Page 1 of: 1

Information in the shaded areas is not required by Federal law

3. Generator's Name: RELIANCE UNIVERSAL 1915 INDUSTRIAL AVE.
ZION, IL. 60099

4. Generator's Phone: 312 872-1000

A. State Manifest Document Number: IN 063840

B. State Generator's ID: 0972000004

5. Transporter 1 Company Name: VANDERUYDEN TRANS.

6. US EPA ID Number: IL D 04 8 29 4 90 4

C. State Transporter's ID:

D. Transporter's Phone: 312-385-7671

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 CHEMICALS
410 S. COLFAX
GRIFFITH, IN. 46219

10. US EPA ID Number: IN D0 1 6 36 0 26 5

G. State Facility's ID:

H. Facility's Phone: 312-768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	Total Quantity	Unit Wt/Vol	13. Waste No.
GENERATOR a. WASTE FLAMMABLE LIQUID N.O.S UN 1993	0 0 1	T T	0 5 00 0	1	F003
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: F003 F005 D001

K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information:

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, 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
VIRGINIA NYQUIST		11	13	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
F DUNFEE	F Dunfee	11	16	87

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

1500-210-TS01 1500-204-TS01 1500-201-TS01

T.S.D. DETACH AND RETAIN THIS COPY

IN 063840

012520

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.: I LD00 63 9 05 5 3

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

3. Generator's Name: RELIANCE UNIVERSAL 1915 INDUSTRIAL AVE.
ZION, IL. 60099
4. Generator's Phone (312) 872-1000

A. State Manifest Document Number: IN 063841

B. State Generator's ID: 0 9 7 2 0 0 0 0 0 4

5. Transporter 1 Company Name | 6. US EPA ID Number

C. State Transporter's ID: 0318

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

D. Transporter's Phone: 312-385-7671

E. State Transporter's ID:

F. Transporter's Phone:

9. Designated Facility Name and Site Address: AMERICAN CHEMICALS
420 S. COLFAX
GRIFFITH, IN, 46219

10. US EPA ID Number: IND016360265
~~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.

GENERATOR

a. WASTE FLAMMABLE LIQUID N.O.S. UN 1993 | 0 0 1 | T T | 0 5 000 | 1 | F003

b.

c.

d.

J. Additional Descriptions for Materials Listed Above: F003 F005 D001

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, 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: 11 17

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

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

18. Transporter 2 Acknowledgement of Receipt of Materials

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

FACILITY

19. Discrepancy Indication Space

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

Printed/Typed Name | Signature | Month Day Year: 11 18 87

IN 063841

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

121 T63M T.S.D. DETACH AND RETAIN THIS COPY

012521

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.
ILD006390553	01989		

3. Generator's Name and Mailing Address
RELIANCE UNIVERSAL
1915 INDUSTRIAL
ZION IL 60099

A. State Manifest Document Number: INA 0189115

4. Generator's Phone (312) 872-8800

B. State Generator's ID: 0970000000

5. Transporter 1 Company Name: VANDERHYDEN TRUCKING

6. US EPA ID Number: ILD044824504

C. State Transporter's ID: 0318

D. Transporter's Phone: 312 385 7677

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 CHEMICALS
420 CALIFAX
GRIFFITH IN 46219

10. US EPA ID Number: IND016360265

G. State Facility's ID: 9185900000

H. Facility's Phone: 312 768-3200

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	001	TT	00250	G	D001
b.					
c.					
d.					

GENERATOR

(16) The generator must sign, by hand, and date the certification statement if a mode other than highway is used. The word "highway" may be entered in the space below.

J. Additional Descriptions for Materials Listed Above
F003 F005 1000

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

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

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good 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
JOE FINNEGAN	Joe Finnegan	11	30	87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year
RONEY CRIPE		11	30	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
P DUNFEE		11	30	87

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

122RT63M

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 0189115

012522

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	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 D0 0 63 9 05 5 3	2-19 9	1	

3. Generator's Name and Mailing Address
RELIANCE UNIVERSAL 1915 INDUSTRIAL AVE.
ZION, IL. 60099

A. State Manifest Document Number: INA 0189116

4. Generator's Phone: 312-872-1000

B. State Generator's ID: 097200004

5. Transporter 1 Company Name: VANDERHYDEN TRANS

6. US EPA ID Number: IL D 0 48 29 49 0 4

C. State Transporter's ID: 0318

D. Transporter's Phone: 312-385-7671

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 CHEMICALS
420 S. COLFAX
GRIFFITH, IN. 46119

10. US EPA ID Number: IN D0 1 6 3 6 0 2 65

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	Unit Wt./Vol.	14. Waste No.
a. X WASTE FLAMMABLE LIQUID N.O.S. UN 1993	0 01	TT	0 50 0 0	P	F003
b.					
c.					
d.					

GENERATOR

Codes for Unit Wt./Vol.: P = Pounds, K = Kilograms, C = Cubic yards, M = Cubic meters, L = Liters (liquids only), G = Gallons (liquids only), T = Tons (2,000 lbs.), M = Metric tons (1,000 kg.)

Codes for Type: DM = Wooden drums, DF = Fiberboard/plastic drums, DT = Dump truck, BA = Cylinder, TT = Tank cars, TC = Tank trucks, CM = Metal boxes, CW = Wooden boxes, CF = Fiber or plastic boxes

J. Additional Descriptions for Materials Listed Above
F003 F005 D001

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, 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
VIRGINIA NYQUIST	VIRGINIA NYQUIST	12	21	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 in Item 19.

Printed/Typed Name	Signature	Month	Day	Year
EDUNFEE		12	24	87

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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

12RT63

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 0189116

012523

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. IL 0004 340 553 | Manifest Document No. 02594

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
RELIANCE UNIVERSAL
1915 INDUSTRIAL AVE
ZION IL 60099

4. Generator's Phone ( ) 872-1000

A. State Manifest Document Number INA 0189120

B. State Generator's ID 0973000004

C. State Transporter's ID 03[illegible]

D. Transporter's Phone 3[illegible]

E. State Transporter's ID

5. Transporter 1 Company Name VANGUARD TANK

6. Use EPA ID Number IL D 98 4 490 4

7. Transporter 2 Company Name

8. Use EPA ID Number

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL
6110 - COLFAX
GRIFFITH, IN 46319

10. Use EPA ID Number IND 064 5 69 4

RELIANCE UNIVERSAL

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

12. No. | Waste No.

a. WASTE FLAMMABLE LIQUID NOS UN 1993 FLAMMABLE LIQUID

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: JOE FINNEGAN | Signature | Date: Month 02 Day 01 Year 88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: T. STEVENS | Signature | Date: Month 02 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

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 DUNFEE | Signature | Date: Month 02 Day 01 Year 88

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

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 0189120

1217K7631

0015326

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

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: I.L.D.0.0.6.3.9.0.5.5.3 | Manifest Document No.: 0 2 5 8 3 | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
RELIANCE UNIVERSAL
1915 INDUSTRIAL ZION, IL 60099

A. State Manifest Document Number: INA 0189119

4. Generator's Phone (312) 872-0000

B. State Generator's ID: 0972000004

5. Transporter 1 Company Name: VANDERHAYDEN TRANS

6. Use EPA ID Number: T.L.D.0.4.8.2.9.4.9.0.4

C. State Transporter's ID: 0318

D. Transporter's Phone: 312-385-7671

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 (5) COLFAX
GRIFFITH, IN. 46319

10. Use EPA ID Number: I.N.D.0.0.1.6.3.6.0.2.6.5

G. State Facility's ID: 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. FLAMMABLE LIQUID UN-1993	001	T	500.0	G	F003
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
LADED AREAS IS REQUIRED BY INDIANA STATE LAW

K. Handling Codes for Wastes Listed Above
F003

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, 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
JOE FINNEGAN		02	04	88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
		02	04	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
EDWARDS		02	04	88

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

12 TK T63

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 0189119

0015327

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 D0 06390 5 5 3 | Manifest Document No.: 0 2 61 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
RELIANCE UNIVERSAL 1915 INDUSTRIAL AVE.
ZION, IL. 60099

A. State Manifest Document Number: INA 0189117

4. Generator's Phone (312) 872-1000

B. State Generator's ID: 972000004

5. Transporter 1 Company Name: VANDERHYDEN | 6. US EPA ID Number: IL D 04 8 2 94 90 4 | C. State Transporter's ID: 0318 | D. Transporter's Phone: 312-385-7671

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 CHEMICALS
420 S. COLFAX
GRIFFITH, IN. 462119

10. US EPA ID Number: IN D0 1 63 60 2 65 | 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. X WASTE FLAMMABLE LIQUID N.O.S. ~~UN 1993~~	0 0 1	TT	0 5 0 0 0	1	F003 ~~F005~~
b. FLAMMABLE LIQUID UN 1993					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
F003 F005 D001

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

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GENERATOR

Printed/Typed Name: VIRGINIA NYQUIST | Signature | Date: Month 0 9 | Day 0 8 | Year 8 8

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: R. M. C. Cooper | Signature | Date: Month 0 9 | Day 0 8 | Year 8 8

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

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: F DUNFEE | Signature: F Dunfee | Month 0 9 | Day 0 9 | Year 8 8

INA 0189117

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

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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

12-IRT63M

0015329

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. IL D0 0 63 9 05 53 | Manifest Document No. 02631
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
RELIANCE UNIVERSAL
1915 INDUSTRIAL AVE. ZION, IL. 60099
4. Generator's Phone (312) 872-1000

A. State Manifest Document Number INA 0189118
B. State Generator's ID 08 0972000004
C. State Transporter's ID 0318
D. Transporter's Phone 312-385-7671
E. State Transporter's ID
F. Transporter's Phone

5. Transporter 1 Company Name VANDERHYDEN
6. Use EPA ID Number IL D 0 4 8 2 9 4 9 0 4
7. Transporter 2 Company Name
8. Use EPA ID Number

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL
410 S. COLFAX
GRIFFITH, IN. 46219
10. Use EPA ID Number IN D 0 4 8 2 4 9 0 4

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	001	TT	0 4 50 0	1	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above
F003
F005

15. Special Handling Instructions and Additional Information

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

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

Printed/Typed Name	Signature	Month	Day	Year
VIRGINIA NYQUIST		02	10	88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
TIMOTHY GREEN		02	10	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
T DUNFEE		02	10	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 0189118

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State Form 11865

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

12TK763

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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. IL D0 06 39 0 5 5 3	Manifest Document No. 0 2 6 7 9	2. Page 1 of 1	Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
RELIANCE UNIVERSAL
1915 INDUSTRIAL AVE., ZION, IL. 60099

A. State Manifest Document Number: INA 0214099

4. Generator's Phone (312) 872-1000

B. State Generator's ID: 097200004

5. Transporter 1 Company Name: VANDERHYDEN

6. Use EPA ID Number: T L D 0 4 8 2 9 4 9 . 0 4

C. State Transporter's ID:

D. Transporter's Phone: 0318

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
410 S. COLFAX
GRIFFITH, IN. 46219

10. Use EPA ID Number: I N D 0 16360265

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 01	T	0 50 0 0	1	F003 D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above
F003
F005

15. Special Handling Instructions and Additional Information

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Printed/Typed Name	Signature	Month	Day	Year
VIRGINIA NYQUIST		0 2	1 7	8 8

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
TIMOTHY GRIENIH		0 2	1 7	8 8

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

19. Discrepancy Indication Space

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

Printed/Typed Name	Signature	Month	Day	Year
GR MURPHY		0 2	1 7	8 8

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

INA 0214099

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

12-2-87

0015330

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. IND 006390553 — Manifest Document No. 02723

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
RELIANCE UNIVERSAL
1915 INDUSTRIAL ZION, IL. 60099

A. State Manifest Document Number: INA 0214100

4. Generator's Phone (312) 872-1000

B. State Generator's ID: 0972000004

5. Transporter 1 Company Name: VANDERHYDEN TRANS.

6. Use EPA ID Number: ILD 049 821 990

C. State Transporter's ID: 0318

D. Transporter's Phone: 312-385-7671

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, IN. 462119

10. Use EPA ID Number: IND 010 636 265

G. State Facility's ID: 9180290002

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	001	T	5000	G	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above
F003 F005 D001

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, 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: V.N. — Signature: Virginia Nyquist — Month 02 Day 22 Year 88

GENERATOR

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: VIRGINIA NYQUIST — Signature: Virginia Nyquist — Month 02 Day 22 Year 88

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

TRANSPORTER

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: GK MURPHY — Signature — Month 02 Day 22 Year 88

FACILITY

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

122K T63

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 0214100

0015331

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 6 3 9 0 5 5 3 — Manifest Document No. 0 2 7 7 2 — 2. Page 1 of 1 — Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
RELIANCE UNIVERSAL 1915 INDUSTRIAL AVE.
ZION, IL. 60099

A. State Manifest Document Number INA 0214098

4. Generator's Phone (312) 872-1000

B. State Generator's ID 0972000004

5. Transporter 1 Company Name VANDERHYDEN — 6. US EPA ID Number I L D 0 4 8 2 9 4 9 0 4 — C. State Transporter's ID 0318 — D. Transporter's Phone 312-385-7671

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.
420 S. COLFAX
GRIFFITH, IN. 462119

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.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. X WASTE FLAMMABLE LIQUID N.O.S., FLAMMABLE LIQUID NA 1993	0 01	T T	0 0 0 5 0	1	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above — K. Handling Codes for Wastes Listed Above
F003 F005

15. Special Handling Instructions and Additional Information

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Printed/Typed Name	Signature	Month	Day	Year
VIRGINIA NYQUIST		0 2	25	88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
ROMEY E COPPAGE				

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
R MOODY		0 2	26	8 8

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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

122TC T62

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 0214098

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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 LD 00 6 3 9 055 3 | Manifest Document No. 03 3 05 | 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
RELIANCE UNIVERSAL
1915 INDUSTRIAL ZION, IL. 60099

A. State Manifest Document Number: INA 0214077

4. Generator's Phone (312 872-1000

B. State Generator's ID: 0972000009

5. Transporter 1 Company Name: VANDERHYDEN | 6. Use EPA ID Number: I L D 04 8 29 4 90 4

C. State Transporter's ID: 0318

D. Transporter's Phone: 312-385-7671

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, IN. 462119

10. Use EPA ID Number: I N D0 16 3 60 2 65

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 N.O.S, FLAMMABLE LIQUID UN 1993	0 01	T T	05 0 0 0	G	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: F003 F005 D001

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
VIRGINIA NYQUIST	Virginia Nyquist	03	09	88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year
KOMEY E COPPAGE		03	09	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
FDUNFEE	FDunfee	03	09	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 0214077

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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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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·LD·0·06·3·9·0·55·3 — Manifest Document No. 05·3·63
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
RELIANCE UNIVERSAL
1915 INDUSTRIAL AVE., ZION, IL. 60099

A. State Manifest Document Number: INA 0214078

4. Generator's Phone (312 872-1000

B. State Generator's ID: 0972000004

5. Transporter 1 Company Name: VANDERHYDEN
6. Use EPA ID Number: I·LD·0·48·2·94·90·4
C. State Transporter's ID: 0318
D. Transporter's Phone:

7. Transporter 2 Company Name
8. Use EPA ID Number
E. State Transporter's ID
F. Transporter's Phone: 312-385-7671

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL
420 S. COLFAX
GRIFFITH, IN. 462119
10. Use EPA ID Number: I·N·D·0·1·6·36·026·5
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	0·01	T	05·0·00	G	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
ADDED AREAS IS REQUIRED BY INDIANA STATE LAW.

K. Handling Codes for Wastes Listed Above
F003 F005 D001

15. Special Handling Instructions and Additional Information

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GENERATOR — Printed/Typed Name: VIRGINIA NYQUIST — Signature — Date: Month 03 Day 15 Year 88

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials — Printed/Typed Name — Signature — Date
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: J DUNFEE — Signature — Date: 03/15/88

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

INA 0214078

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125 T63

0015334

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·LD·0·0·6·3·9·0·5·5·3 — Manifest Document No. 0·3·4·4·1
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
RELIANCE UNIVERSAL
1915 INDUSTRIAL AVE, ZION, IL. 60099
4. Generator's Phone (312) 872-1000

A. State Manifest Document Number INA 0214079
B. State Generator's ID 0972000004
C. State Transporter's ID 0318
D. Transporter's Phone 312-385-7671
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: VANDERHYDEN
6. US EPA ID Number: I·L·D·0·4·8·2·9·4·9·0·4
7. Transporter 2 Company Name:
8. US EPA ID Number:

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL
420 S. COLFAX
GRIFFITH, IN. 46219
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. WASTE FLAMMABLE LIQUID FLAMMABLE LIQUID UN 1993	005	TT	050.00	G	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above: F003 F005 D001

15. Special Handling Instructions and Additional Information

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GENERATOR — Printed/Typed Name: VIRGINIA NYQUIST — Signature: Virginia Nyquist — Date: Month 03 Day 22 Year 88

TRANSPORTER
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

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: PDUNFEE — Signature: PDunfee — Date: Month 03 Day 22 Year 88

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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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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 0214079

0015335

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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Form Approved OMB No. 2000 0404 Expires 7 31 86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. | Manifest Document No.: ILD 063 905 530 | 36 45

2. Page 1 of: 1

Information in the shaded areas is not required by Federal law

3. Generator's Name: RELIANCE UNIVERSAL
4. Generator's Phone ( ): ZION, IL. 60099
1915 INDUSTRIAL AVE.

A. State Manifest Document Number: IN 063816

B. State Generator's ID: 0972000004

5. Transporter 1 Company Name: VANDERHYDEN
6. US EPA ID Number: ILD 048 129 490 4
C. State Transporter's ID: 0318
D. Transporter's Phone: 312-385-7671

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.
420 S. COLFAX
GRIFFITH, IN. 462119
10. US EPA ID Number: IND 001 636 025
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.
GENERATOR a. WASTE FLAMMABLE LIQUID N.O.S. FLAMMABLE LIQUID UN 1993	001	TT	05000	1	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above: F003 F005

15. Special Handling Instructions and Additional Information

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

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
VIRGINIA NYQUIST		04	12	86

IN 063816

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date: Month	Day	Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date: Month	Day	Year

FACILITY

19. Discrepancy Indication Space

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

Printed/Typed Name	Signature	Month	Day	Year
T DUNFEE	T Dunfee	04	13	86

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

12/IRC T63 4/13 MJ

T.S.D. DETACH AND RETAIN THIS COPY

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.	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.
C.E.G.			

3. Generator's Name and Mailing Address
KENNER Y CO.
160 CHICAGO ST
CARY IL 60013

4. Generator's Phone (312) 639 4900

A. State Manifest Document Number INA 0160018

B. State Generator's ID

5. Transporter 1 Company Name	6. Use EPA ID Number	C. State Transporter's ID
STRAND TRUCKING CO.	ILD000.6.4.6.8.10	D. Transporter's Phone 815-385-8440
7. Transporter 2 Company Name	**8. Use EPA ID Number**	**E. State Transporter's ID**
		F. Transporter's Phone

9. Designated Facility Name and Site Address	10. Use EPA ID Number	G. State Facility's ID
AMERICAN CHEMICAL SERVICE 420 S. COLFAX AVE GRIFFITH, IN 46319-0190	IND.0.1.6.3.6.0.2.6.5	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. FLAMMABLE LIQUID N.O.S. FLAMMABLE UN-1993	006	DM	00330	1	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above	K. Handling Codes for Wastes Listed Above
WASTE SOLVENTS	1. GA2830

15. Special Handling Instructions and Additional Information

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

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good 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
ROBERT A. KENNER		11	23	87

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
STEPHEN J. MASSAT		11	24	87

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

19. Discrepancy Indication Space

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

Printed/Typed Name	Signature	Month	Day	Year
WHITAKER A		11	29	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 0160018

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865 6-DATR-750 11/30/87

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

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0370744

991282

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number ILD067449122

Replogle Globes Inc. (Company Name) | 1901 N. Narragansett Ave. (Address)

0316000467 (Generator Number)

Chicago (City) | Illinois (State) | 60639 (Zip)

WASTE HAULER(S)

Strand Trucking % American Chemical | POBox 190 Griffith,Ind. (Hauler Address) | S.W.H. Registration Number 00241 001

ILT000646810

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

Griffith (City) | Indiana (State) | 46319 (Zip) | IND. 016 360265

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: 12 DRUMS | HAZARD CLASS: Flammable Liquid | 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. F005 | QUANTITY OF WASTE DELIVERED: | 1 GALLONS (Circle One) 2 CU. YDS. 600

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 1/21/81 | Peter Miles (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) Donald Thompson (Authorized Signature) DATE: 1/21/81

(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:

Michael C. Bilyeu (Authorized Signature) DATE: 1/21/81

COMMENTS OR SPECIAL INSTRUCTIONS: TRAILER SPOTTED 1/21/81 UNLOADED 1/22/81 PUMPED TO 125E 1/24/81 T-63 Jim Mundt

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

001904

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

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. Small Quantity Exempt. | 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
RESSURECTION HOSPITAL
7435 W. Talcott Chicago, IL. 60631

A. State Manifest Document Number: INA 0223386

4. Generator's Phone (312) 774-8000 ATTN: GARY CURTAIN

B. State Generator's ID

5. Transporter 1 Company Name: PRECISION ENERGY SYSTEMS, INC.

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

C. State Transporter's ID: 1505

D. Transporter's Phone: 328-916-1661

7. Transporter 2 Company Name: PES

8. Use EPA ID Number: ~~I L D 9 8 2 2 0 8 2 8 4~~

E. State Transporter's ID: ~~1505~~

F. Transporter's Phone: ~~312 446 1661~~

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICES
420 S. Colfax
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: 9 1 8 0 8 9 0 0 0 2

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 DRM-A N.O.S. CRM-A NA1693 F002	006	DE	0 0 1 0 0	P	D 0 0 2
b.					
c.					
d.					

(15) The generator must read, sign, and date the certification statement in the space below.

J. Additional Descriptions for Materials Listed Above
TRICHLOROFLUORO METHANE

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

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

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good 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 CURTIN — Signature: Gary Curtin mw — Month 07 Day 05 Year 88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: MIKE WILK — Signature: Mike Wilk — Month 07 Day 05 Year 88

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

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: ALVIN WILKOF — Signature: Alvin Wilkof — Month 7 Day 5 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 0223386

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

2,047 TSD 7/5

00153324

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

0312148
1 7

Authorization Number 998585
8 13

REVCOR INC. 251 EDWARDS ST.
(Company Name) Address

CARPENTERSVILLE ILLINOIS 60110
City State Zip

089020000 7 G
14 Generator Number 24

WASTE HAULER(S)

AMERICAN CHEMICAL 420 S. COLFAX AVE S.W.H. Registration Number 0 0 2 4 0 0 3
Hauler Name Hauler Address 25 31

Hauler Name Hauler Address S.W.H. Registration Number 32 38

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE 420 S. COLFAX AVE. 9180890 2
(Facility Name) Address 39 Site Number 46

GRIFFITH INDIANA 46319
City State Zip

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ORGANIC SOLVENT WASTE PHASE: LIQUID
(Liquid, Gascous, 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 8550 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR (GAL.) GAL. QUANTITY OF WASTE DELIVERED: 00950 47 52

(1 GALLONS) (Circle One)
2 CU. YDS. 53

METHOD OF SHIPMENT (Circle One) (DRUMS) 19 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.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 2-16-1982 Allen E. Hafford
(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] DATE: 02 16 82
(Authorized Signature) 54

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

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] DATE 2 16 82
(Authorized Signature) 60

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-88

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

On dock 2/16/82 To 210 F.T. - 58 GKM 6-30-82

SITE COPY - PART 3

003741

STATE OF ILLINOIS

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

0607 1

Authorization Number 978585

COMPLETED BY WASTE GENERATOR

REVCOR INC. (Company Name) | 251 EDWARDS ST. (Address) | (312) 428-4411 (Phone Number) | 0890200009 (Generator Number)

CARPENTERSVILLE (City) | ILL. (State) | 60010 (Zip) | ILD005455183 (EPA Number)

WASTE HAULER(S)

LANDGREB (Hauler Name) | 130 STATE RD. (Hauler Address) | VALPARAISO INDIANA 46383 | S.W.H. Registration Number ICC2980

3127210095 (Phone Number) | INDO09842824 (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. AVE. (Address) | 91808902 (Site Number)

GRIFFITH (City) | INDIANA (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: ORGANIC 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
ORM-E		NA9189	F001

WEIGHT FOR D.O.T. USE: 1067 (LBS) TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 000110 (1 GALLONS / 2 CU. YDS. (Circle One)) 1

METHOD OF SHIPMENT (Circle One): (DRUMS) 2 (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 — Allen E. Griffith (Authorized Signature) — DATE: 5/12/82

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) Fred Boelk (2) (Authorized Signature) — DATE: 5/12/82

(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 Jasa Pres (Authorized Signature) — DATE: 5/13/82

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 5.13.82 GRM

To IAK 7-63
GRM 2.9.82

003742

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0312150
Authorization Number

TO BE COMPLETED BY WASTE GENERATOR

REVCOR INC. (Company Name) 251 EDWARDS ST. (Address)
CARPENTERSVILLE (City) ILL. (State) 60110 (Zip)
ILD005455183 (Generator Number)

WASTE HAULER(S)

LANDGREB (Hauler Name) 130 STATE RD (Hauler Address) VALPARAISO INDIANA, 46383
S.W.H. Registration Number ICC2980

(Hauler Name) (Hauler Address)
S.W.H. Registration Number IND084282

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) 420 S. COLFAX AVE (Address)
GRIFFITH (City) INDIANA (State) 46319 (Zip)
9180890 2 (Site Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ORGANIC 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: 55 GAL. DRUMS
HAZARD CLASS: F001
WEIGHT FOR D.O.T. USE: 1625 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL
QUANTITY OF WASTE DELIVERED: 140 Gals.
(1) GALLONS (Circle One) 2. CU. YDS.

METHOD OF SHIPMENT (Circle One) 4 (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.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION
DATE: 2/10/83
(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) Fred Kuehl (Authorized Signature) DATE: 2/10/83
(2) (Authorized Signature) DATE:

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:
(Authorized Signature) DATE: 2/11/83

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

On dock 2-11-83 To 120K T-636 PM 6-3-83

SITE COPY - PART 3

C05343

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

TO BE COMPLETED BY WASTE GENERATOR

0607158
Authorization Number

REVCOR, INC. | 251 EDWARDS ST. | (317) 423-4411 | 0890200009
(Company Name) | Address | Phone Number | Generator Number

CARPENTERSVILLE | ILLINOIS | 60110 | ILD005455183
City | State | Zip | EPA Number

WASTE HAULER(S)

LANDGREB | 130 STATE RD. - VALPARAISO INDIANA | S.W.H. Registration Number ICC2980
Hauler Name | Hauler Address

3127721095 | IND009842824
Phone Number | EPA Number

Hauler Name | Hauler Address | S.W.H. Registration Number 1246

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL | 420 S. COLFAX AVE | 9180890 2
(Facility Name) | Address | Site Number

GRIFFITH | INDIANA | 46319 | 3127683400 | IND 146360265
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: 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:	HAZARD CLASS:	UN or NA Number	EPA Hw Number
TRICHLOROETHYLENE	NONE	UN1710	F001

WEIGHT FOR D.O.T. USE: 1,344 (LBS) TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 000135 (1 GALLONS (Circle One) 2 CU. YDS.)

METHOD OF SHIPMENT (Circle One): (DRUMS 3) 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: Ellen E. Mafford (Authorized Signature) | DATE: 6-09-83

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 L. Koelke (3) (Authorized Signature) | DATE 6/9/83

(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 6/13/83

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 120E T-63 GAL 8.5.83

CJ5342

IL 532-610
PC 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

0607159

Authorization Number 1074

TO BE COMPLETED BY WASTE GENERATOR

REVCOR, INC. (Company Name) 251 EDWARDS ST. (Address) (312)428-4411 (Phone Number) 0890200009 (Generator Number)

CARPENTERSVILLE (City) ILLINOIS (State) 60110 (Zip) ILD005455183 (EPA Number)

WASTE HAULER(S)

LANDGRED (Hauler Name) 130 STATE RD. (Hauler Address) VALPARAISO INDIANA

S.W.H. Registration Number

(312)721-0095 (Phone Number) IND098842824 (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 S. COLFAX AVE. (Address) 91808902 (Site Number)

GRIFFITH (City) INDIANA (State) 46319 (Zip) 3127683400 (Phone Number) IND163602652 (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: HAZARD CLASS:

UN or NA Number: UN1710 EPA HW Number: F001

WEIGHT FOR D.O.T. USE 445 (LBS) TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 000445 (1 GALLONS) 2 CU. YDS. (Circle One)

METHOD OF SHIPMENT (Circle One) (DRUMS) Number 1 TANK TRUCK OPEN TRUCK OTHER (Specify) CLOSED TRAILER 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 Allen E. Kuffel (Authorized Signature) DATE: 6-21-84

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Fred Kuehn (Authorized Signature) DATE: 6/27/84

(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.

Mark Bruce (Authorized Signature) DATE: 6/29/84

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

007256

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. ILD005455183 — Manifest Document No. 1125481

2. Page 1 of 6 — Information in the shaded areas is not required by Federal law, but is required by Illinois law.

3. Generator's Name and Mailing Address
REVCOR, INC.
251 EDWARDS, ST. CARPENTERSVILLE, ILL. 60110
4. Generator's Phone (312) 428- 4411

A. Illinois Manifest Document Number: IL 1125481

B. Illinois Generator's ID: 0 8 9 0 2 0 5 0 0 9

5. Transporter 1 Company Name: LANDGREB
6. US EPA ID Number: IND009842824
C. Illinois Tranporter's ID: 1 8 7 5
D. (312) 721-0095 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 CO.
420 S. COLFAX AVE.
GRIFFITH INDIANA 46319
10. US EPA ID Number: IND016360265
G. Illinois Facility's ID: 9 1 8 0 8 9 0 0 0 0 2
H. Facility's Phone: (312) 768-2400

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. TRICHLOROETHYLENE ORGANIC SOLVENT	X	2	DM	00880	1 GAL	EPA HW Number: F001; Authorization Number: UN1710
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: ORGANIC SOLVENT FROM CLEANING OUR DEGREASING TANK TO BE RECYLED.

K. Handling Codes for Wastes Listed Above: CLOSED TRUCK HIGHWAY

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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: GLEN GIFFORD — Signature — Date: Month 4 Day 18 Year 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Fred L Koselke — Signature — Date: Month 4 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: FRANK PRICE — Signature — Date: Month 4 Day 19 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

118RT-63

UJ8071

STATE OF ILLINOIS ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

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

IL532-0610 PC 62/81

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 D005455183 Manifest Document No. 1125482

2. Page 1 of 6

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
REVCOR, INC.
251 EDWARDS ST. CARPENTERSVILLE
4. Generator's Phone (312) 428-4411 ILL. 60110

A. Illinois Manifest Document Number IL 1125482

B. Illinois Generator's ID 0890205009

5. Transporter 1 Company Name LANDGREB

6. US EPA ID Number IND009842824

C. Illinois Tranporter's ID

D. (312) 721-0095 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 CO.
420 S. COLFAX AVE.
GRIFFITH INDIANA 46319

10. US EPA ID Number IND016360265

G. Illinois Facility's ID 9180890000 12

H. Facility's Phone 312-768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a. TRICHLOROETHYLENE ORGANIC SOLVENT	✓	3	DM	01372	LBS	EPA HW Number F001 / Authorization Number UNI7110
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 ORGANIC SOLVENT TO BE RECYLED - FROM CLEANING OUR DEGREASING TANK.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
Shipped by enclosed Truck —

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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)
GLEN GIFFORD	Glen Gifford	7 23 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)
Fred	Fred R Teuber	7 23 85

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)

FACILITY

19. Discrepancy Indication Space

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

Printed/Typed Name	Signature	Date (Month Day Year)
EDWIN FEE	Edwin Fee	7 24 85

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

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/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

FACILITY COPY - PART 3

Hold

UJ8070

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. IL D005455183 | Manifest Document No. IL 1125483 | 2. Page 1 of 6 | Information in the shaded areas is not required by Federal law.

GENERATOR

3. Generator's Name and Mailing Address
REVCOR, INC. 60110
251 EDWARDS ST. CARPENTERSVILE, ILL.
4. Generator's Phone (312) 428-4411

A. State Manifest Document Number: IL 1125483
B. State Generator's ID: 0890205009
C. State Transporter's ID: 1875
D. Transporter's Phone: (312) 721-0095
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID: IND016360265
H. Facility's Phone: (312) 768-3400

5. Transporter 1 Company Name: LANDGREB
6. US EPA ID Number: IND098423824
7. Transporter 2 Company Name:
8. US EPA ID Number:
9. Designated Facility Name and Site Address: AMERICAN CHEMICAL CO. 420 SO. COLFAX 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.
a. TRICHLOROETHYLENE ORGANIC SOLVENT	✓	5	DM	2,495 LGS	LBS	F001
b.						
c.						
d.						

J. Additional Descriptions for Materials Listed Above: SOLVENT FROM CLEANING DEGREASING TANK TO BE RECYLED - DRUMS ARE NOT FILLED

K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information
Shipped by Contract Trucker - Authorization NUMBER - UN1710

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, 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: GLEN GIFFORD | Signature: Glen Gifford | Month 3 Day 19 Year 86

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Ind-Trad K Tucker | Signature: Ind Trad Tucker | Month 3 Day 19 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: FRANK PRICE | Signature: Frank Price | Month 3 Day 20 Year 86

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

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

117K T63

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TSDF COPY

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. ILD005455183 | Manifest Document No. 1125484 | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law.

GENERATOR

3. Generator's Name and Mailing Address
REVCOR INC.
251 EDWARDS AVE. CARPENTERSVILLE IL. 60110

4. Generator's Phone (312) 428-4411

A. State Manifest Document Number: IL 1125484

B. State Generator's ID: 0890205009

5. Transporter 1 Company Name: LANDGREB

6. US EPA ID Number: IND009842824

C. State Transporter's ID: 1875

D. Transporter's Phone: 312-721-0095

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.
420 SO. COLFAX AVE
GRIFFITH, IND. 46319

10. US EPA ID Number: IND016360265

G. State Facility's ID: IND016360265

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	Waste No.
a. TRICHLOROETHYLENE ORGANIC SOLVENT UN1710	✓	2	DM	1180	LBS	F001
b.						
c.						
d.						

J. Additional Descriptions for Materials Listed Above
SOLVENT FROM CLEANING DEGREASING TANK TO BE RECYCLED

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
SHIPPED BY ENCLOSED TRUCK

AUTHORIZATION NUMBER UN1710

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

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

Printed/Typed Name: JOHN J. LONGHINI | Signature: John J. Longhini | Month 4 | Day 2 | Year 87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: (MT) LANDGREB MTD TRANSPORT | Signature: Michael S. Mullen | Month 4 | Day 2 | 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 in Item 19.

Printed/Typed Name: Harold F Schmidt | Signature | Month | Day | Year

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

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

2-1A TG3 B

TSDF COPY

MRIC

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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

21. Generator's US EPA ID No.: ILD005455183

Manifest Document No.: IL 1125485

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
REVCOR INC.
251 EDWARDS AVE. CARPENTERSVILLE, IL. 60110

4. Generator's Phone (312) 428-4411

A. State Manifest Document Number: IL 1125485

B. State Generator's ID: 089020 5009

5. Transporter 1 Company Name: LANDGREBE

6. US EPA ID Number: IND 009842824

C. State Transporter's ID: 1875

D. Transporter's Phone: 312-721-0095

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.
420 S. COLFAX AVE.
GRIFFITH, IND. 46319

10. US EPA ID Number: IND 016360265

G. State Facility's ID: IND 016360265

H. Facility's Phone: (312) 768-3400

	11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a.	WASTE TRICHLOROETHYLENE ORGANIC SOLVENT UN 1710	J	12	DM	6458	LBS	F001
b.							
c.							
d.							

J. Additional Descriptions for Materials Listed Above
SOLVENT FROM VAPOR DEGREASER

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
SHIPPED BY ENCLOSED TRUCK
AUTHORIZATION NUMBER UN 1710

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

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

Printed/Typed Name	Signature	Month	Day	Year
JOHN J. LONGHINI	John J. Longhini	12	9	87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
MITCH MULLINS LANDGROBE NITA TRANSPORT	Mitch G. Mullins	12	9	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
JAMES MURPHY	James Murphy	12	10	87

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

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

1 - 20YR - T - 50 12/4/87 540 LBS

8 - 20YR - T - 50 12/8/87 4320 LBS

3 - 12DF - T - 63 1/21/88 1598 LBS TSDF COPY

012540

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

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: I.L.D.0.0.5.4.5.5.1.8.3
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
REVCOR INC
251 EDWARDS AVE
CARPENTERSVILLE IL. 60110

A. State Manifest Document Number: INA 0202787

4. Generator's Phone (312) 428-4411

B. State Generator's ID: 089020 5009

5. Transporter 1 Company Name: LANDGREBE MTR TRANSPORT
6. Use EPA ID Number: IND.0.0.9.8.4.2.8.2.4
C. State Transporter's ID: 1875
D. Transporter's Phone: 312-721-0095

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 CO.
420 S. COLFAX AVE
GRIFFITH, IND. 46319
10. Use EPA ID Number: IND.0.1.6.3.6.0.2.6.5
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.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. FLAMMABLE LIQUID NOS FLAMMABLE UN 1993	7	DM	385	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	Date Month	Day	Year
JOHN J. LONGHINI	John J Longhini	11	17	88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year
JAMES D. MYERS	James D Myers	11	17	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
STEPHEN L KUNICK	Stephen L Kunick	11	18	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 0202787

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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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.: ILD005455183 | 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
Revcor Inc.
251 Edwards Ave.
Carpentersville, Il. 60110

4. Generator's Phone (312) 428-4411

A. State Manifest Document Number: INA 0202784
B. State Generator's ID: 0890205009
C. State Transporter's ID: 1875
D. Transporter's Phone: 312-721-0095
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: Landgrebe Mtr. Transport
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 Co.
420 S. Colfax Ave
Griffith, Ind. 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 Nos Flammable UN 1993	4	DM	220	G	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above
G = Gallons

15. Special Handling Instructions and Additional Information

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

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

GENERATOR

Printed/Typed Name	Signature	Month	Day	Year
John J. Longhini	John J. Longhini	2	16	88

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
M Mullen Landgrebe Mtr Trans		02	16	88

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

TRANSPORTER

19. Discrepancy Indication Space

FACILITY

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

Printed/Typed Name	Signature	Month	Day	Year
HARROLD F SCHMIDT		02	17	88

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

INA 0202784

EPA Form 8700-22 (Rev. 9-86) DISTRIBUTION:
Previous editions are obsolete.
State Form 11865 4-20/R T-50 2/12/88

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

001532

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.0.0.5.4.5.5.1.8.3	0 0 0 0 1		

GENERATOR

3. Generator's Name and Mailing Address
REVCOR INC
251 EDWARDS AVE
CARPENTERSVILLE ILL 60110

A. State Manifest Document Number: INA 0202789

4. Generator's Phone (312) 428-4411

B. State Generator's ID: 089020500 9

TRANSPORTER

5. Transporter 1 Company Name: LANDGREBE MTR TRANSPORT

6. US EPA ID Number: I.N.Q.0.0.9.8.4.2.8.2.4

C. State Transporter's ID: 1875

D. Transporter's Phone: 312-721-0095

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

FACILITY

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE CO.
420 S. COLFAX 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: 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.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. TRICHLOROETHYLENE, SOLVENT UN 1710	2.	DM	7.1.	GAL	F001
b. FLAMMABLE LIQUID NOS FLAMMABLE UN 1993	1.	DM	.55.	GAL	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	Signature	Month	Day	Year
JOHN J. LONGHINI	John J. Longhini	05	17	89

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
STEVEN P. WYPYSZCZAK	Steven P. Wypyszczak	05	17	89

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

19. Discrepancy Indication Space

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

Printed/Typed Name	Signature	Month	Day	Year
WHITAKOR A		05	18	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 0202789

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

IB-204TCTSD 5/22/89 2N-15TCT63 5/89

0016790

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

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: I.L.D.0.0.5.4.5.5.1.8.3 | Manifest Document No.: 0.0.0.0.2 | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
REVCOR INC
251 EDWARDS AVE
CARPENTERSVILLE ILL 60110

A. State Manifest Document Number: INA 0202790

4. Generator's Phone (312) 428-4411

B. State Generator's ID: 0890205009

5. Transporter 1 Company Name: LANDGREBE MTR TRANSPORT | 6. Use EPA ID Number: I.N.D.0.0.9.8.4.2.8.2.4 | C. State Transporter's ID: 78-5 | D. Transporter's Phone: 317-772-0095

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

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
420 S. COLFAX AVE
GRIFFITH IND. 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. TRICHLOROETHYLENE SOLVENT UN 1710	2	DM	80	GAL	F001
b. FLAMMABLE LIQUID NOS FLAMMABLE UN 1993	5	DM	2.75	GAL	D001
c.					
d.					

J. Additional Descriptions for Materials Listed Above
LOADED 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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GENERATOR

Printed/Typed Name: JOHN J LONGHINI | Signature: John J Longhini | Date: Month 10 Day 26 Year 89

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: STEVEN WYPYSZCZAK | Signature: Steven P Wypyszczak | Date: Month 10 Day 26 Year 89

18. Transporter 2 Acknowledgement of Receipt of Materials

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

FACILITY

19. Discrepancy Indication Space
A
2-1 BRT 63 12/6
B
5-2 4 TCE 10/27

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

Printed/Typed Name: STEVE KUKUICK | Signature | Date: Month 11 Day 3 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 0202790

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

0016791

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

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas not required by Federal law. If items D, F, H and I are required State law.
M I D 2 7 0 0 1 0 3 8 2	1 5 0 4 8		

GENERATOR

3. Generator's Name and Mailing Address
Rexair Inc
230 W Seventh St, Cadillac MI 49601
4. Generator's Phone (616) 775-3413

A. State Manifest Document Number: INA 0316048
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) 235-150

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 5 3 6 0 3 6 5
G. State Facility's ID:
H. Facility's Phone: (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. RQ Waste Trichloroethylene (F001) ORM-A UN1710	2	D M	100	G	F 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
All the recovered Trichloroethylene from the reclaim unit may not have originated from the Rexair Inc., facility.

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

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Ye
Kenneth F Wagner				

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Ye

FACILITY

19 Discrepancy Indication Space

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

Printed/Typed Name	Signature	Month	Day
A Whitaker			

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 ATCT63 9/10

0016788

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

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: M.I.D.2.7.0.0.1.0.3.8.2 | Manifest Document No.: 5.5.8.7.2
2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Rexair Inc
230 W Seventh St, Cadillac MI 49601
4. Generator's Phone (616) 775-3413

A. State Manifest Document Number: INA 0355872
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.0.1.5.3.6.0.3.6.5
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 Trichloroethylene (F001) ORM-A UN1710	3	D.M	165	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
All the recovered Trichloroethylene from the reclaim unit may not have originated from the Rexair Inc., facility.

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, 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: Phillip R Beeney — Signature: [signature] — Date: Month 10 Day 30 Year 89

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Kenneth F Wisma — 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 .

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 10 Day 31 Year 89

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

COPY 5. TSD COPY

1BXC63126

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.

INA0355872

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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.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.
M I D 2 7 0 0 1 0 3 8 2	1 7 9 8 4		

3. Generator's Name and Mailing Address
Rexair Inc
230 W Seventh St, Cadillac MI 49601
4. Generator's Phone (616) 775-3413

A. State Manifest Document Number: INA 0437984
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. RQ Waste Trichloroethylene ORM-A UN1710 (F001)	1	DM	55	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
All the recovered Trichloroethylene from the reclaim unit may not have originated from the Rexair Inc., facility.

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, 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)
John Moon	John Moon	08 30 90

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)
David Tice	[illegible]	08 30 90

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)
John Moon	John Moon	08 30 90

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	[illegible]	8 31 90

2 12 TCSD Yu

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

COPY 5. TSD COPY

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0437984

0018270

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.: H·I·D·2·7·0·0·1·0·3·8·2
Manifest Document No.: 5·5·9·3·6
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
Rexair Inc
230 W Seventh St, Cadillac MI 49601
4. Generator's Phone (616) 775-3413

A. State Manifest Document Number: INA 0355936
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. RQ Waste Trichloroethylene ORM-A UN1710 (F001)	2	D·M	110	G	F 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
All the recovered Trichloroethylene from the reclaim unit may not have originated from the Rexair Inc., facility.

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, 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: STANLEY J. ZAUCHA — Signature: Stanley J. Zaucha — Date: Month 12 Day 7 Year 90

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Roger North — Signature: Roger North — Date: Month 12 Day 7 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: Whitaker H — Signature: A Whitaker — Month 12 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.

INA0355936

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

1 BTCT63 3/20

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0018269

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. MID084571625 Manifest Document No. 53597

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
Rexnord Chemical Products
Concord & Main, Mattawan, MI 49071

4. Generator's Phone (616) 668-3371

A. State Manifest Document Number: MI 053597

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, NOS Flammable Liquid NA1993	1	DM	385	G	D001	H
b.								
c.								
d.								

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

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

Printed/Typed Name: T. H. Schmidt — Signature: [signature] — Date: Month 12 Day 17 Year 85

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Earl W. Coons — Signature: Earl W. Coons — Date: Month 12 Day 17 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: G R MURPHY — Signature: [signature] — Date: Month 1 Day 7 Year 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 (3-84)

TSDF COPY

204 K T-50 (6000 BTU NIL Cl.) ✓

PR 5110 Rev. 7/84

OJ8070

0241462

TO BE COMPLETED BY WASTE GENERATOR

...N AGENCY
...ION CONTROL
...GFIELD, ILLINOIS 62706
...82-6760

...IAL WASTE HAULING MANIFEST

Authorization Number 991606

Q.I.M. Chemicals Co. (Company Name) | First Ave. & 49th St. (Address)
Roy Cook (City) | Illinois (State) | (Zip)
03117400026 (Generator Number)
USEPA I.D.# ILD005180070

WASTE HAULER(S)

Landgrebe (Hauler Name) | Rt 130 Valparaiso, Ind (Hauler Address) | S.W.H. Registration Number
USEPA I.D.# Ind. 009842824

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | 420 S. Colfax (Address)
9180 8902 (Site Number)
Griffith (City) | Ind. (State) | 46319 (Zip)
USEPA I.D.# IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Trichlorethylene
WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: | HAZARD CLASS: ORM A
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: 000330 (47–52)
(1) GALLONS (Circle One) 2 CU. YDS. 1 (53)

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 81-2-2 TOD (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) F. Schlueter (Authorized Signature) DATE: 2/2/81 (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: 2/3/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: UNLOADED 2/3/81 AT DOCK
PUMPED TO 202R 3/13/81 T-50

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

000629

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0026751

Authorization Number 790780

Reynolds Metals Co. (Company Name) | P.O. Box 239 (Address)

Brookfield (City) | Illinois (State) | 60513 (Zip)

0310330001 (Generator Number)

WASTE HAULER(S)

(1) American Chemical (Hauler Name) | ~~420 So Colfax~~ VOID (Hauler Address) | S.W.H. Registration Number 0079009

(2) Mr Frank (Hauler Name) | 201 W 155th St Griffith Ind. (Hauler Address) | S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chem (Facility Name) | 420 So Colfax Griffith Ind. (Address) | Reclaimer | 9180902 (Site Number)

City | State | Zip

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Solvents + Paints

WASTE PHASE: Semi-Solid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Tank Truck

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: 4/28/80

W. A. Smanal (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 004500 (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 Mantle (Authorized Signature) DATE: 04 28 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:

T Dimpfel (Authorized Signature) DATE: 4 28 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

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0175224

WASTE GENERATOR

Authorization Number 998451

REYNOLDS METALS (Company Name) | 1ST AVE & 49TH ST. (Address)
McCOOK (City) | ILL (State) | 60525 (Zip)
0311740002 Generator Number

WASTE HAULER(S)

(1) MR. FRANK (Hauler Name) | 201 W 155TH ST SOUTH HOLLAND RD, ILL (Hauler Address) | S.W.H. Registration Number 0079023

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | 420 So. Colfax (Address) | IL 8089502 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: LOW FLASH SOLVENT | HAZARD CLASS: LOW FLASH SOLVENT

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: 9-17-80 (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: 09/17/80

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

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

(Authorized Signature) DATE: 9/12/80

COMMENTS OR SPECIAL INSTRUCTIONS: _____

INOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-8802

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

SITE COPY - PART 3

00 0073

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

DO NOT WRITE IN THIS SPACE

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

Form Approved OMB No. 2000 0404 Expires 7 31 86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I L D 0 0 1 8 5 3 3 0 8 — Manifest Document No.

2. Page 1 of 1

Information in the shaded areas is not required by Federal law

3. Generator's Name: Rheem Manufacturing Co.
7600 S. Kedzie Avenue
Chicago, IL 60652

4. Generator's Phone (312) 434-7500

A. State Manifest Document Number: IN 086966

B. State Generator's ID: 0316700001

5. Transporter 1 Company Name: LAIDLAW

6. US EPA ID Number: I N D 0 1 9 8 4 1 2 F D 1

C. State Transporter's ID: 1575

D. Transporter's Phone: 312-[illegible]

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address: American Chemical Services
420 S. Colfax
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: [illegible]

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. RQ. Waste, Paint Solvent N.O.S. Flammable NA9189 (EPA TOX F003 F005)	10 1	D M	55[illegible]		F003 F005
b. RQ WASTE 111 TRICHLOROETHANE ORM-A UN 2831 (F001)	2	D M	110[illegible]		
c.					
d.					

GENERATOR

J. Additional Descriptions for Materials Listed Above: Materials for Reclaiming / Recycling

K. Handling Codes for Wastes Listed Above: F003 F005

15. Special Handling Instructions and Additional Information
Destroy drum labels after decanting
Return Generator Copy - Attn. John Peculis

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, 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
B. Bell, W. Casey or J. Peculis	[signature]	12	17	87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date: Month	Day	Year
		12	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
Milton Pupa	Milton Pupa	12	18	87

IN 086966

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

1-204R-T-50 9/1/87
26-1AR-T-63 11/1/87

U.S. DETACH AND RETAIN THIS COPY

012495

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

3. Generator's Name

4. Generator's Phone ( )

A. State Manifest Document Number: IN 086971

B. State Generator's ID: 031620000 1

5. Transporter 1 Company Name | 6. US EPA ID Number

C. State Transporter's ID

D. Transporter's Phone 285-5440

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 812-738-3400

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. P.C. WASTE [illegible]	1	DM	1771	G	F003 F005
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above: F003 F005

11/30

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, 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 [illegible] Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and [illegible] economically practicable and I have selected the method of treatment, storage, or disposal [illegible] human health and the environment.

minimization certification under [illegible] degree I have determined to be [illegible] the present and future threat to

Printed/Typed Name	Signature	Month	Day	Year
[illegible]				

770 gal

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
Whitaker A	A Whitaker	11	30	88

EPA Form 8700-22A (Rev. 11-85)

T.S.D. DETACH AND RETAIN THIS COPY

UHWM 2/LP2

IN 086971

11-204 TC T50 12/13

(99 GAL) 2-204 TC T50 12/14

11 PAILS (66 GAL) ACKNOWLEDGED 3/10/89 9:02

00015321

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.: ILD000718313 [illegible]

2. Page 1 of: 1

Information in the shaded areas is not required by Federal law

3. Generator's Name: RHEEM MFG. CO
7600 S. KEDZIE CHICAGO, ILL 60652

A. State Manifest Document Number: IN 086969

4. Generator's Phone: (312) 434-7500

B. State Generator's ID: 0316700001

5. Transporter 1 Company Name: STRAND TRUCKING CO

6. US EPA ID Number: ILD000616861

C. State Transporter's ID: 0311

D. Transporter's Phone: 312-385-8470

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: IND006136165

G. State Facility's ID:

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. R.Q. WASTE PAINT SOLVENT NOS. FLAMMABLE NA 1169	20	DM	1100	G	F003 F005
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: MAT'L FOR RECYCLING / NOTICE OF LAND RESTRICTION ATTACHED

K. Handling Codes for Wastes Listed Above: F003 - F005

15. Special Handling Instructions and Additional Information: RETURN CERTIFICATE FROM C/O JOHN PERULLI

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

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

Printed/Typed Name	Signature	Month	Day	Year
John M Perulli	[signature]	12	04	85

TRANSPORTER

17 Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
STEPHEN J MASSAT	[signature]	01	21	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 item 19.

Printed/Typed Name	Signature	Month	Day	Year
JAMES MURPHY	James Murphy	01	17	86

EPA Form 8700-22A (Rev. 11-85)

T.S.D. DETACH AND RETAIN THIS COPY

UIIWM 2/LP2

086969 IN

0015318

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

Information in the shaded areas is not required by Federal law

3. Generator's Name

A. State Manifest Document Number: IN 086970

B. State Generator's ID

4. Generator's Phone ( )

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)	12. Containers No	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.					
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

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

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

GENERATOR

Printed/Typed Name	Signature	Month	Day	Year

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	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 086970

EPA Form 8700-22A (Rev. 11-85)

UHWM 2-LP2

T.S.D. DETACH AND RETAIN THIS COPY

0013320

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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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

A. State Manifest Document Number: IN 086972

4. Generator's Phone ( )

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)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.					
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

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

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

GENERATOR

Printed/Typed Name	Signature	Month	Day	Year

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	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

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

T.S.D. DETACH AND RETAIN THIS COPY

IN 086972

0016786

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

PLEASE PRINT OR TYPE *(Form designed for use on elite (12-pitch) typewriter.)* *Form Approved. OMB No. 2050-0039. Expires 9-30-91*

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.
ILOOO1853308			

3. Generator's Name and Mailing Address
Rheem Manufacturing Co.
7600 S. Kedzie Ave. , Chicago, Ill.

4. Generator's Phone (312) 434-7500

A. State Manifest Document Number: INA 0397968
B. State Generator's ID: 0316700001 (756487)

5. Transporter 1 Company Name	6. Use EPA ID Number	C. State Transporter's ID / D. Transporter's Phone
Landgrebe Transport	IND009842824	ICC 2980 / 219-462-4181
7. Transporter 2 Company Name	8. Use EPA ID Number	E. State Transporter's ID / F. Transporter's Phone

9. Designated Facility Name and Site Address	10. Use EPA ID Number	G. State Facility's ID / H. Facility's Phone
American Chemical Service 420 S. Colfax Griffith, Ind.	IN0016360265	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. R.Q. Waste, III Trichloroethane ORM-A UN1710	7	DM	385	G	F001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: **Materials for recycling**

K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information:

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

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good 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)
John H. Peculis	John H. Peculis	10 18 89

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)
BoB DuitMann	Bob Duit	10 18 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 A		10 19 89

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

COPY 5. TSD COPY

3-20-1TCT 50 1/3
4-1 1TCT 63 12/6

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 0397968

0016787

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

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. ILD 0015 3308 | 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
RHEEM MFG CO
7600 S. KEDZIE CHICAGO ILL

A. State Manifest Document Number: INA 0397969

4. Generator's Phone (312) 434-7500

B. State Generator's ID: 031670000 1

5. Transporter 1 Company Name: STRAND TRUCK

6. Use EPA ID Number

C. State Transporter's ID: 0311

D. Transporter's Phone: 38?-8??

7. Transporter 2 Company Name

8. Use EPA ID Number: I.L.D.9.8.4.7.2.4.8.9

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
AMERICAN CHEM. SERV.
420 S. COLFAX
GRIFFITH IND

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: 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. RQ WASTE 111 TRICHLOROETHANE ORM-A UN 2810 NA 7189	003	DM	001.65	G	F001
b. RQ WASTE PAINT SOLVENT NOS FLAMMABLE NA 1169 UN 1710	002	DM	001.10	G	F003 F005
c.					
d.					

J. Additional Descriptions for Materials Listed Above
MATERIALS FOR RECYCLING

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

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

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

GENERATOR

Printed/Typed Name: JOHN M. PECUCIS | Signature | Date: Month 05 Day 10 Year 90

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: LEW STRAND | Signature | Date: Month 05 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
A B
2-204 TSD 5/14

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 05 Day 10 Year 90

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0397969

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

COPY 5. TSD COPY

R3STILL B.N.S0903 5/14

0018268

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

0588623

Authorization Number 998476

RHEEM MFG. CO. (Company Name) | 7600 So. KEDZIE (Address) | 3124347500 (Phone Number) | 0316000008E (Generator Number)

CHGO (City) | ILL (State) | 60652 (Zip) | ILD001813308 (EPA Number)

WASTE HAULER(S)

STAND TANKING (Hauler Name) | 13642 KINION CALUMET (Hauler Address) | S.W.H. Registration Number 0024002

312-385-8240 (Phone Number) | ILT000646810 (EPA Number)

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

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEM (Facility Name) | 420 So. COLFAX (Address) | 918088702 (Site Number)

GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | 768-3460 (Phone Number) | INDO 1636263 (EPA Number)

(Alternate (Facility Name)) | (Address) | 918088702 (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: DRUMS | HAZARD CLASS: F017 | UN1993 (UN or NA Number) | F005 (EPA HW Number)

WEIGHT FOR D.O.T. USE 20,900 (LBS) TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU YDS. OR GAL. | QUANTITY OF WASTE DELIVERED 2090 (1 GALLONS (Circle One) 2 CU. YDS.)

METHOD OF SHIPMENT (Circle One) (DRUMS 38 Number) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION (Authorized Signature) DATE: 5/6/82

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) (Authorized Signature) DATE 5/6/82

(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

(Authorized Signature) DATE 5/6/82

COMMENTS OR SPECIAL INSTRUCTIONS.

MSD 060585

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS 217 / 782-3637 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. # 3

SITE COPY - PART 3

On dock 5-6-82 GREM
To 125 FT-63 GREM 5-11-82

00374

STATE OF ILLINOIS

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

0510819

Authorization Number 998957

TO BE COMPLETED BY WASTE GENERATOR

RHEEM MFG CO. (Company Name) | 7600 S. KEDZIE (Address) | (312) 4347500 (Phone Number) | 0316000089 (Generator Number)

CHGO (City) | IL (State) | 60653 (Zip) | ILD001853308 (EPA Number)

WASTE HAULER(S)

STRAND TRUCKING (Hauler Name) | 13642 KENTON (Hauler Address) | S.W.H. Registration Number 0024001

CRESTWOOD IL 60445 | 3123858440 (Phone Number) | ILT000644681C (EPA Number)

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

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEM CO. (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: WASTE ~~PAINT SLUDGE~~ 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: DRUMS

HAZARD CLASS: ~~3~~ FLAM LIQUID

UN or NA Number: UN1993

EPA HW Number: F017

WEIGHT FOR D.O.T. USE: 12,760 (LBS) TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 1595 (1 GALLONS (Circle One) 2 CU YDS.)

METHOD OF SHIPMENT (Circle One): (DRUMS) 29 (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: 2/15/82

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 2/15/82

(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 2/15/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-25

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 2/15/82 6:12PM
To 202 RT-50 6PM 2/19/82

003144

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

0510818 (1–7)

Authorization Number 998476 (8–13)

RHEEM MFG CO (Company Name) | 7600 S. KEDZIE (Address) | 3124347500 (Phone Number) | 0316000089 G (14–24 Generator Number)

CHICAGO (City) | ILL (State) | 60652 (Zip) | ILD001853308 (EPA Number)

WASTE HAULER(S)

STRAND TRUCKING (Hauler Name) | 13642 KENTON (Hauler Address) | CRESTWOOD, ILL 60445 | 3123858440 (Phone Number) | S.W.H. Registration Number 0024001 (25–31) | ILT000646810 (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 SERV. (Facility Name) | 420 So. COLFAX (Address) | 91808902 (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: WASTE 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: DRUMS | HAZARD CLASS: NON-FLAM LIQUID | UN2831 (UN or NA Number) | F001 (EPA HW Number)

WEIGHT FOR D.O.T. USE 19,900 (LBS) TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 1980 (47–52) (GALLONS) 2 CU. YDS. (Circle One) (53)

METHOD OF SHIPMENT (Circle One) (DRUMS 36 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: 2/15/82

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) Stan Strand (Authorized Signature) DATE 2/15/82 (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 2/16/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS MSD 060617

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 2/15/82
To TA T-6361 2/16/82

003145

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

0242202

Authorization Number 998476

RHEEM MFG. CO. (Company Name) | 7600 So. KEDZIE (Address)
CHICAGO (City) | IL (State) | 60632 (Zip)

0316000089 G (Generator Number)
ILD 001853308

WASTE HAULER(S)

STRAND TRUCKING (Hauler Name) | 13642 KENTON (Hauler Address) | CRESTWOOD, IL | 312-385-8440

S.W.H. Registration Number 0024002
ILT 000646810

(Hauler Name) | (Hauler Address)

S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

768-3400
AMERICAN CHEM (Facility Name) | 420 So. COLFAX (Address) | GRIFFITH (City) | INDIANA (State) | 46319 (Zip)

9 1808902 (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: DRUMS, UN 1993 | HAZARD CLASS: F017, F005

WEIGHT FOR D.O.T. USE: 5280 LBS (circle one) / TONS

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

QUANTITY OF WASTE DELIVERED: 660 (corrected from 60 03)

1 GALLONS (Circle One) / 2 CU. YDS.

METHOD OF SHIPMENT (Circle One): 12 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.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 9-29-92

(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: 9/29/92

(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: ___/___/___

COMMENTS OR SPECIAL INSTRUCTIONS: MSD 099636

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-880

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

To 125 RT-63 GRM 9-29-92 SITE COPY - PART 3

003752

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

0242201

SPECIAL WASTE HAULING MANIFEST

Authorization Number 998476

RHEEM MFG CO (Company Name) | 7600 So. KEDZIE (Address) | 312-436-7500
CHICAGO (City) | ILL (State) | 60652 (Zip)
031 60 000089 G (Generator Number) | ILD 001853308

WASTE HAULER(S)

STRAND TRUCKING (Hauler Name) | 13642 KENTON (Hauler Address) | S.W.H. Registration Number 002400
CRESTWOOD, ILL 60445 | ILT000646810
Hauler Name | 312-385-8440 (Hauler Address) | S.W.H. Registration Number

DESTINATION -- DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEM SERV. (Facility Name) | 420 So. COLFAX (Address) | 91 808902 (Site Number)
GRIFFITH (City) 312 2768400 | IND (State) | 46319 (Zip) | IND016360265

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: DRUMS, NON-FLAM LIQUID | HAZARD CLASS: UN2831 | WEIGHT FOR D.O.T. USE 6450 (LBS) TONS (circle one)

F001

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

QUANTITY OF WASTE DELIVERED: 000645 | 1 GALLONS (Circle One) 2 CU. YDS.

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

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: 9/29/82

(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) Jim Battle (Authorized Signature) DATE: 9/29/82

(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: ___/___/___

COMMENTS OR SPECIAL INSTRUCTIONS:
MSD 099635

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-88(

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

On dock 9-29-82 To IBKT-63

SITE COPY - PART 3

00375

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

0242208

SPECIAL WASTE HAULING MANIFEST

Authorization Number ____

RHEEM MFG CO (Company Name) | 312-434-7500 7600 S KEDZIE (Address)
CHICAGO (City) | ILL (State) | 60652 (Zip)
0316000089 (Generator Number) G
ILD 000853309

WASTE HAULER(S)

STRAND TRUCKING (Hauler Name) | 13642 KENTON (Hauler Address)
CRESTWOOD, ILL | 385-8440
0311 612 (S.W.H. Registration Number)
ILD000646810

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEM SERV (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: 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: DRUMS NON-FLAM LIQUID | HAZARD CLASS: UN 2831
F001

WEIGHT FOR D.O.T. USE 2200 (LBS) TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 000220 (4)
1 GALLONS (Circle One)
2 CU. YDS. 220

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.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 8-19-83

(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: 8/19/83

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO X

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

_____ (Authorized Signature) DATE: 8/19/83

COMMENTS OR SPECIAL INSTRUCTIONS: MSD 151863

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 8-19-83 4 To 117K T-63 6PM 8-20-83

SITE COPY - PART 3

003847

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

0297329
1 7

SPECIAL WASTE HAULING MANIFEST

Authorization Number 998475 13

RHEEM MFG CO-CONTAINER DIV (Company Name) | 7600 S. KLDZIE AVE (Address) | US EPA ILT 1800118688

CHICAGO (City) | ILL (State) | 60652 (Zip)

ATTENTION MIKE SULLIVAN

0316000089 G
14 Generator Number 24

WASTE HAULER(S)

AMERICAN CHEMICAL SERVICES (Hauler Name) | 420 S. COLFAX AVE GRIFFITH IND (Hauler Address)

S.W.H. Registration Number 0024002
25 31

C/O STRAND

ILT000646810

Hauler Name | Hauler Address

S.W.H. Registration Number
32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

91808902
39 Site Number 46

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

IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINT/SOLVENTS N.O.S.

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: TRUCK

HAZARD CLASS: FLAMMABLE

WEIGHT FOR D.O.T. USE EST 9#/GAL (LBS) TONS (circle one)
EST 19.6 TONS

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

QUANTITY OF WASTE DELIVERED: 004345
47 52

1 (GALLONS) (Circle One)
2 CU. YDS. 1
53

79

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 12-9-80

Ken Maliga (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) Harold Thompson (Authorized Signature)

PLACARDS OFFERED OR AFFIXED
INITIAL Y.L.G.

DATE: 12/9/80
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:

Michael Travis (Authorized Signature) — TO 125E 12/10/80 JTM

DATE: 12/9/80
60 65

COMMENTS OR SPECIAL INSTRUCTIONS: M.S.D # 40296 DOT NA 1993

DESCRIPTION OF Re-Cycle MATERIALS F003, F005, F017

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

00:0610

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

0243252

Authorization Number 998957

RHEEM MFG. CO. (W. H. P. DIV.) — 7600 S. KEDZIE — ILD001853308
(Company Name) — Address

CHICAGO — ILL. — 60652
City — State — Zip

0316000089 G
Generator Number

WASTE HAULER(S)

~~AMERICAN CHEM. SERVICE~~ — ~~420 S. COLFAX~~
Hauler Name — Hauler Address

S.W.H. Registration Number 0024002

STRAND TRUCKING — 13642 KENTON — FED ID # ILT000646810
312-385-8440 — CRESTWOOD, ILL 60445
Hauler Name — Hauler Address

S.W.H. Registration Number

312-768-3400

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

FED ID# IND016360265

AMERICAN CHEM. SERVICE — 420 S. COLFAX
(Facility Name) — Address

9180890 2
Site Number

GRIFFITH — INDIANA — 46319
City — State — 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: 36 ~~55~~ DRUMS — FLAM. LIQUID — NOS

HAZARD CLASS: F017 — UN1993

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: CO ~~2000~~ 1980

(GALLONS) CU. YDS. (Circle One)

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.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 1/7/81

(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR T[illegible] KNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature]
(Authorized Signature)

1980 gal

DATE: 1/7/81

(2) _____
(Authorized Signature)

YES ____ NO ✓

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

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

[signature]
(Authorized Signature)

DATE: 1/7/81

COMMENTS OR SPECIAL INSTRUCTIONS: TRAILER MSD 060600 SPOTTED 1/7/81
UNLOADED 1/8/81 PUMPED TO 125E 1/8/81 T-63 Jim Mizzi

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

0000313

...MPLETED BY
...ASTE 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

0243253
998476
Authorization Number [redacted]

RHEEM MFG. CO. (W. H. P. DIV.) (Company Name) | 7600 S. KEDZIE (Address) | ILD001853308

CHICAGO (City) | ILL. (State) | 60652 (Zip)

0 3 1 6 0 0 0 0 8 9 G
Generator Number

WASTE HAULER(S)

~~AMERICAN CHEM. SERVICE~~ (Hauler Name) | ~~420 S. COLFAX~~ (Hauler Address) | FED ID,# | S.W.H. Registration Number 0 0 2 4 0 0 2

STRAND TRUCKING (Hauler Name) | 13642 KENTON (Hauler Address) | ILT 000 646 810

312-385-8440 | CRESTWOOD, Ill 60445 | S.W.H. Registration Number

312-768-3400

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

FED I.D.# IND 016360265

AMERICAN CHEM. SERVICE (Facility Name) | 420 S. COLFAX (Address) | 9 1 8 0 8 9 0 2 Site Number

GRIFFITH (City) | INDIANA (State) | 46319 (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ~~PAINT~~ SOLVENT | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

WASTE 1-1-1 TRICHLOROETHANE

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
22 DRUMS	NON-FLAM. LIQUID	12,100 LBS / TONS (circle one)
1,210 gals	~~NOS~~ ORM-A	

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

QUANTITY OF WASTE DELIVERED: 0 0 1 2 1 0

1 (GALLONS) 2 CU. YDS. (Circle One)

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.

FED I.D. # F001

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 1/7/81 | (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) William J. Schweiter (Authorized Signature) | DATE: 01 07 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:

M. Olivia O'Brien (Authorized Signature) | DATE: 1/7/81

COMMENTS OR SPECIAL INSTRUCTIONS: MSD 060601

UNLOADED 1/8/81 - PUMPED TO 19 1/10/81 T-63 Jim Mundy

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

000017

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

0243235 (1–7)

SPECIAL WASTE HAULING MANIFEST

Authorization Number 998957 (8–13)

RHEEM MFG. CO. (Company Name) | 7600 So. KEDZIE (Address) | ILD 001853308

CHICAGO (City) | 312-434-7500 | Ill (State) | 60652 (Zip)

0311000089 G (14–24) Generator Number

WASTE HAULER(S)

AMERICAN CHEMICAL SERVICE (Hauler Name) | 420 So. COLFAX (Hauler Address) | S.W.H. Registration Number 0024002 (25–31)

GRIFFITH, IND. 46319 | FED I.D.# IND016360265

312-768-3400

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) | 91808902 (39–46) Site Number

GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS 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:	HAZARD CLASS:	WEIGHT FOR D.O.T. USE
DRUMS	FLAMMABLE LIQUID NOS	8800 (LBS) TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 1100 (47–52) (1) GALLONS (Circle One) (2) CU. YDS. (53)

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.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 7/8/81 | (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: 7 7 81 (54–59)

(2) (Authorized Signature) DATE: / / (54–59)

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

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

(Authorized Signature) DATE: 7/8/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: MSD 060560 UNLOADED AT DOCK 7/8/81 TO 20FT T-50 7/9/81 9PM.

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

000623

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

0297330

SPECIAL WASTE HAULING MANIFEST

USEPA Authorization Number 998475 ILT 180D11868

RHEEM MFG CO. CONTAINER DIV (Company Name) | 7600 S KEDZIE AVE (Address) | CHICAGO (City) | ILL (State) | 60652 (Zip)

ATTENTION MIKE SULLIVAN

0316000089 G (Generator Number)

WASTE HAULER(S)

AMERICAN CHEMICAL SERVICES (Hauler Name) | 420 S. COLFAX HWY GRIFFITH IND (Hauler Address) | S.W.H. Registration Number 0024001

STRAND TRUCKING (Hauler Name) | 13612 KENTON CRESTWOOD ILL 60445 (Hauler Address) | ILT0006468 10 S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICES (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 PAINTS/SOLVENTS N.O.S. | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	WEIGHT FOR D.O.T. USE
TRUCK	FLAMMABLE	EST 9# GAL (LBS) / EST 19.8 TONS (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)

80

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.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 2-27-81 Ken Mehan (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) William L DeVaney (Authorized Signature) PLACARDS OFFERED OR AFFIXED INITIAL (B.D) DATE: 2/27/81 (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:

Jim Murphy (Authorized Signature) DATE: 3/2/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: M.S.D # 40297 DOT NA 1993 TRAILER SPOTTED DESCRIPTION OF RE-CYCLE MATERIALS F003, F005, F017 2/27/81 – UNLOADED 2/28/81

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

PUMPED TO 142 2/28/81 T-63 Jim Murphy

SITE COPY - PART 3

0000619

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

0297331

SPECIAL WASTE HAULING MANIFEST

Authorization Number 998475

RHEEM MFG CO-CONTAINER DIV (Company Name) | 7600 S KEDZIE AVE (Address) | USEPA ILT 180011868

CHICAGO (City) | ILL (State) | 60652 (Zip)

MIKE SULLIVAN

0316000089 G (Generator Number)

WASTE HAULER(S)

AMERICAN CHEMICAL SERVICES (Hauler Name) | 420 S. COLFAX AVE GRIFFITH IND (Hauler Address) | (RM) 031-003 (S.W.H. Registration Number)

STRAND TRUCKING (Hauler Name) | 13642 KENTON CREST WOOD ILL 60445 (Hauler Address) | ILT000646810 (S.W.H. Registration Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

GRIFFITH (City) | IND (State) | 46319 (Zip) | IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINTS / SOLVENTS N.O.S | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	WEIGHT FOR D.O.T. USE (LBS / TONS circle one)
TRUCK	FLAMMABLE	EST 9# GAL / EST 13.6 TONS

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

QUANTITY OF WASTE DELIVERED: 003025

1 (GALLONS) (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) 55 (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.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 3-25-81 | Ken Melizia (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) William J. DeWaster (Authorized Signature) | PLACARDS OFFERED OR AFFIXED INITIAL (B.D.) | DATE: 3/25/81

(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: 3/27/81

COMMENTS OR SPECIAL INSTRUCTIONS: M.S.D #40298 DOT NA1993
DESCRIPTION OF RE-CYCLE MATERIALS F003, F005, F017

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

UNLOADED AT DOCK 3/25/81
PUMPED TO 124-R 3/27/81 T-63 Jim Murphy

SITE COPY - PART 3

000620

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

0297332

SPECIAL WASTE HAULING MANIFEST

Authorization Number 998475

RHEEM MFG CO. CONTAINER DIV (Company Name) | 7600 S. KEDZIE AVE (Address) | US EPA ILT 1800118688

CHICAGO (City) | ILL (State) | 60652 (Zip)

MIKE SULLIVAN

03 16000089 G (Generator Number)

WASTE HAULER(S)

AMERICAN CHEMICAL SERVICES (Hauler Name) | 420 S. COLFAX AVE GRIFFITH IND (Hauler Address) | S.W.H. Registration Number 0024001

STRAND TRUCKING (Hauler Name) | 13642 KENTON CRESTWOOD ILL 60445 (Hauler Address) | ILT000646810 S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

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

GRIFFITH (City) | IND (State) | 46319 (Zip) | IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINTS/SOLVENTS NOS | 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 (LBS / TONS circle one)
TRUCK	FLAMMABLE	EST 9# GAL / EST 10.1 TONS

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. 41

QUANTITY OF WASTE DELIVERED: 002255

1 (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.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 4-21-81 (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) | PLACARDS OFFERED OR AFFIXED INITIAL (L.J) (BY TRANSPORTER) | DATE: 4/21/81

(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: 4/21/81

COMMENTS OR SPECIAL INSTRUCTIONS: M.S.D. #40299 DOT NA 1993 TRAILER SPOTTED 4/21/81
DESCRIPTION OF RE-CYCLE MATERIALS F003, F005, F017

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

Pumped to 142R 4/22/81 T-63 JTM

SITE COPY - PART 3

000621

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

0297333

SPECIAL WASTE HAULING MANIFEST

Authorization Number 998475

RHEEM Mfg Co Container Div (Company Name) | 7600 S. Kedzie Ave (Address) | USEPA ILT 1800011868

Chicago (City) | Ill (State) | 60652 (Zip) | Mike Sullivan

03 16 0000 89 G (Generator Number)

WASTE HAULER(S)

American Chem Services (Hauler Name) | 420 S 601 Fax Ave Griffith/IND (Hauler Address) | S.W.H. Registration Number 0024001

13642 Kenton

Strand Trucking (Hauler Name) | Crestwood Ill 60445 (Hauler Address) | ILT0006468 10 | S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Services (Facility Name) | 420 S 601 Fax Ave (Address) | 91808902 (Site Number)

Griffith (City) | IND (State) | 46319 (Zip) | IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Paints/Solvents NOS

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 (LBS / TONS circle one)
Truck	Flammable	EST 9AL # / EST 16.5 TONS

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

QUANTITY OF WASTE DELIVERED: 003685

1 GALLONS (Circle One)
2 CU. YDS. 1

67

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.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 6-8-81 Ken Gmelin (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) Jim Ballo (Authorized Signature) PLACARDS OFFERED OR AFFIXED INITIAL JB DATE: 06 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:

Michael W Bush (Authorized Signature) DATE: 6 9 81

COMMENTS OR SPECIAL INSTRUCTIONS: MSD # 40300 DOT NA 1993 TRAILER SPOTTED 6/8/81

DESCRIPTION OF RECYCLE MATERIALS F003, F005, F017 36 TO 1422 T-63 6/9/81

37 TO 124 K T-63 6/13/81

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

000622

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

0297334

SPECIAL WASTE HAULING MANIFEST

Authorization Number 998475

RHEEM MFG. CO. CONTAINER DIV. (Company Name) | 7600 S KEDZIE AVE (Address) | USEPA ILT 180011868

CHICAGO (City) | ILL (State) | 60652 (Zip)

MIKE SULLIVAN

031600089 G (Generator Number)

WASTE HAULER(S)

AMERICAN CHEMICAL SERVICE (Hauler Name) | 420 S. COLFAX AVE GRIFFITH IND. (Hauler Address) | S.W.H. Registration Number 0024002

STRAND TRUCKING (Hauler Name) | 13642 KENTON CRESTWOOD ILL 60445 (Hauler Address) | ILT000646810 | S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICES (Facility Name) | 420 S. COLFAX AVE (Address) | 918089002 (Site Number)

GRIFFITH (City) | IND (State) | 46319 (Zip) | IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINT/SOLVENTS NOS

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 (LBS / TONS circle one)
TRUCK	FLAMMABLE	EST 9# GAL EST. ×14.85 TONS

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. 60

QUANTITY OF WASTE DELIVERED: 003300

1 (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.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: × 7-8-81 Ken Grelinger (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) PLACARDS OFFERED OR AFFIXED INTIAL [signature] × DATE: 7 8 81

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO ✓

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

[signature] (Authorized Signature) DATE: 7 9 81

COMMENTS OR SPECIAL INSTRUCTIONS: MSD # 060610 DOT NA 1993 UNLOADED AT DOCK 7/8/81

DESCRIPTION OF RECYCLE MATERIALS F003, F005, F017

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 126K T-63 7/9/81 JRM.

SITE COPY - PART 3

000624

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

0297335

SPECIAL WASTE HAULING MANIFEST

Authorization Number 998475

USEPA ILT 1800 1 1868

RHEEM MFG CO CONTAINER DIV (Company Name) | 7600 S. KEDZIE AVE (Address)

CHICAGO (City) | ILL (State) | 60652 (Zip)

ATTN: MIKE SULLIVAN

03160000089 G (Generator Number)

WASTE HAULER(S)

AMERICAN CHEMICLE SERVICE (Hauler Name) | 420 S. COLFAX AVE GRIFFITH/IND (Hauler Address)

S.W.H. Registration Number 0024001

13642 KENTON

ILT000646810

STRAND TRUCKING (Hauler Name) | CRESTWOOD ILL 60445 (Hauler Address)

S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICLE SERVICES (Facility Name) | 420 S. COLFAX AVE (Address)

918 08 902 (Site Number)

GRIFFITH (City) | IND (State) | 46313 (Zip)

IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINT/SOLVENTS NOS

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: TRUCK

HAZARD CLASS: FLAMMABLE

WEIGHT FOR D.O.T. USE EST 9 GAL (LBS) TONS (circle one)
EST × 7.425 TONS

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

QUANTITY OF WASTE DELIVERED: 001650 × 30

1 (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.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 7-30-81

(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)

PLACARDS OFFERED OR AFFIXED INITIAL SS

DATE: 7/30/81

(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:

_____ (Authorized Signature) TO 125RT-63 7/31/81 gm.

DATE: 7/30/81

COMMENTS OR SPECIAL INSTRUCTIONS: MSD# 060611 DOT NA1993 TRAILER SPOTTED 7/30/81

DESCRIPTION OF RECYCLE MATERIALS F003, F005 F017

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

000626

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

0297336 (1–7)

SPECIAL WASTE HAULING MANIFEST

Authorization Number 998475

RHEEM MFG CO CONTAINER DIV (Company Name) | 7600 S KEDZIE AVE (Address) | US EPA ILT 180011868 (13)

CHICAGO (City) | ILL (State) | 60612 (Zip)

MIKE SULLIVAN

0316000089 G (14 / Generator Number / 24)

WASTE HAULER(S)

AMERICAN CHEMICAL SERVICE (Hauler Name) | 420 S COLFAX AVE GRIFFITH/IND (Hauler Address) | S.W.H. Registration Number × 0024002 (25–31)

STRAND TRUCKING (Hauler Name) | 13642 KENTON CRESTWOOD ILL 60445 (Hauler Address) | ILT 000646810 | S.W.H. Registration Number (32–38)

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | 420 S COLFAX AVE (Address) | 91808902 (39–46 / Site Number)

GRIFFITH (City) | IND (State) | 46319. (Zip) | IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE 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:	WEIGHT FOR D.O.T. USE (LBS / TONS circle one)
TRUCK	FLAMMABLE	EST 9# GAL (LBS) TONS EST × 7.67 TONS

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

QUANTITY OF WASTE DELIVERED: × 001705 (47–52)

1 (GALLONS) 2 CU. YDS. (Circle One) 1 (53)

METHOD OF SHIPMENT (Circle One) × 31 (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.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: × 8-26-81 | (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) | PLACARDS OFFERED OR AFFIXED INITIAL × CS | × DATE: 8/26/81 (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: 9/2/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: MSD # 060612 DOT NA 1993 TO 125 K T-63 9/1/81 gm
DESCRIPTION OF RECYCLE MATERIALS F003 F005 F017

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

000627

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

0297337

SPECIAL WASTE HAULING MANIFEST

Authorization Number 998475

RHEEM MFG CO CONTAINER DIV (Company Name) | 7600 S KEDZIE AVE (Address) | US EPA ILT 180 011868

CHICAGO (City) | ILL (State) | 60612 (Zip)

MIKE SULLIVAN

0316000089 G (Generator Number)

WASTE HAULER(S)

AMERICAN CHEMICAL SERVICE (Hauler Name) | 420 S GIFFAX AVE GRIFFITH IND (Hauler Address)

S.W.H. Registration Number 0024002

STRAND TRUCKING (Hauler Name) | 13642 KENTON CRESTWOOD ILL 60445 (Hauler Address)

S.W.H. Registration Number ILT0006476810

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | 420 S GIFFAX AVE (Address)

91808902 (Site Number)

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

IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE 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:	WEIGHT FOR D.O.T. USE (circle one)
TRUCK	FLAMMABLE	EST 9 #GAL / LBS / TONS EST × 19.68 TONS

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. 80,

QUANTITY OF WASTE DELIVERED: 004375

1 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.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 11-16-81

Ken Melin (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) PLACARDS OFFERED OR AFFIXED INITIAL [initials] DATE: 11/16/81

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO X

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

[signature] (Authorized Signature) DATE: 11/16/81

COMMENTS OR SPECIAL INSTRUCTIONS: MSD # 060612 DOT NA 1993
DESCRIPTION OF Recycle MATERIALS F003 F005 F017.

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

Truck spotted at dock 11/14/81 ERM
(50) To 124 Tk T-63 ERM 11/17/81
80 To 124 Tk T-63 ERM 11/18/81

SITE COPY - PART 3

000628

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

0352898

ILD 0018533088

SPECIAL WASTE HAULING MANIFEST

Authorization Number 995957

W. H. P. V.

RHEEM MFG CO (Company Name) 7600 S. KEDZIE AVE (Address)

CHICAGO (City) ILL (State) 60652 (Zip)

0 3 1 4 0 0 0 0 5 5 G (Generator Number)

312-434-7500 EXT 226

WASTE HAULER(S)

STEARNS CONVEYOR CO Hauler Name 17642 KENTON Hauler Address

S.W.H. Registration Number 0024001

Hauler Name CRESTWOOD ILL Hauler Address 312-385-5440

ILT 0006468 10

S.W.H. Registration Number

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMSERV, (Facility Name) 420 S. COLFAX AVE (Address)

2 1 8 0 8 2 0 2 (Site Number)

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

219-924-4720

IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS UN 1993 FOOS FOOS 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: TRUCK 34 DRUMS

HAZARD CLASS: FLAMMABLE LIQUIDS

WEIGHT FOR D.O.T. USE EST 7.5 LBS TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 1870

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: 7-30-81 (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: 7/30/81

(1) (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:

(Authorized Signature) DATE: 7/30/81

COMMENTS OR SPECIAL INSTRUCTIONS: MSD 060638 TRAILER SPOTTED 7/30/81 TO 125K T-63 7/31/81 JJM FOR RECYCLING

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

000625

METROPOLITAN SANITARY DISTRICT OF GREATER CHICAGO
100 EAST ERIE STREET • CHICAGO, IL 60611
INDUSTRIAL WASTE DIVISION · (312) 751-5697

NO. 060611

INDUSTRIAL WASTE/SLUDGE GENERATION, SHIPMENT AND DISPOSAL RECORD

TYPE OF WASTE ▶ [X] LIQUID [ ] SLUDGE [ ] SOLID
TYPE OF CONTAINER ▶ [ ] BULK (TANK TRUCK) [X] DRUMS [ ] OTHER (SPECIFY) 30 Drums
VOLUME ~ 16 Bbls GALS / CU. YDS. / LBS.

WASTE CONTAINS: WASTE PAINT SOLVENTS

[ ] FATS, OILS OR GREASE [ ] ACID [ ] ALKALI
[ ] CYANIDE [ ] ZINC [ ] CADMIUM
[ ] COPPER [ ] CHROME [ ] IRON
[ ] NICKEL [ ] LEAD [ ] SELENIUM
[ ] MERCURY [ ] OTHER (SPECIFY)

DISPOSAL METHOD ▶ [ ] LANDFILL [ ] DESTRUCTION (SPECIFY) [X] OTHER (SPECIFY) RECLAIMING

NAME OF COMPANY RHEEM MFG CO CONTAINER DIV
FEDERAL TAX I. D. NUMBER 94-080-3330

LOCATION 7600 S KEDZIE AVE CHICAGO IL 60652

TYPE OF INDUSTRY STEEL SHIPPING CONTAINERS
DATE REMOVED ~ 7-30-81
TIME REMOVED ~ 11:15 AM

I certify that the described waste, in the designated volume, was [illegible] this location by the contractor named below for legal disposal.

SIGNATURE OF AUTHORIZED AGENT AND TITLE [illegible]
PHONE 312-434-7500

CONTRACTOR

NAME American Chemical Services
AL TAX MBER IND016330263
ADDRESS P.O. BOX #10-420 St. Gillan Rd. Griffith IND 46319
CEIVED 7-30-81
TIME RECEIVED ~ 11:15 AM.
WASTE HAULER'S REGISTRATION NO. ~ 0034001
STATE ~ ILL
TRUCK LICENSE NO. ~ 57863

I certify that the described waste, in the designated volume, was removed from the above location and delivered to the disposal site designated below.

SIGNATURE OF CONTRACTOR'S AGENT AND TITLE [illegible]
PHONE ~ [illegible]440

NAME American Chemical Services Inc
FEDERAL TAX I. D. NUMBER 350961723
ADDRESS 450 So Colfax Griffith IN
DATE RECEIVED 7/30/81
TIME RECEIVED

I certify that the above named contractor delivered the described waste, in the designated volume to this facility and same was received for lawful disposition as designated.

SIGNATURE OF OPERATOR AND TITLE Michael J Burke
PERMIT NO.
PHONE 219 924 4370

CONTRACTOR'S COPY

003543

METROPOLITAN SANITARY DISTRICT OF GREATER CHICAGO
100 EAST ERIE STREET • CHICAGO, IL 60611
INDUSTRIAL WASTE DIVISION (312) 751-5697

NO. 099661

INDUSTRIAL WASTE/SLUDGE GENERATION, SHIPMENT AND DISPOSAL RECORD

TYPE OF WASTE ▶ [X] LIQUID [ ] SLUDGE [ ] SOLID
TYPE OF CONTAINER ▶ [ ] BULK (TANK TRUCK) [X] DRUMS [ ] OTHER (SPECIFY)
VOLUME 2420 GALS / CU. YDS. / LBS.

WASTE CONTAINS:
[ ] FATS, OILS OR GREASE [ ] ACID [ ] ALKALI
[ ] CYANIDE [/] ZINC [ ] CADMIUM
[ ] COPPER [ ] CHROME [ ] IRON
[ ] NICKEL [ ] LEAD [ ] SELENIUM
[ ] MERCURY [X] SOLVENTS [ ] PAINT RESIDUE
[ ] OTHER (SPECIFY)

DISPOSAL METHOD ▶ [ ] LANDFILL [ ] DESTRUCTION (SPECIFY) [X] OTHER (SPECIFY) RECLAIMING

NAME OF COMPANY: REEDER MANUFACTURING COMPANY - CONTAINER DIVISION
FEDERAL TAX I. D. NUMBER: 9 4 0 8 0 3 3 3 0
LOCATION: 7600 SO. KEDZIE AVENUE, CHICAGO, ILL. 60652
FEDERAL GENERATOR I. D. NUMBER: ILD98079486
TYPE OF INDUSTRY: STEEL SHIPPING CONTAINER
DATE REMOVED: 12/12/83
TIME REMOVED:

I certify that the described waste, in the designated volume, was removed from this location by the contractor named below for legal disposal.

SIGNATURE OF AUTHORIZED AGENT AND TITLE: Mgr Ross
PHONE: 312-434-7500

NAME: AMERICAN CHEMICAL SERVICES
FEDERAL TAX I. D. NUMBER:
ADDRESS: P. O. BOX 190-4205 SO. COLFAX AVE., GRIFFITH, INDIANA
DATE RECEIVED: 12-12-83
TIME RECEIVED: 12:00
FEDERAL HAULER I. D. NUMBER: 0024/002
STATE:
TRUCK LICENSE NO.: 54059 TN084

I certify that the described waste, in the designated volume, was removed from the above location and delivered to the disposal site designated below.

SIGNATURE OF CONTRACTOR'S AGENT AND TITLE: (Driver)
PHONE: 385-8440

DISPOSAL SITE

NAME: AMERICAN CHEMICAL
FEDERAL TAX I. D. NUMBER: 3 5 1 0 9 6 1 1 7 1 X
ADDRESS: Griffith IN.
FEDERAL DISPOSAL SITE I. D. NUMBER: IND016360265
DATE RECEIVED: 12/12/83
TIME RECEIVED:

I certify that the above named contractor delivered the described waste, in the designated volume to this facility and same was received for lawful disposition as designated.

SIGNATURE OF OPERATOR AND TITLE:
PERMIT NO.: 998475
PHONE: 219 924 4370

DISPOSAL SITE'S COPY

004516

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

0297338

US EPA ID ILT 180011868 Authorization Number 998475

RHEEM MFG CO CONTAINER DIV (Company Name) | 7600 S. KEDZIE AVE (Address) | CHICAGO (City) | ILL (State) | 60612 (Zip)

MIKE SULLIVAN

0316000089 G (14 – Generator Number – 24)

WASTE HAULER(S)

AMERICAN CHEMICAL SERVICES (Hauler Name) | 420 S DIVISION AVE GRIFFITH IND (Hauler Address) | 13642 KENTON CRESTWOOD ILL 60445

S.W.H. Registration Number 0024/002 (25 – 31)
ILT 000646810

STRAND TRUCKING (Hauler Name) | (Hauler Address)

S.W.H. Registration Number (32 – 38)

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICES (Facility Name) | 420 S DIVISION AVE (Address) | GRIFFITH IND (City) | IND (State) | 46319 (Zip)

918 089 02 (39 – Site Number – 46)
IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE 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:	WEIGHT FOR D.O.T. USE (LBS / TONS circle one)
TRUCK	FLAMMABLE	EST 9± GAL / LBS EST 19.80 TONS

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. 80

QUANTITY OF WASTE DELIVERED: 004100 (47 – 52)

1 GALLONS (Circle One)
2 CU. YDS. 1 (53)

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.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 7-2-82

E. Brantley (Authorized Signature)

WASTE HAULER

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

(1) L. Culwell (Authorized Signature) PLA. ORA INI. 4400 gal

(2) _____ (Authorized Signature)

NSPORT AND I ACKNOWLEDGE THE DESTINATION AS

DATE: 7/02/82 (54 – 59)

DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS ... SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 7/2/82 (60 – 66)

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO X

COMMENTS OR SPECIAL INSTRUCTIONS: NSD # 099647 DOT N/A 1993
DESCRIPTION OF Recycle MATERIALS F003 F005 F017

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-88(

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

On dock 2/2/82 6PM
10 TO 210 R 2/19/82 6PM 70 TO 126 R T-SB 6PM 3/15/82

SITE COPY - PART 3

003743

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

0297339

SPECIAL WASTE HAULING MANIFEST

Authorization Number 998475 13
USEPA ILT 1800011868

CONTAINER DIV.
RHEEM MFG. Co. (Company Name) | 7600 S. KEDZIE AVE (Address)
CHICAGO (City) | ILL. (State) | 60612 (Zip)

0316000089 G (14 – Generator Number – 24)

WASTE HAULER(S)

AMERICAN CHEMICAL SERVICES (Hauler Name) | 4205 COLFAX AVE GRIFFIN IND (Hauler Address)
S.W.H. Registration Number 00240001 25 31
ILT000646810

STRAND TRUCKING (Hauler Name) | 13642 KENTON CRESTWOOD ILL 60445 (Hauler Address)
S.W.H. Registration Number ____ 32 38

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICES (Facility Name) | 4205 COLFAX AVE (Address)
9180890 2 39 46 Site Number
GRIFFIN (City) | IND. (State) | 46319 (Zip)
IND 016360765

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE 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:	WEIGHT FOR D.O.T. USE (LBS / TONS circle one)
TRUCK	FLAMMABLE	EST 9 FGAL LBS / TONS EST 19.80 TONS

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. 80

QUANTITY OF WASTE DELIVERED: 00440 (47 – 52)

1 GALLONS (Circle One)
2 CU. YDS. 1 (53)

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.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 3-23-82 E. Gracia (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) PLACARD OFFERED OR AFFIXED ✓ INITIAL _____ DATE: 323 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:

(1) _____ (Authorized Signature) DATE: 3 23 82 (60 – 65)

COMMENTS OR SPECIAL INSTRUCTIONS: MSD# 099645 DOT NA 1993
DESCRIPTION OF RECYCLE MATERIALS FOR5 FOR5 FOR7

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-880

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

On dock 3/23/82 GRM
To 125RT-636RM 3/25/82

SITE COPY - PART 3

003746

COMPLETED BY GENERATOR

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0297340

Authorization Number 998475 13

USEPA ILT 1800011868

RHEEM MFG Co. CONTAINER DIV. | 7600 S. KEDZIE AVE | CHICAGO | ILL. | 60612
(Company Name) | Address | City | State | Zip

03160000089 G
14 Generator Number 24

WASTE HAULER(S) 312-434-7500.

AMERICAN CHEMICAL SERVICES | 4205 COLFAX AVE GRIFFITH, IND | S.W.H. Registration Number 0024/002
Hauler Name | Hauler Address | 25 31

ILT0006468 10

STRAND TRUCKING | 13642 KENTON CRESTWOOD, ILL 60445 | S.W.H. Registration Number 32 38
Hauler Name | Hauler Address

DESTINATION – DISPOSAL STORAGE OR TREATMENT ST 312 768-3400

AMERICAN CHEMICAL SERVICES | 4205 COLFAX AVE | 91808902
(Facility Name) | Address | 39 Site Number 46

GRIFFITH | IND | 46319 | IND 016360265
City | State | Zip

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE 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: TRUCK
HAZARD CLASS: FLAMMABLE

WEIGHT FOR D.O.T. USE EST 9# GALS LBS / TONS (circle one) EST 19.80 TONS

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL 38,080 lb

QUANTITY OF WASTE DELIVERED: 004400 (47–52)

1/2 GALLONS (Circle One) / CU. YDS. 1 (53)

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.

F001

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 5/14/82 Major Rose (Authorized Signature) 80 Drs

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) Stan Strand (Authorized Signature) PLACARD OFFERED OR AFFIXED INITIAL DATE: 5/14/82 (54)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO X

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

Michael C. Davis (Authorized Signature) DATE: 5/14/82 (60)

COMMENTS OR SPECIAL INSTRUCTIONS: MSD# 099649 DOT NA 1993
DESCRIPTION OF RECYCLE MATERIALS FROM FMS F017

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8

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

On dock 5.14.82 GRM
To 126K T-63 GRM 5.18.82

SITE COPY - PART 3

0037.4

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

0297341

Authorization Number 998475
USE PA# ILT180011867

RHEEM MFG Co. CONTAINER DIV. 7600 S. KEDZIE AVE 312 434-7500
(Company Name) Address

CHICAGO ILL. 60612
City State Zip

031 600008 9 G
14 Generator Number 24

WASTE HAULER(S)

AMERICAN CHEMICAL SERVICES 4205 COLFAX AVE S.W.H. Registration Number X 0 2 4 / 0 0 2
Hauler Name Hauler Address 25 31

13642 KENTON 312-385-8440 ILT000646810

STRAND TRUCKING CRESTWOOD ILL 60445 S.W.H. Registration Number
Hauler Name Hauler Address 32 38

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE 312-768-3400

AMERICAN CHEMICAL SERVICES 4205 COLFAX AVE 9 1 8 0 8 9 0 2
(Facility Name) Address 39 Site Number 46

GRIFFITH IND 46319 IND 016360265
City State Zip

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINT/SOLVENTS WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

1993

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: TRUCK HAZARD CLASS: FLAMMABLE

WEIGHT FOR D.O.T. USE EST 9# GAL LBS EST 11.38 TONS (circle one) TONS

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL X 22.770

QUANTITY OF WASTE DELIVERED: X 0 0 2 5 3 0
47 52

1 GALLONS (Circle One)
2 CU. YDS. 1
53

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.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: X 6/22/82 X Mayo Rosa
(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) Stan Shaw (Authorized Signature) PLACKARD OFFERED OR AFFIXED DATE: X 6 / 22 / 82
54

(2) _____ (Authorized Signature) INITIAL X _____ 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 C Bies X DATE: 6 / 22 / 82
(Authorized Signature) 60

COMMENTS OR SPECIAL INSTRUCTIONS: MSD# 099649 DOT NA1993
DESCRIPTION OF RECYCLE MATERIALS F003 F005 F017

IN ILLINOIS: 217 / 782-3637 **24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*** OUTSIDE ILLINOIS: 800 / 424-88

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

To 124K T-63 6KM 6-22-82

SITE COPY - PART 3

003149

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

0297342 (1–7)

Authorization Number ~~[illegible]~~ (8–13)

RHEEM MFG Co. CONAINER DIV 7600 S. KEDZIE AVE
(Company Name) Address

CHICAGO — City
ILL — State
606.52 — Zip

031600000 89 G
14 Generator Number 24

WASTE HAULER(S)

AMERICAN CHEMICAL SERVICES 4205 COLFAX AVE
Hauler Name — Hauler Address
S.W.H. Registration Number XO 024/001 (25–31)

13642 KENTON - 312-385-4440 ILT000646810

STRAND TRUCKING — Hauler Name
CREST WOOD Ill. 60445 — Hauler Address
S.W.H. Registration Number ——— (32–38)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE:

AMERICAN CHEMICAL SERVICES 4205 COLFAX AVE 768-3400
(Facility Name) Address
9 1 8 0 8 9 0 2 (39–46) Site Number

GRIFFITH — City
IND — State
46319 — Zip
IND. 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE 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: TRUCK
HAZARD CLASS: FLAMMABLE

WEIGHT FOR D.O.T. USE: EST 9 #GAL (LBS) TONS (circle one) EST 13.11 TONS

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL: 20.23

QUANTITY OF WASTE DELIVERED: X 0 0 2 9 1 5 (47–52)

(1) GALLONS (Circle One) 2 CU. YDS. 1 (53)

METHOD OF SHIPMENT (Circle One): (DRUMS) 53 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.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

X DATE: 8/12/82

X Major Kovel Jr
(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) Stan Strum X — (Authorized Signature)
PLACKARD OFFERED
ORAFFIXED
INITIAL X
X DATE: 8-12-82 (54)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

Michael F Burg
(Authorized Signature)
DATE: 8/12/82 (60)

COMMENTS OR SPECIAL INSTRUCTIONS: MSD # 099649 DOT NA1993
DESCRIPTION OF RECYCLE MATERIALS F003 F005 F017

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8

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

To 126 F T-63 Gal 8/12/82

SITE COPY - PART 3

003750

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

0297343

Authorization Number ~~[illegible]~~

RHEEM MFG CO, CONAINER DIV. 7600 So. KEDZIE AVE
(Company Name) Address

CHICAGO | ILL | 60652
City | State | Zip

0316000089 G
Generator Number

WASTE HAULER(S)

AMERICAN CHEMICAL SERVICES 4205 COLFAX AVE 312-385-
Hauler Name | Hauler Address

S.W.H. Registration Number X0024002
IL ~~[illegible]~~ 1800011868

STRAND TRUCKING | 13642 KENTON CRESTWOOD ILL 60445 8440
Hauler Name | Hauler Address

S.W.H. Registration Number

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE 312-768-3400

AMERICAN CHEMICAL SERVICES 4205 COLFAX AVE.
(Facility Name) Address

9 18 08 9 02
Site Number

GRIFFITH | IND | 46319
City | State | Zip

IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE 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: TRUCK, ~~[illegible]~~ DIRTY

HAZARD CLASS: FLAMMABLE

WEIGHT FOR D.O.T. USE: EST 9 LBS 1856 TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL: X 37,125

QUANTITY OF WASTE DELIVERED: X 0 0 4 1 2 5

Q GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) (DRUMS) 75 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.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: X 9/20/82

X [signature] (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) X

PLACARD OFFERED
OR AFFIXED
Initial X

DATE: X 9 20 82

(2) _____ (Authorized Signature)

DATE: ___ ___ ___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

[signature] (Authorized Signature)

DATE: X 9 20 82

COMMENTS OR SPECIAL INSTRUCTIONS: MSD# 09649 DOT NA1993
DESCRIPTION OF RECYCLE MATERIALS F003 F005 F017

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8

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

TO 124 E T-63 GRM 9.20.82

SITE COPY - PART 3

003751

BE COM. ED BY
WASTE GENE

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0297344

Authorization Number [redacted]

RHEEM MFG CO. CONAINER DIV 7600 So. KEDZIE AVE
(Company Name) Address

CHICAGO | ILL. | 60652
City | State | Zip

0316000089 G
Generator Number

WASTE HAULER(S)

AMERICAN CHEMICAL SERVICES 4205 COLFAX AVE 312-345-8440
Hauler Name Hauler Address

S.W.H. Registration Number [illegible]

STRAND TRUCKING | 13642 KENTON CRESTWOOD ILL. 60445
Hauler Name | Hauler Address

ILD000646810
S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICES 4205 COLFAX AVE
(Facility Name) Address

91808902
Site Number

GRIFFITH | IND | 46319
City | State | Zip

IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE 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: TRUCK DIRTY SOLVENT
HAZARD CLASS: FLAMMABLE
WEIGHT FOR D.O.T. USE: EST 9# GAL LBS / 18.31 TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL 36,630
QUANTITY OF WASTE DELIVERED: 004070
(1) GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) (DRUMS) 74 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.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 11/10/82 Major Rose
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION [illegible] WLEDGE THE DESTINATION AS INDICATED.

(1) Stan Strand
(Authorized Signature)

PLACKARDED DRAFFIXED INITIALX

4070 gal

DATE: 11/10/82

(2) _____
(Authorized Signature)

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

YES ___ NO X

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

Michael Perez
(Authorized Signature)

DATE: 11/10/82

COMMENTS OR SPECIAL INSTRUCTIONS: MSD F099649 DOT NA1993
DESCRIPTION OF RECYCLE MATERIALS F003 F005 F017

IN ILLINOIS: 217 / 782-3637 **24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*** OUTSIDE ILLINOIS: 800 / 424-88

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

62 To 125K T-63 GRN
12 To Solid Mix T-50 GRN 11-10-82

SITE COPY - PART 3

003754

METROPOLITAN SANITARY DISTRICT OF GREATER CHICAGO
100 EAST ERIE STREET • CHICAGO, IL 60611
INDUSTRIAL WASTE DIVISION (312) 751-5697

NO. 099659

INDUSTRIAL WASTE/SLUDGE GENERATION, SHIPMENT AND DISPOSAL RECORD

TYPE OF WASTE ▶ [X] LIQUID [ ] SLUDGE [ ] SOLID
TYPE OF CONTAINER ▶ [ ] BULK (TANK TRUCK) [X] DRUMS [ ] OTHER (SPECIFY)
VOLUME 2695 GALS / CU. YDS. / LBS.

WASTE CONTAINS:

[ ] FATS, OILS OR GREASE [ ] CYANIDE [ ] COPPER [ ] NICKEL [ ] MERCURY
[ ] ACID [ ] ZINC [ ] CHROME [ ] LEAD [X] SOLVENTS [ ] OTHER (SPECIFY)
[ ] ALKALI [ ] CADMIUM [ ] IRON [ ] SELENIUM [ ] PAINT RESIDUE

DISPOSAL METHOD ▶ [ ] LANDFILL [ ] DESTRUCTION (SPECIFY) [X] OTHER (SPECIFY) RECLAIMING

NAME OF COMPANY: RHEEM MANUFACTURING COMPANY - CONTAINER DIVISION
FEDERAL TAX I. D. NUMBER: 9 4 0 8 0 3 3 3 0
LOCATION: 7600 SO. KEDZIE AVENUE, CHICAGO, ILL. 60652
FEDERAL GENERATOR I. D. NUMBER: ILD980794986
TYPE OF INDUSTRY: STEEL SHIPPING CONTAINER
DATE REMOVED: 5-24-93
TIME REMOVED: 0945

I certify that the described waste, in the designated volume, was removed from this location by the contractor named below for legal disposal.

SIGNATURE OF AUTHORIZED AGENT AND TITLE: Major Rose
PHONE: 434-7500

NAME: AMERICAN CHEMICAL SERVICES
FEDERAL TAX I. D. NUMBER:
ADDRESS: P. O. BOX 190-4205 SO. COLFAX AVE., GRIFFITH, INDIANA
DATE RECEIVED: 5-24-93
TIME RECEIVED: 0945

FEDERAL HAULER I. D. NUMBER: 0024/002
STATE: IND
TRUCK LICENSE NO.: 54059

I certify that the described waste, in the designated volume, was removed from the above location and delivered to the disposal site designated below.

SIGNATURE OF CONTRACTOR'S AGENT AND TITLE: Jim Hutton Driver
PHONE: 385-8440

DISPOSAL SITE

NAME: AMERICAN CHEMICAL
FEDERAL TAX I. D. NUMBER: 35 5D96 1 1 7 2 3
ADDRESS: GRIFFITH IN
FEDERAL DISPOSAL SITE I. D. NUMBER: IND 0 1 3 6 4 0 8 6 5
DATE RECEIVED: 5/24/93
TIME RECEIVED:

I certify that the above named contractor delivered the described waste, in the designated volume to this facility and same was received for lawful disposition as designated.

SIGNATURE OF OPERATOR AND TITLE: Michael Gray
PERMIT NO.: 998475
PHONE: (219) 924-8370

DISPOSAL SITE'S COPY

STATE OF ILLINOIS

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

0297345

Authorization Number 998475

TO BE COMPLETED BY WASTE GENERATOR

Rheem MFG. Co. Container Div. 7600 So. Kedzie Ave
(Company Name) Address
Chicago Ill 60652
City State Zip

0316000089 G
Generator Number

WASTE HAULER(S)

American Chemical Services 4205 Colfax Ave
Hauler Name Hauler Address
13642 Renton
S.W.H. Registration Number X0024/001

Strand Trucking Crestwood Ill. 60445 (312) 385-8440
Hauler Name Hauler Address
S.W.H. Registration Number ILT0006161

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Services 4205 Colfax Ave (317) 924-3400
(Facility Name) Address
Griffith Ind 46319
City State Zip
Site Number 91808902
IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE 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: TRUCK DIRTY SOLVENTS
HAZARD CLASS: FLAMMABLE UN 1993
WEIGHT FOR D.O.T. USE ESTIMATE (LBS) 15.59 TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. 31185
QUANTITY OF WASTE DELIVERED: X003465
(1) GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) (DRUMS) 63 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.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: X 1/18/83 X Mayon Rose
(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) X [signature] (Authorized Signature) PLACKARD OFFERED DRAFFIXED INITIAL X
DATE: X 1/18/83

(2) (Authorized Signature)
DATE:

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

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

X [signature] (Authorized Signature)
DATE: 1/19/83

COMMENTS OR SPECIAL INSTRUCTIONS: MSD #099649 DOT NA1993
DESCRIPTION OF RECYCLE MATERIALS F003 F005 F017

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 2047 KT-506 EM 2.9.83

SITE COPY - PART 3

006092

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

0297346

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 998475

RHEEM MFG CO CONTAINER DIV. 7600 SOKEDZIE AVE
(Company Name) Address
CHICAGO | ILL | 60652
City | State | Zip

0316000089 G
Generator Number

WASTE HAULER(S)

AMERICAN CHEMICAL SERVICES 4205 COLFAX AVE
Hauler Name | Hauler Address
S.W.H. Registration Number X 0024002
13642 KENTON
ILD980794986

STRAND TRUCKING CRESTWOOD ILL 60445
Hauler Name | Hauler Address
S.W.H. Registration Number ILT 0006421

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICES 4205 COLFAX
(Facility Name) Address
GRIFFITH | IND | 46319
City | State | Zip

9180890 2
Site Number
IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE 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: TRUCK DIRTY SOLVENTS
HAZARD CLASS: FLAMMABLE
WEIGHT FOR D.O.T. USE: EST 9 GAL (LBS) TONS (circle one) 12.62

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL 25,245.
QUANTITY OF WASTE DELIVERED: X 002805
GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One): (DRUMS) 51 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.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: X 2/24/83 X Mayer Rose (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) Steve Strand X (Authorized Signature) PLACARD OFFERED DRAFFIXED INITIALX DATE: X 2 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 SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

X (Authorized Signature) DATE: 2 24 83

COMMENTS OR SPECIAL INSTRUCTIONS: MSD #099649 DOT NA1993
DESCRIPTION OF RECYCLE MATERIALS F003 F005 F017

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 124 TK T-63 6PM 2-24-83

SITE COPY - PART 3

000191

STATE OF ILLINOIS

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

0297347

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 82184275

KHEEM MFG. CO CONAINER DIV. 7600 So. KEDZIE AVE (Company Name / Address)
CHICAGO (City) ILL. (State) 60652 (Zip)

0316000089 G (Generator Number)

WASTE HAULER(S)

AMERICAN CHEMICAL SERVICES 4205 COLFAX AVE (Hauler Name / Hauler Address) 13642 KENTON
S.W.H. Registration Number ILD980794986

STRAND TRUCKING CRESTWOOD ILL. 60445 (Hauler Name / Hauler Address)
S.W.H. Registration Number 0024/002

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICES 4205 COLFAX (Facility Name / Address)
GRIFFITH (City) IND (State) 46319 (Zip)
Site Number 91808902
IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINT/SOLVENTS
WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

1993

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: TRUCK DIRTY SOL.
HAZARD CLASS: FLAMMABLE
F005
WEIGHT FOR D.O.T. USE EST 9 GAL # (LBS) TONS (circle one)
1089

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL 9178
QUANTITY OF WASTE DELIVERED: X0 02430
(1) GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) (DRUMS) 44 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.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: X 3/31/83
x Major Rose (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) Stan Strand X (Authorized Signature) PLACKARD OFFERED DRAFFIXED DATE: X 3/31/83

(2) _____ (Authorized Signature) INITIAL X _____ 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'Dwyer X (Authorized Signature) DATE: 3 31 83

COMMENTS OR SPECIAL INSTRUCTIONS: MSD # 099649 DOT NA 1993
DESCRIPTION OF RECYCLE MATERIALS F003 F005 F017

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 126 R T-63 On dock 3-31-83
6124 4-4-83

SITE COPY - PART 3

006090

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

0297348 (1–7)

Authorization Number 998475 (8–13)

RHEEM MFG. CO CONAINER DIV (Company Name) | 7600 So. KEDZIE AVE (Address)

CHICAGO (City) | ILL (State) | 60652 (Zip)

0316000089 G (14–24) Generator Number

WASTE HAULER(S)

AMERICAN CHEMICAL SERVICES (Hauler Name) | 4205 COLFAX AVE (Hauler Address) | S.W.H. Registration Number ILD980794986 (25–31)

STRAND TRUCKING (Hauler Name) | CRESTWOOD ILL 60445 (Hauler Address) | S.W.H. Registration Number + 0241 (32–38)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SEVICES (Facility Name) | 4205 COLFAX (Address) | 9180890 2 (39–46) Site Number

GRIFFITH (City) | IND (State) | 46319 (Zip) | IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE 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: TRUCK DIRTY SOL | HAZARD CLASS: FLAMMABLE | WEIGHT FOR D.O.T. USE EST 9 GAL P 1083 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL: 3366

QUANTITY OF WASTE DELIVERED: 003740 (47–52) | (1) GALLONS (Circle One) 2 CU. YDS. 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS) 68 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.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: + 5/23/83 | x Major Rose ✓ (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) x (Authorized Signature) | PLACKARD OFFERED DRAFFIXED | DATE: 5 23 83 (54–59)

(2) (Authorized Signature) | INITIALX | 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: 5 23 83 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: MSDH 099649 DOTANA 1993
DESCRIPTION OF RECYCLE MATERIALS F003 F005 F017

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 124 RT-63 GRAY 3-23-83

SITE COPY - PART 3

006093

STATE OF ILLINOIS

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

0297349

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number [illegible]

RHeem MFG. Co. Conainer DIV | 7600 So. Kedzie Ave | Chicago | Ill | 60652
(Company Name) | Address | City | State | Zip

031 600008 9 G
Generator Number

WASTE HAULER(S)

AMERICAN Chemical SERVICES | 4205 Colfax Ave
Hauler Name | Hauler Address

S.W.H. Registration Number IL0 000 714 258

STRAND TRUCKING | CRESTWOOD Ill 60445
Hauler Name | Hauler Address

S.W.H. Registration Number IID 000646810

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN Chemical Sevices | 4205 Colfax | GRIFFITH | IND | 46319
(Facility Name) | Address | City | State | Zip

9 180 890 2
Site Number

IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE 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:
TRUCK	Flammable
Dirty Sol	UN1993

WEIGHT FOR D.O.T. USE Est 9 GAL (LBS) TONS (circle one) 4,90

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. 1980

QUANTITY OF WASTE DELIVERED: 002100 LD

(1) 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.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 7/20/83 X [signature] (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] X (Authorized Signature) PLACKARD-OFFERED DRAFFIXED INITIALX DATE: X 7/20/83

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO X

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

[signature] (Authorized Signature) DATE: 7 20 83

COMMENTS OR SPECIAL INSTRUCTIONS: MSD#099649 DOT NA1993
DESCRIPTION OF RECYCLE MATERIALS F003 F005 F017

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 124 ET-63 GWM 7 22 83

SITE COPY - PART 3

006196

..PLETED 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

0297350
1 7

Authorization Number 9 9 8 4 7 5
8 13

RHEEM MANUFACTURING CO., 7600 SO. KEDZIE AVE.
(Company Name) CONTAINER DIV. Address

0 3 1 6 0 0 0 0 8 9 G
14 Generator Number 24

CHICAGO ILLINOIS 60652
City State Zip

WASTE HAULER(S)

AMERICAN CHEMICAL SERVICES 4205 COLFAX AVE. (312) 768-3400
Hauler Name Hauler Address S.W.H. Registration Number 0 0 2 4 / 0 0 2
25 31

STRAND TRUCKING CRESTWOOD, ILL. 60445 ILD 000646810
Hauler Name Hauler Address 313-385-8410 S.W.H. Registration Number [redacted]
32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICES 4205 COLFAX 9 1 8 0 8 9 0 2
(Facility Name) Address 39 Site Number 46

GRIFFITH INDIANA 46319 IND. 016360265
City State Zip

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE 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:	WEIGHT FOR D.O.T. USE
TRUCK	FLAMMABLE	EST 9 GAL LBS / TONS (circle one)
DIRTY SOLVENT	UN 1993	12.127

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL 24.25. QUANTITY OF WASTE DELIVERED: 0 0 2 6 9 5 (47–52)

1 GALLONS (Circle One)
2 CU. YDS. 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS) 49 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.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 8/24/83 Major Rose
(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) Jon Batten (Authorized Signature) PLACARD OFFERED OR AFFIXED DATE: 8 / 24 / 83 (54–59)

(2) _____ (Authorized Signature) INITIAL J.B. 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 P. Burns
(Authorized Signature) DATE: 8/24/83 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: MSO #099649 DOT NA 1993

DESCRIPTION OF RECYCLE MATERIALS F003 F005 F017

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 124 R T-636 RM 8.24.83

SITE COPY - PART 3

006072

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0297351

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 9 9 8 4 7 5

RHEEM MANUFACTURING CO., 7600 SO. KEDZIE AVE.
(Company Name) CONTAINER DIV. Address

0 3 1 6 0 0 0 0 8 9 G
Generator Number

CHICAGO | ILLINOIS | 60652
City | State | Zip

WASTE HAULER(S)

AMERICAN CHEMICAL SERVICES | 4205 COLFAX AVE.
Hauler Name | Hauler Address

S.W.H. Registration Number 0 3 1 L / 0 1 2

STRAND TRUCKING | CRESTWOOD, ILL. 60445
Hauler Name | Hauler Address

S.W.H. Registration Number ILD 9 8 0 7 9 4 9 8 6

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICES | 4205 COLFAX
(Facility Name) | Address

9 1 8 0 8 9 0 2
Site Number

GRIFFITH | INDIANA | 46319
City | State | Zip

IND. 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE 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:	WEIGHT FOR D.O.T. USE
TRUCK	FLAMMABLE	EST 9 GAL 10.39 LBS / TONS (circle one)
DIRTY SOLVENT	UN1993	

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. 20,790

QUANTITY OF WASTE DELIVERED: 0 0 2 3 1 0

1 GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) DRUMS 42 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.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 10/20/83 Major Rose
(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) R. Turbull
(Authorized Signature) PLACARD OFFERED OR AFFIXED DATE: 10 20 83

(2) _____
(Authorized Signature) INITIAL _____ 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: 10/20/83

COMMENTS OR SPECIAL INSTRUCTIONS: MSD #099649 DOT NA 1993

DESCRIPTION OF RECYCLE MATERIALS F003 F005 ~~F017~~

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 124 TF-50 GRW4 20-2283 SITE COPY - PART 3

006070

STATE OF ILLINOIS

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

0297352

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 99 8475

RHEEM MANUFACTURING CO., (Company Name) CONTAINER DIV. | 7600 SO. KEDZIE AVE. (Address)
CHICAGO (City) | ILLINOIS (State) | 60652 (Zip)
0 316 000 089 G — Generator Number

WASTE HAULER(S)

AMERICAN CHEMICAL SERVICES (Hauler Name) (312)768-3400 | 4205 COLFAX AVE. (Hauler Address) GRIFFITH, IN.
S.W.H. Registration Number 0024/002

STRAND TRUCKING (Hauler Name) | CRESTWOOD, ILL. 60445 (Hauler Address) 312 385-8440
S.W.H. Registration Number ILD 980 794 986 ILD000624/6810

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICES (Facility Name) | 4205 COLFAX (Address)
GRIFFITH (City) | INDIANA (State) | 46319 (Zip)
9 18 089 02 — Site Number
IND. 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE 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:
TRUCK	FLAMMABLE
DIRTY SOLVENT	UN1993

WEIGHT FOR D.O.T. USE: EST 9 GAL 10.89 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL 21780

QUANTITY OF WASTE DELIVERED: 002420

1 GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One): (DRUMS) 44 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.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 12/12/83 — Maja Rose (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) Jim Batten (Authorized Signature) — PLACARD OFFERED OR AFFIXED — DATE: 12/12/83
(2) _____ (Authorized Signature) — INITIAL J. B. — DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO ✓

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

_____ (Authorized Signature) — DATE: 12/13/83

COMMENTS OR SPECIAL INSTRUCTIONS: MSD #099649 DOT NA 1993
DESCRIPTION OF RECYCLE MATERIALS F003 F005 F017

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 124 F T-63 GRM 12.13.83

SITE COPY - PART 3

006089

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

0297354 (1–7)

Authorization Number 998475 (8–13)

RHEEM MANUFACTURING CO., (Company Name) CONTAINER DIV. — 7600 SO. KEDZIE AVE. (Address)
CHICAGO (City) — ILLINOIS (State) — 60652 (Zip)

0316 000 089 G (14–24) Generator Number

WASTE HAULER(S)

AMERICAN CHEMICAL SERVICES (Hauler Name) — 4205 COLFAX AVE. (Hauler Address)
S.W.H. Registration Number 0024/002 (25–31)

STRAND TRUCKING (Hauler Name) — CRESTWOOD, ILL. 60445 (Hauler Address)
ILD 000646810 [redacted] (32–38) S.W.H. Registration Number

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICES (Facility Name) — 4205 COLFAX AVE. (Address)
918 089 02 (39–46) Site Number

GRIFFITH (City) — INDIANA (State) — 46319 (Zip)
IND. 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE 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:	WEIGHT FOR D.O.T. USE
TRUCK	FLAMMABLE	EST 9 GAL 7.42 LBS / TONS (circle one)
DIRTY SOLVENT	UN1993	

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL: 14850

QUANTITY OF WASTE DELIVERED: 001650 (47–52)

1 GALLONS (Circle One) / 2 CU. YDS. 1 (53)

METHOD OF SHIPMENT (Circle One): (DRUMS) 30 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.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 3/15/84 — Major Rose (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) Jim Batt (Authorized Signature) — PLACARD OFFERED OR AFFIXED — INITIAL J. B. — DATE: 3/15/84 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO X

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

Michael A. Bruno (Authorized Signature) — DATE: 3/15/84 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: MSD #099649 DOT NA 1993
DESCRIPTION OF RECYCLE MATERIALS F003 F005 ~~F017~~

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

27 to 126 ET-63
3 to 204 ET-50

SITE COPY - PART 3

007253

COMPLETED BY GENERATOR

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

0297353

Authorization Number 998475

RHEEM MANUFACTURING CO., (Company Name) CONTAINER DIV. | 7600 SO. KEDZIE AVE. (Address) | CHICAGO (City) | ILLINOIS (State) | 60652 (Zip)

0 316 000 089 G (Generator Number)

WASTE HAULER(S)

AMERICAN CHEMICAL SERVICES (Hauler Name) | 4205 COLFAX AVE. (Hauler Address) (312) 768-3408 | S.W.H. Registration Number 0024/001

STRAND TRUCKING (Hauler Name) | CRESTWOOD, ILL. 60445 (Hauler Address) 312) 385-8440 | ILD 000647858 S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICES (Facility Name) | 4205 COLFAX (Address) | GRIFFITH (City) | INDIANA (State) | 46319 (Zip)

918 089 02 (Site Number)

IND. 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE 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:
TRUCK	FLAMMABLE
DIRTY SOLVENT	UN1993

WEIGHT FOR D.O.T. USE: EST 9 GAL 11.13 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL 22275

QUANTITY OF WASTE DELIVERED: 00247 5

(1 GALLONS) (2 CU. YDS.) (Circle One) 1

METHOD OF SHIPMENT (Circle One) (DRUMS) 45 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.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION:

DATE: 2/2/84 Major Rose (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) Jim Butler (Authorized Signature) PLACARD OFFERED OR AFFIXED INITIAL J. B. DATE: 2/2/84

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES: NO: X

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

Michael O'Brien (Authorized Signature) DATE: 2/2/84

COMMENTS OR SPECIAL INSTRUCTIONS: MSD #099649 DOT NA 1993

DESCRIPTION OF RECYCLE MATERIALS F003 F005 F007

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 12677-63 GRN 2.2.84

SITE COPY - PART 3

007252

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

0436997 (1–7)

Authorization Number 998475 (8–13)

RHEEM MANUFACTURING CO. (Company Name) CONTAINER DIV. | 7600 S. KEDZIE AVE. (Address) | 312-434-7500 (Phone Number) | 0316000089 G (14 Generator Number 24)

CHICAGO (City) | IL (State) | 60652 (Zip) | ILD980794986 (EPA Number)

WASTE HAULER(S)

STRAND TRUCKING (Hauler Name) | CRESTWOOD, IL 60445 (Hauler Address) | S.W.H. Registration Number 0024002 (25–31)

312-385-8440 (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 SERVICES - 4205 COLFAX (Facility Name) (Address) | 91808902 (39–46 Site Number)

GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | 312-768-3400 (Phone Numbe) | 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/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: DIRTY SOLVENT | HAZARD CLASS: FLAMMABLE | UN1993 (UN or NA Number) | D001 (EPA HW Number)

WEIGHT FOR D.O.T. USE: EST. 9 LBS /GAL / 10.39 TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. 20780 | QUANTITY OF WASTE DELIVERED: 00231 0 (47–52) | 1 GALLONS (Circle One) 2 CU. YDS. 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS 42 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 Major Rose (Authorized Signature) DATE: 6/14/84

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Jon Battle (Authorized Signature) PLACARD OFFERED OR AFFIXED DATE: 6/14/84 (54–59)

(2) (Authorized Signature) INITIAL J.B. 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: 6/14/84 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: MSD #099665 DOT NA1993

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

126 R - 30 Rw
204 R 12 Br.

007265

ATE 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 9 8 0 7 9 4 8 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
Rheem Manufacturing Co., Container Division
7600 S. Kedzie Avenue
Chicago, Ill. 60652

4. Generator's Phone (312) 434-7500

A. Illinois Manifest Document Number: IL 1120606

B. Illinois Generator's ID: 0 3 1 6 0 0 0 0 8 9

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 9 7 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 Services
4205 Colfax
Griffith, Indiana 46319

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

G. Illinois Facility's ID: 9 1 8 0 8 9 0 0 0 2

H. Facility's Phone (312) 768-3400

GENERATOR

	HM	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	X	UN 1993 Flammable Liquid N.O.S.	5D	DM	2750	1	EPA HW Number: D 0 0 1 Authorization Number: 9 9 8 4 7 5
b.							EPA HW Number: Authorization Number:
c.							EPA HW Number: Authorization Number:
d.							EPA HW Number: Authorization Number:

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information MSD #099667
Destroy labels on drums after emptying.
Placard offered or affixed [illegible] initial

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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: Major Rose | Signature: Major Rose | Date: Month 9 Day 27 Year 84

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: JIM BATTEN | Signature: Jim Batten | Date: Month 9 Day 27 Year 84

18. Transporter 2 Acknowledgement or Receipt of Materials

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

FACILITY

19. Discrepancy Indication Space

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

Printed/Typed Name: MICHAEL O. BURKE | Signature: Michael O. Burke | Date: Month 10 Day 7 Year 84

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV.# 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½ Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

204 ET-50 V

051250

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

0297355

Authorization Number ~~9 9 8 4 7 5~~

RHEEM MANUFACTURING CO., (Company Name) CONTAINER DIV. | 7600 SO. KEDZIE AVE. (Address)
CHICAGO (City) | ILLINOIS (State) | 60652 (Zip)

0 3 16 0 0 0 0 8 9 — Generator Number

WASTE HAULER(S)

AMERICAN CHEMICAL SERVICES (Hauler Name) | 4205 COLFAX AVE. (Hauler Address) | S.W.H. Registration Number 0 0 2 4 / 0 0 2

STRAND TRUCKING (Hauler Name) | CRESTWOOD, ILL. 60445 (Hauler Address) | ILD S.W.H. Registration Number 9 8 0 7 9 4 9 8 6

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICES (Facility Name) | 4205 COLFAX AVE. (Address) | 9 1 8 0 8 9 0 2 Site Number

GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | IND. 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE 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:	WEIGHT FOR D.O.T. USE
TRUCK	FLAMMABLE	EST 9 GAL LBS / TONS (circle one)
DIRTY SOLVENT	UN1993	x 12.37

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL 24750 | QUANTITY OF WASTE DELIVERED: 002750 (47–52) | 1 GALLONS (Circle One) 2 CU. YDS. 1 (53)

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.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 4/30/84 | Major Rose (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) W. B. Wilma (Authorized Signature) | PLACARD OFFERED OR AFFIXED INITIAL JC | DATE: 4/30/84 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

(Authorized Signature) | DATE: 5/2/84 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: MSD #099649 DOT NA 1993
DESCRIPTION OF RECYCLE MATERIALS F003 F005 ~~F017~~

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 124RT-536RM

SITE COPY - PART 3

007254

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

0436998

Authorization Number 998475

RHEEM MANUFACTURING CO. (Company Name) CONTAINER DIV. | 7600 S. KEDZIE AVE (Address) | 312-434-7500 (Phone Number) | 0316000089 G (Generator Number)

CHICAGO (City) | IL (State) | 60652 (Zip) | ILD980794986 (EPA Number)

WASTE HAULER(S)

STRAND TRUCKING (Hauler Name) | CRESTWOOD, IL 60445 (Hauler Address) | S.W.H. Registration Number 0024002

312-385-8440 (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 SERVICES - 4205 COLFAX (Facility Name) (Address) | 91808902 (Site Number)

GRIFFITH (City) | INDIANA (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: WASTE 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
DIRTY SOLVENT	FLAMMABLE	UN1993	D001

WEIGHT FOR D.O.T. USE: EST. 9 LBS /GAL, 8662. TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. 17325

QUANTITY OF WASTE DELIVERED: 001925 (1 GALLONS (Circle One) 2 CU. YDS. 1)

METHOD OF SHIPMENT (Circle One) (DRUMS 35 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 Mojo Rose (Authorized Signature) DATE: 8/6/84

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) Jim Butler (Authorized Signature) PLACARD OFFERED OR AFFIXED DATE: 8/6/84

(2) (Authorized Signature) INITIAL J.B. 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 8/6/84

COMMENTS OR SPECIAL INSTRUCTIONS: MID #099666 DOT NA 1993

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

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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.: I L D 9 8 0 7 9 4 9 8 6 — Manifest Document No.: 0 0 0 0 2

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
Rheem Manufacturing Co., Container Division
7600 S. Kedzie Ave,
Chicago, Il. 60652
4. Generator's Phone (312) 434-7500

A. Illinois Manifest Document Number: IL 1372535

B. Illinois Generator's ID: 0 3 1 6 0 0 0 0 8 9

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 Services
4205 Colfax
Griffith, Indiana 46319
10. US EPA ID Number: I N D 0 1 6 3 6 0 2 6 5

G. Illinois Facility's ID: 9 1 8 0 8 9 0 0 0 2

H. Facility's Phone (312) 768-3400

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
GENERATOR a.	UN 1993 Flamable Liquid N.O.S.	X	52	D M	2860-	1	EPA HW Number: D 0 0 1 Authorization Number: 9 9 8 4 7 5
b.							EPA HW Number: Authorization Number:
c.							EPA HW Number: Authorization Number:
d.							EPA HW Number: Authorization Number:

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information MSD. 099667
Destroy Labels on drums after emptying.

Placard offered or affixed - - Initial.

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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)
MAJOR Rose	Major Rose	10 28 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)
Leonard M Strand	Leonard M Strand	10 28 85

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)

FACILITY

19. Discrepancy Indication Space

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

Printed/Typed Name	Signature	Date (Month Day Year)
Michael O Burns		10 31 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

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15-204E T-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 8/87

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 9 8 0 7 9 4 9 8 6 Manifest Document No. 0 0 0 0 2

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
Rheem Manufacturing Co., Container Division
7600 S. Kedzie Ave.
Chicago, Il. 60652
4. Generator's Phone (312) 434-7500

A. Illinois Manifest Document Number IL 1120712

B. Illinois Generator's ID 0 3 1 6 0 0 0 0 8 9

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 Services
4205 Colfax
Griffith, Indiana 46319
10. US EPA ID Number: I N D 0 1 6 3 6 0 2 6 5

G. Illinois Facility's ID 9 1 8 0 8 9 0 0 0 2

H. Facility's Phone (312) 768-3400

GENERATOR

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	UN 1993 Flamable Liquid N.O.S.	X	31	DM	1705	1	EPA HW Number D001 Authorization Number 9981475
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 MSD. 099667
Destroy labels on drums after emptying.
Placard offered or affixed - - initial.

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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: MAJOR ROSE | Signature: Major Rose | Date: Month 8 Day 12 Year 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: THOMAS STRAND | Signature: Thomas Strand | Date: Month 8 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: MICHAEL O. BURGE | Signature | Date: Month 8 Day 12 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

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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.: I L D 9 8 0 7 9 4 9 8 6 — Manifest Document No.: 0 0 0 0 2

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
Rheem Manufacturing Co., Container Division
7600 S. Kedzie Ave.
Chicago, Il, 60652
4. Generator's Phone (312) 434-7500

A. Illinois Manifest Document Number: IL 1120610

B. Illinois Generator's ID: 0 3 1 6 0 0 0 0 8 9

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 Services
4205 Colfax
Griffith, Indiana 46319

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

G. Illinois Facility's ID:

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	15. Waste No.
a.	X	UN 1993 Flamable Liquid N.O.S.	26	D.M	1,430	1	EPA HW Number: D 0 0 1 Authorization Number: 9 9 8 4 7 5
b.							EPA HW Number: Authorization Number:
c.							EPA HW Number: Authorization Number:
d.							EPA HW Number: Authorization Number:

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information MSD. 099667
Destroy Labels on drums after emptying.
Placard offered or affixed - - initial.

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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: MAJOR Rose — Signature: Major Rose — Date (Month Day Year): 6 13 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: JAMES BATTEN — Signature: James Batten — Date (Month Day Year): 6 13 85

18. Transporter 2 Acknowledgement or Receipt of Materials

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

FACILITY

19. Discrepancy Indication Space

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

Printed/Typed Name: MICHAEL C. BURKE — Signature: Michael C. Burke — Date (Month Day Year): 6 14 85

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV. 5

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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. I L D 0 9 8 0 7 9 4 9 8 6 — Manifest Document No. 0 0 0 0 2 — 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
Rheem Manufacturing Co., Container Division
7600 S. Kedzie Avenue
Chicago, Il. 60652
4. Generator's Phone (312) 434-7500

A. Illinois Manifest Document Number: IL 1120609
B. Illinois Generator's ID: 0 3 1 6 0 0 0 0 8 9

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 Services
4205 Colfax
Griffith, Indiana 46319
10. US EPA ID Number: I N D 0 1 6 3 6 0 2 6 5
G. Illinois Facility's ID: 9 1 8 0 8 9 0 0 0 2
H. Facility's Phone (219) 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. UN 1993 Flamable Liquid N.O.S.	X	22	D M	1210	1	EPA HW Number: D 0 0 1 Authorization Number: 9 9 8 4 7 5
b.						EPA HW Number: Authorization Number:
c.						EPA HW Number: Authorization Number:
d.						EPA HW Number: Authorization Number:

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
MSD. 099667
Destroy Labels on Drums after emptying.
Placard offered or affixed - - initial.

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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: MAJOR ROSE — Signature: Major Rose — Date: Month 5 Day 1 Year 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JAMES BATICH — Signature: James Batich — Date: Month 5 Day 01 Year 85

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

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: MICHAEL R. BRUCE — Signature: Michael R. Bruce — Date: Month 5 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 IEPA PART - 6 GENERATOR

REV. 5

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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

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 9 8 0 7 9 4 9 8 6 — Manifest Document No. 0 0 0 0 2 — 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
Rheem Manufacturing Co., Container Division
7600 S. Kedzie Ave.
Chicago, Ill. 60652
4. Generator's Phone (312) 434-7500

A. Illinois Manifest Document Number: IL 1120607
B. Illinois Generator's ID: 0 3 1 6 0 0 0 0 8 9

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 1 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 Services
4205 Colfax
Griffith, Indiana 46319
10. US EPA ID Number: I N D 0 1 6 3 6 0 2 6 5
G. Illinois Facility's ID: 9 1 8 0 8 9 0 0 0 2
H. Facility's Phone: (312 768-3400

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
GENERATOR a.	UN 1993 Flammable Liquid N.O.S.	X	60	DM	3300	1	EPA HW Number: D 0 0 1 / Authorization Number: 9 9 8 4 7 5
b.							EPA HW Number / Authorization Number
c.							EPA HW Number / Authorization Number
d.							EPA HW Number / Authorization Number

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information HSD. 099667
Destroy labels on drums after emptying.
Placard offered or affixed _____initial.

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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)
Major Rose	S. M. Rose	1 2 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)
Leonard M Strand	Leonard M Strand	1 2 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)
Michael D Burd	Michael D Burd	1 2 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

4/5 - to 125 R T-63
4/5 - to 204 R T-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

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 9 8 0 7 9 4 9 8 6 — Manifest Document No. 0 0 0 0 2 — 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
Rheem Manufacturing Co., Container Division
7600 S. Kedzie Ave.
Chicago, Il. 60652
4. Generator's Phone (312) 434-7500

A. Illinois Manifest Document Number: IL 1120608
B. Illinois Generator's ID: 0 3 1 6 0 0 0 0 8 9

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 Services
4205 Colfax
Griffith, Indiana 46319
10. US EPA ID Number: I N D 0 1 6 3 6 0 2 6 5
G. Illinois Facility's ID: 9 1 8 0 8 9 0 0 0 2
H. Facility's Phone: (312) 768-3400

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	UN 1993 Flamable Liquid N.O.S.	X	46	D M	1530	1	EPA HW Number: D 0 0 1 Authorization Number: 9 1 9 6 4 7 5
b.							EPA HW Number Authorization Number
c.							EPA HW Number Authorization Number
d.							EPA HW Number Authorization Number

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information MSD. 099667
Destroy Labels on Drums after emptying.
Placard offered or affixed - initial.

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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: MAJOR Rose — Signature: Major Rose — Date (Month Day Year): 3 1 9 85

TRANSPORTER

17. Transporter 1. Acknowledgement of Receipt of Materials
Printed/Typed Name: JAMES BUTLER — Signature: James Butler — Date (Month Day Year): 3 19 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 D. Burns — Signature — Date (Month Day Year): 3 19 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

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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

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I L D 9 8 0 7 9 4 9 8 6 | Manifest Document No. 0 0 0 0 2

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
Rheem Manufacturing Co., Container Division
7600 S. Kedzie Ave.
Chicago, Il. 60652

4. Generator's Phone (312) 434-7500

A. Illinois Manifest Document Number: IL 1372536

B. Illinois Generator's ID: 0 3 1 6 0 0 0 0 0 8 9

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 Services
4205 Colfax
Griffith, Indiana 46319

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

G. Illinois Facility's ID: 9 1 8 0 8 9 0 0 0 2

H. Facility's Phone: (312) 768-3400

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
GENERATOR a.	UN 1993 Flamable Liquid N.O.S.	X	52	DM	2860	1	EPA HW Number: D 0 0 1 1 Authorization Number: 9 9 8 4 7 5
b.							EPA HW Number: Authorization Number:
c.							EPA HW Number: Authorization Number:
d.							EPA HW Number: Authorization Number:

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
MSD. 099667
Destroy Labels on drums after emptying.
Placard offered or affixed - - Initial.

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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)
MAJOR ROSE	Major Rose	1 29 86

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)
JAMES BATTA	James Batta	01 29 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)
M. CHARLES BURGO	M. Charles Burgo	01 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. 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 ✓

011943

METROPOLITAN SANITARY DISTRICT OF GREATER CHICAGO
100 EAST ERIE STREET • CHICAGO, IL 60611
INDUSTRIAL WASTE DIVISION (312) 751-5697

NO. 060638

INDUSTRIAL WASTE/SLUDGE GENERATION, SHIPMENT AND DISPOSAL RECORD

TYPE OF WASTE ▶ [✓] LIQUID [ ] SLUDGE [ ] SOLID
TYPE OF CONTAINER ▶ [ ] BULK (TANK TRUCK) [✓] DRUMS [ ] OTHER (SPECIFY) 34 Drums
VOLUME 1870 GALS / CU. YDS. / LBS.

WASTE CONTAINS:
[ ] FATS, OILS OR GREASE
[ ] ACID
[ ] ALKALI
[ ] MERCURY
[✓] OTHER (SPECIFY) Paint Sludge w/ Recycling 34 Drums

DISPOSAL METHOD ▶ [ ] LANDFILL [ ] [illegible] [✓] OTHER (SPECIFY) Recycling

NAME OF COMPANY RHEEM MFG. CO. W.H. DIV. Chicago Road
FEDERAL TAX I. D. NUMBER
LOCATION 7800 S. KEDZIE AVE CHICAGO ILL 60652
TYPE OF INDUSTRY MFG
DATE REMOVED 7-30-81
TIME REMOVED 11:45 AM

I certify that the described waste, in the designated volume, was removed from this location by the contractor named below for legal disposal.

SIGNATURE OF AUTHORIZED AGENT AND TITLE [signature] PURCHASING
PHONE 312-434-7500

CONTRACTOR

NAME STANDARD TRUCKING
FEDERAL TAX I. D. NUMBER
ADDRESS 13642 KINSTON CRESTWOOD ILL
DATE RECEIVED
TIME RECEIVED
WASTE HAULER'S REGISTRATION NO. 0024
STATE ILL
TRUCK LICENSE NO. 51657

I certify that the described waste, in the designated volume, was removed from the above location and delivered to the disposal site designated below.

SIGNATURE OF CONTRACTOR'S AGENT AND TITLE [signature]
PHONE 312-385-5440

NAME AMERICAN CHEMICAL SERV.
FEDERAL TAX I. D. NUMBER 350961783
ADDRESS 420 S. COLFAX AVE GRIFFITH, IND.
DATE RECEIVED 7/30/81
TIME RECEIVED

I certify that the above named contractor delivered the described waste, in the designated volume to this facility and same was received for lawful disposition as designated.

SIGNATURE OF OPERATOR AND TITLE [signature]
PERMIT NO. 79575
PHONE 219-924-4320

CONTRACTOR'S COPY

IEPA 031295

00353742

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

0588663

Authorization Number 9284276

W. N. Div

RHEEM MFG. CO (Company Name) | 7600 S. KEDZIE (Address) | 434-7500 (Phone Number) | 0316000089 G (Generator Number)

CHICAGO (City) | ILL (State) | 60652 (Zip) | ILD 001853308 (EPA Number)

WASTE HAULER(S)

STRAND TRUCKING (Hauler Name) | 13642 KENTON CRESTWOOD ILL (Hauler Address) | S.W.H. Registration Number 0024001

385-8440 (Phone Number) | ILT000646810 (EPA Number)

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

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEM (Facility Name) | 430 S. COLFAX (Address) | 91808902 (Site Number)

GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | 768-3400 (Phone Number) | IND016360205 (EPA Number)

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

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

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ORGANIC SOLVENT WASTE PHASE: (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN 1993 (UN or NA Number)	F005 (EPA HW Number)
DRUMS	F005		

WEIGHT FOR D.O.T. USE 7480 (LBS) TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 935 (47–52) (1) GALLONS (Circle One) 2 CU. YDS. (53)

METHOD OF SHIPMENT (Circle One) (DRUMS 17 (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 (Authorized Signature) DATE 11/18/83

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) (Authorized Signature) DATE 11/18/83 (54–59)

(2) (Authorized Signature) DATE / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

(Authorized Signature) DATE 1/18/83 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS MSD 151856 ROUTE TO RECLAIM/RECYCLE

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS 217 / 782-3637 OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

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

REV. # 3

SITE COPY - PART 3

TO 204 K 7-50 GAL 2 CU YD

003699

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

0242207

SPECIAL WASTE HAULING MANIFEST

Authorization Number [redacted]

W. H. DIV.
RHEEM MFG. CO (Company Name) | 7600 S. KEDZIE (Address)
CHICAGO (City) | 773-7500 | ILL (State) | 60652 (Zip)
0316000059 G (Generator Number)
ILD 001853308

WASTE HAULER(S)

STRAND TRUCKING (Hauler Name) | 13642 KENTON (Hauler Address) | CRESTWOOD ILL
0311012 S.W.H. Registration Number [redacted]
385-8440 (Hauler Address)
ILD000646810 S.W.H. Registration Number

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEM. (Facility Name) | 420 S. COLFAX (Address)
GRIFFITH (City) | INDIANA (State) | 46319 (Zip)
91808902 (Site Number)
IND016360265
768-3400

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ORGANIC SOLVENT WASTE PHASE: (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: UN 1993 FLAMMABLE LIQUID
HAZARD CLASS: FOOS
WEIGHT FOR D.O.T. USE 14,000 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.
QUANTITY OF WASTE DELIVERED: 1485
(GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) 27 (DRUMS) TANK TRUCK OPEN TRUCK (OTHER (Specify) UAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 8/19/83 (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) Jim Sutton (Authorized Signature) DATE: 8/19/83

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

Michael T. Dwyer (Authorized Signature) DATE: 8/19/83

COMMENTS OR SPECIAL INSTRUCTIONS: MSP 151862

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802

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

TO 204 KT-50 GRM 8.19.83

SITE COPY - PART 3

003673

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

0831933
1 — 7

Authorization Number [redacted] 8 — 13

W. H. DIV

RHEEM MFG Co (Company Name) | 7600 S KEDZIE (Address) | 434-7500 (Phone Number) | 0316000066 (14) G (24) Generator Number

CHICAGO (City) | ILL (State) | 60652 (Zip) | ILD001851330 (EPA Number)

WASTE HAULER(S)

STRAIGHTLINE (Hauler Name) | 1364 KINSTON (Hauler Address) | S.W.H. Registration Number 0024002 (25 — 31)

CARTHAGE ILL (Hauler Name) | 312-385-2410 (Phone Number) | ILR000626-16 (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 (Facility Name) | 420 S EGLEAX (Address) | 9L8086902 (39 — 46) Site Number

GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | 768-3400 (Phone Number) | IND000646810 (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: ORGANIC SOLVENT WASTE PHASE: (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
DRUM	FLAMMABLE	UN 1993	F005

WEIGHT FOR D.O.T. USE 4.50 (LBS / TONS (circle one))

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

QUANTITY OF WASTE DELIVERED: 1555 (47 — 52) (1 GALLONS / 2 CU. YDS. (Circle One)) 53

METHOD OF SHIPMENT (Circle One) (DRUMS 4 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: 6-6-84

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) [signature] (Authorized Signature) DATE: 6/6/84 (54 — 59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

[signature] (Authorized Signature) DATE 6/16/84 (60 — 65)

COMMENTS OR SPECIAL INSTRUCTIONS: MSD 12584 * DISTRACT DRUM LABELS AFTER DECANTING

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

6 Hold for crude.
15 to 206 K

007264

ILLINOIS ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

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

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) • EPA Form 8700-22 (3-84) Form Approved. OMB No. 2000-0404. Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: I L D 0 0 1 8 5 3 3 0 8 | 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.

GENERATOR

3. Generator's Name and Mailing Address: Water Heater Division, Rheem Manufacturing Co., 7600 S. Kedzie Avenue, Chicago, Illinois 60652

4. Generator's Phone ( ): 312-434-7500

A. Illinois Manifest Document Number: IL 116467

B. Illinois Generator's ID: 0 3 1 6 7 0 0 0 0 1

5. Transporter 1 Company Name: Strand Trucking | 6. US EPA ID Number: I L T 0 0 0 6 4 6 8 1 0 | C. Illinois Tranporter's ID: 0 3 1 1 | D. 312 385-8440 Transporter's Phone

7. Transporter 2 Company Name | 8. US EPA ID Number | E. Illinois Transporter's ID | F. ( ) Transporter's Phone

9. Designated Facility Name and Site Address: American Chemical Service, 420 S. Colfax, Griffith, Indiana 46319 | 10. US EPA ID Number: I N D 0 1 6 3 6 0 2 6 5 | G. Illinois Facility's ID: 9 1 8 0 8 9 0 0 0 2 | H. Facility's Phone: (312) 768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	L. Waste No.
a. Solvent N.O.S. Flammable UN 1993	X	8	D.M	440	1	EPA HW Number: F 0 0 3; Authorization Number:
b. 111 Trichloroethane ORMA UN 2831	X	2	D.M	110	1	EPA HW Number: F 0 0 1; Authorization Number:
c.						EPA HW Number: ; Authorization Number:
d.						EPA HW Number: ; Authorization Number:

J. Additional Descriptions for Materials Listed Above: Materials for Reclaiming/Recycling

K. Handling Codes for Wastes Listed Above: 11 a Mixture of F003 & F005

15. Special Handling Instructions and Additional Information: Destroy Drum Labels after Decanting

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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: B. Bell, W. Casey or J. Peculis | Signature: x Brian J. Bell | Date: Month 11 Day 12 Year 84

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Leonard M Strand | Signature: Leonard M Strand | Date: Month 11 Day 12 Year 84

18. Transporter 2 Acknowledgement or Receipt of Materials

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

FACILITY

19. Discrepancy Indication Space

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

Printed/Typed Name: Michael O Burgo | Signature: Michael O Burgo | Date: Month 11 Day 12 Year 84

IN ILLINOIS: 217 / 782-3637 "24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS" OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV.# 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½, Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of the 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

4-120 TC T-63
6-206 TC T-50 dk 6/84 1251

STATE OF ILLINOIS ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

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

IL532-0610

LPC 62 8/81

Please print or type. (Form designed for use on elite (12-pitch) typewriter) **EPA Form 8700-22 (3-84)** Form Approved. OMB No. 2000-0404. Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: I L D 0 0 1 8 5 3 3 0 8 | 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:
Water Heater Division
Rheem Manufacturing Co.
7600 S. Kedzie Avenue
Chicago, Illinois 60652

4. Generator's Phone: 312-434-7500

A. Illinois Manifest Document Number: IL-118 2413

B. Illinois Generator's ID: 0 3 1 6 7 0 0 0 0 1

5. Transporter 1 Company Name: Strand Trucking

6. US EPA ID Number: I L T 0 0 0 6 4 6 8 1 0

C. Illinois Tranporter's ID: 0 3 1 1

D. (312) 385-8440 Transporter's Phone

7. Transporter 2 Company Name

8. US EPA ID Number

E. Illinois Transporter's ID

F. ( ) Transporter's Phone

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

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

G. Illinois Facility's ID: 9 1 8 0 8 9 0 0 0 2

H. Facility's Phone: (312) 768-3400

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
GENERATOR a.	Solvent N.O.S. Flammable UN 1993	X	0	D M	-0-		EPA HW Number: F 0 0 3
b.	111 Trichloroethane ORMA UN 2831	X	10	D M	500GALS		EPA HW Number: F 0 0 1
c.							EPA HW Number:
d.							EPA HW Number:

Authorization Number

J. Additional Descriptions for Materials Listed Above:
Materials for Reclaiming/Recycling

K. Handling Codes for Wastes Listed Above:
11 a Mixture of F003 & F005

15. Special Handling Instructions and Additional Information:
Destroy Drum Labels after Decanting

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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)
B. Bell, W. Casey or J. Peculis	Brian J. Bell	12 5 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)
THOMAS STRAND	Thomas Strand	12 5 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. BURGE	Michael O. Burge	12 6 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 R T-50

U38675

STATE OF ILLINOIS ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

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

IL532-0610

LPC 62 8/81

Please print or type. (Form designed for use on elite (12-pitch) typewriter) EPA Form 8700-22 (3-84) Form Approved. OMB No. 2000-0404. Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I L D 0 0 1 8 5 3 3 0 8 — 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: Water Heater Division, Rheem Manufacturing Co., 7600 S. Kedzie Avenue, Chicago, Illinois 60652

4. Generator's Phone ( ) 312-434-7500

A. Illinois Manifest Document Number: IL 1182404

B. Illinois Generator's ID: 0 3 1 6 7 0 0 0 0 1

5. Transporter 1 Company Name: Strand Trucking — 6. US EPA ID Number: I L T 0 0 0 6 4 6 8 1 0

C. Illinois Tranporter's ID: 0 3 1 1

D. (312) 385-8440 Transporter's Phone

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

E. Illinois Transporter's ID

F. ( ) Transporter's Phone

9. Designated Facility Name and Site Address: American Chemical Service, 420 S. Colfax, Griffith, Indiana 46319 — 10. US EPA ID Number: I N D 0 1 6 3 6 0 2 6 5

G. Illinois Facility's ID: 9 1 8 0 8 9 0 0 0 2

H. Facility's Phone No: (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. Solvent N.O.S. Flammable UN 1993	X	98	D M	GALLONS 450		EPA HW Number F 0 0 3; Authorization Number
b. 111 Trichloroethane ORMA UN 2831	X	3	D M	00150		EPA HW Number F 0 0 1; Authorization Number
c.						EPA HW Number; Authorization Number
d.						EPA HW Number; Authorization Number

J. Additional Descriptions for Materials Listed Above: Materials for Reclaiming/Recycling

K. Handling Codes for Wastes Listed Above: 11 a Mixture of F003 & F005

15. Special Handling Instructions and Additional Information

Destroy Drum Labels after Decanting
Return Generator Copy Part 1 ATT. J. Peculis

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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)
B. Bell, W. Casey or J. Peculis	Brian J Bell	6 13 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)
JAMES BATTEN	James Batten	06 13 85

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)

FACILITY

19. Discrepancy Indication Space

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

Printed/Typed Name	Signature	Date (Month Day Year)
Michael O. Burke	Michael O Burke	6 13 85

IN ILLINOIS: 217 / 782-3637 — 24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS: — OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV.- 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½ Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center

FACILITY COPY - PART 3

9-126 T-63 035070

STATE OF ILLINOIS ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

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

IL532-0610

LPC 62 8/81

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) **EPA Form 8700-22 (3-84)** Form Approved. OMB No. 2000-0404. Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: I L D 0 0 1 8 5 3 3 0 8 | 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.

GENERATOR

3. Generator's Name and Mailing Address: Water Heater Division, Rheem Manufacturing Co., 7600 S. Kedzie Avenue, Chicago, Illinois 60652

4. Generator's Phone ( ): 312-434-7500

A. Illinois Manifest Document Number: IL 1116470

B. Illinois Generator's ID: 0 3 1 6 7 0 0 0 0 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 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 Service, 420 S. Colfax, Griffith, Indiana 46319

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

G. Illinois Facility's ID: 9 1 8 0 8 9 0 0 0 2

H. Facility's Phone: (312) 768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. Solvent N.O.S. Flammable UN 1993	X	8	D M	440	1	EPA HW Number: F003; Authorization Number: 9918471 6
b. 111 Trichloroethane ORMA UN 2831	X	5	D M	275	1	EPA HW Number: F001; Authorization Number: 9918471 6
c.						EPA HW Number: ; Authorization Number:
d.						EPA HW Number: ; Authorization Number:

J. Additional Descriptions for Materials Listed Above: Materials for Reclaiming/Recycling

K. Handling Codes for Wastes Listed Above: 11a Mixture of F003 & F005

15. Special Handling Instructions and Additional Information

Destroy Drum Labels after Decanting

Return Generator Copy Part 1 ATT J. Peculis

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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)
B. Bell, W. Casey or J. Peculis		3 11 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)
JAMES BATION		3 11 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)
MICHAEL O. BUCCO		3 11 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

5-120 R 7-63
8-204 R 7-50

UJ0001

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

DO NOT WRITE IN THIS SPACE

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

Form Approved OMB No. 2000 0404 Expires 7 31 86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I L D 0 0 1 8 5 3 3 0 8 — Manifest Document No. 1

2. Page 1 of 1

Information in the shaded areas is not required by Federal law

3. Generator's Name: Rheem Manufacturing Co., Water Heater Div.
7600 S. Kedzie Avenue
Chicago, IL 60652

4. Generator's Phone (312) 434-7500

A. State Manifest Document Number: IN 086963

B. State Generator's ID: 0316700001

5. Transporter 1 Company Name: Strand Trucking

6. US EPA ID Number: I L D 0 0 0 6 4 6 8 1 0

C. State Transporter's ID:

D. Transporter's Phone: 312-385-8440

7. Transporter 2 Company Name: Landgreve Motor Transit

8. US EPA ID Number: I N D 0 0 9 8 4 2 8 2 4

E. State Transporter's ID:

F. Transporter's Phone: 219-462-418

9. Designated Facility Name and Site Address: American Chemical Services
420 S. Colfax
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: 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, Paint Solvent N.O.S. Flammable NA 9189	22	D		G	
b. 1993					
c. 1975					
d.					

J. Additional Descriptions for Materials Listed Above: Materials for Reclaiming / Recycling

K. Handling Codes for Wastes Listed Above: F003 F005

15. Special Handling Instructions and Additional Information
Destroy drum labels after decanting
Return Generator Copy - Attn. John Peculis

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, 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
B. Bell, W. Casey or J. Peculis				

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date: Month	Day	Year
Fred L Koselke	Fred L Koselke	11	31	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
Warren F Schmidt	Warren F Schmidt	12	10	86

IN 086963

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

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22-2.04 R +50

0011945

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 0 0 1 8 5 3 3 0 8 | 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: Water Heater Division, Rheem Manufacturing Co., 7600 S. Kedzie Avenue, Chicago, Illinois 60652

4. Generator's Phone ( ): 312-434-7500

A. Illinois Manifest Document Number: IL 1182418

B. Illinois Generator's ID: 0 3 1 6 7 0 0 0 0 1

5. Transporter 1 Company Name: Strand Trucking

6. US EPA ID Number: I L T 0 0 0 6 4 6 8 1 0

C. Illinois Transporter's ID: 0024

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, Indiana 46319

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

G. Illinois Facility's ID: 9 3 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.	Solvent N.O.S. Flammable UN 1993 liquid.	X	004	DM	002201		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: Materials for Reclaiming/Recycling

K. Handling Codes for Wastes Listed Above: 11 a. Mixture of F003 & F005

15. Special Handling Instructions and Additional Information: Destroy Drum Labels after Decanting

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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)
B. Bell, W. Casey or J. Peculis	J. Peculis	03 06 86

TRANSPORTER	Printed/Typed Name	Signature	Date (Month Day Year)
17. Transporter 1 Acknowledgement of Receipt of Materials	JAMES BUTLER		03 06 86
18. Transporter 2 Acknowledgement or Receipt of Materials			

19. Discrepancy Indication Space

FACILITY	Printed/Typed Name	Signature	Date (Month Day Year)
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.	MICHAEL BURGE		03 06 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 RT-50

011944

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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Form Approved OMB No. 2000 0404 Expires 7 31 86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. / Manifest Document No.: ILD001853308

2. Page 1 of: 1

Information in the shaded areas is not required by Federal law

3. Generator's Name: Rheem Manufacturing Co., Water Heater Div.
7600 S. Kedzie Avenue
Chicago, IL 60652

4. Generator's Phone (312) 434-7500

A. State Manifest Document Number: IN 086965

B. State Generator's ID: 0316700001

5. Transporter 1 Company Name

6. US EPA ID Number

C. State Transporter's ID: 1875

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 Services
420 S. Colfax
Griffith, Ind. 46319

10. US EPA ID Number: IND016360265

G. State Facility's ID

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. Waste, Paint Solvent N.O.S. Flammable NA9189	03		115P	GALS	F003 F005
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: Materials for Reclaiming / Recycling

K. Handling Codes for Wastes Listed Above: F003 F005

15. Special Handling Instructions and Additional Information
Destroy drum labels after decanting
Return Generator Copy - Attn. John Peculis

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, 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
B. Bell, W. Casey or J. Peculis		03	15	87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date: Month	Day	Year
		04	13	87

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date: Month	Day	Year

FACILITY

19. Discrepancy Indication Space

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

Printed/Typed Name	Signature	Month	Day	Year
		04	21	87

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

T.S.D. DETACH AND RETAIN THIS COPY 3-204R TSD B

IN 086965

012494

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. I L D 0 0 1 8 5 3 3 0 8 — Manifest Document No. 1

2. Page 1 of 1

Information in the shaded areas is not required by Federal law

3. Generator's Name: Rheem Manufacturing Co., Water Heater Div.
7600 S. Kedzie Avenue
Chicago, IL 60652

4. Generator's Phone (312) 434-7500

A. State Manifest Document Number: IN 086964

B. State Generator's ID: 0316700001

5. Transporter 1 Company Name

6. US EPA ID Number

C. State Transporter's ID

D. Transporter's Phone

7. Transporter 2 Company Name: Landgreve Motor Transit

8. US EPA ID Number: I N D 0 0 9 8 4 2 8 2 4

E. State Transporter's ID

F. Transporter's Phone: 219-462-4181

9. Designated Facility Name and Site Address
American Chemical Services
420 S. Colfax
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: 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. Waste, Paint Solvent N.O.S. Flammable NA9189 350 Gallons	5	D M	270 1250	P	F003 F005
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: Materials for Reclaiming / Recycling

K. Handling Codes for Wastes Listed Above: F003 F005

15. Special Handling Instructions and Additional Information
Destroy drum labels after decanting
Return Generator Copy - Attn. John Peculis

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, 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
B. Bell, W. Casey or J. Peculis		05	15	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

IN 086964

EPA Form 8700-22A (Rev. 11-85)

UHWM 2/LP2

T.S.D. DETACH AND RETAIN THIS COPY

MRK 5-20-87 FSU 12

012496

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. 2050-0404 Expires 7 31 86

60256'13

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. | Manifest Document No.: I L D 0 0 1 8 5 3 3 0 8 | 1

2. Page 1 of: 1

Information in the shaded areas is not required by Federal law

3. Generator's Name: Rheem Manufacturing Co., Water Heater Div.
7600 S. Kedzie Avenue
Chicago, IL 60652

4. Generator's Phone ( ): 312 434-7500

A. State Manifest Document Number: IN 086968

B. State Generator's ID: 0316700001

5. Transporter 1 Company Name: Landgrebe

6. US EPA ID Number: I N D 0 0 9 8 4 2 8 2 4

C. State Transporter's ID: 3250

D. Transporter's Phone: 219-462-4181

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 Services
420 S. Colfax
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: 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. R. Q. Waste Paint Solvent N.O. S. Flammable NA 9189 (EPA TOX F003-F005	1	D M	55	G	F003 F005
b. R. Q. Waste Obsolete Paint N.O.S. Flammable Liquid UN 1263	1	D M	660	G	F003 F005
c.					
d.					

J. Additional Descriptions for Materials Listed Above: Material for Reclaiming/Recycling

K. Handling Codes for Wastes Listed Above: F003 F005

15. Special Handling Instructions and Additional Information: Destroy Drum Labels after Decanting
Return Generator Copy after J. Peculis

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, 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 Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume economically practicable and I have selected the method of treatment, storage, or disposal human health and the environment.

to make a waste minimization certification under which I generated to the degree I have determined to be which minimizes the present and future threat to

Printed/Typed Name: B. Bell, W. Casey, J. Peculis

Signature:

Month Day Year: 12/14/87

12 dms = 660 gal

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name:

Signature:

Date:

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: HARROLD F. Schmidt

Signature:

Month Day Year: 12/14/87

IN 086968

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

T.S.D. DETACH AND RETAIN THIS COPY

SB 2042 T-50 12/4/87
3b 2042 T-50 12/3/27 (q HOLD

012497

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
RHEEM MFG. CO.
7600 S. KEDZIE
FILMORE IN 61652
4. Generator's Phone (312) 436- 7500

A. State Manifest Document Number: INA 0125693
B. State Generator's ID: 03162600001
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: 317-768-3100

5. Transporter 1 Company Name | 6. Use EPA ID Number
7. Transporter 2 Company Name | 8. Use EPA ID Number
9. Designated Facility Name and Site Address
AMERICAN DISPOSAL SERVICE
400 S. ELEVEN
CARTHAGE IND. 46115
10. Use EPA ID Number: IND063102615

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 SOLVENT NOI P.G. FLAMMABLE NA 9189 EPA F003-F005	04	DM	00200		F003 F005
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
MANIFEST FEE IS PAID BY GENERATOR PER INDIANA STATE LAW

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

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

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

GENERATOR — Printed/Typed Name: BRIAN J. BELL | Signature | Date: Month 04 Day 27 Year 88

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials — Printed/Typed Name: THOMAS STRAND | Signature | Date: Month 4 Day 27 Year 88
18. Transporter 2 Acknowledgement of Receipt of Materials — Printed/Typed Name | Signature | Date: Month . Day . Year .

FACILITY
19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: HAROLD ESCHMIDT | Signature | Date: Month 4 Day 27 Year 88

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

INA 0125693

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

203K TSD 5/5/88

0015319

STATE OF ILLINOIS ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

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

IL532 005 10 037

LPC 62 8/81

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: APPLIED FOR
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
RICHARD RUSH STUDIO
210 S. DESPLAINES
CHICAGO, ILL 60606
4. Generator's Phone (312) 648 0046

A. Illinois Manifest Document Number: IL 1430625
B. Illinois Generator's ID: 0316285041
C. Illinois Tranporter's ID: 18715
D. (219) 462-4181 Transporter's Phone

5. Transporter 1 Company Name: LANDGREBE MTR. FRT,
6. US EPA ID Number: IND009842824
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: (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 ACETONE IGNITEABLE UN 1090 FLAMMABLE	X	003	DM	00165	P	EPA HW Number F003; Authorization Number
b.				879		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: JOHN LOMASNEY Signature: John Lomasney Date (Month Day Year): 11 11 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JIM DUMMER Signature: [illegible] Date (Month Day Year): 11 13 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: FRANK PRICE Signature: Frank Price Date (Month Day Year): 11 13 85

IN ILLINOIS: 217 / 782-8637 *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 R-T-50

UJ6006

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. ILD025289687 — Manifest Document No. 00002 — 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
RICHARD RUSH STUDIO
210 S. DESPLAINES
CHICAGO, IL. 60606

4. Generator's Phone (312) 648 0046

A. Illinois Manifest Document Number: IL 1430626

B. Illinois Generator's ID: 0 3 1 6 2 8 5 0 4

5. Transporter 1 Company Name: LANDGREBE MTR. FRT — 6. US EPA ID Number: IND 009842824

C. Illinois Tranporter's ID: 1 8 7 5

D. (219) 462-4418 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: IND 016360265

G. Illinois Facility's ID: 1 1 8 0 8 9 0 0 0 2

H. Facility's Phone (219) 924-4370

GENERATOR

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a.	WASTE ACETONE IGNITEABLE UN 1090	X	003	DM	00165	1	EPA HW Number: F003 / Authorization Number
b.					3/11		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: JOHN LOMASNEY — Signature: John Lomasney — Date (Month Day Year): 04 07 86

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: CLIFFORD POFF — Signature — Date (Month Day Year): 4 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: STEVE KULAVICK — Signature: Steve Kulavick — Date (Month Day Year): 04 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

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

704 R T 50

011910

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.: 1409252891662 71

2. Page 1 of: 1

Information in the shaded areas is not required by Federal law

3. Generator's Name: RICHARD RUSH STUDIOS
210 S. DESPLAINES
CHICAGO ILL 60606

4. Generator's Phone: (312) 648-0046

A. State Manifest Document Number: IN 060952

B. State Generator's ID: 0316285041

5. Transporter 1 Company Name: LANDERE BE MTR. FRT

6. US EPA ID Number: IND009184288

C. State Transporter's ID: 1875

D. Transporter's Phone: (219) 462-4141

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 46319

10. US EPA ID Number: IND011636245

G. State Facility's ID:

H. Facility's Phone:

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE ACETONE - IGNITABLE UN 1090	004	D,M	00330	1	F006
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
James Reynolds	James Reynolds			

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	Harold F Schmidt			

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

GENERATOR DETACH AND RETAIN THIS COPY

IN 060952

118 R 763
01197

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 2 5 2 6 9 6 8 7 | Manifest Document No. | 2. Page 1 of | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
RICHARD RUSH STUDIO, INC.
210 S. Desplaines
Chicago, IL 60606-1120
4. Generator's Phone 312 648-0046

A. State Manifest Document Number INA 0159928
B. State Generator's ID 031628501
C. State Transporter's ID
D. Transporter's Phone
E. State Transporter's ID
F. Transporter's Phone (219) 362-3181
G. State Facility's ID 918698002
H. Facility's Phone (219)924-8370

5. Transporter 1 Company Name: LANDGREBE MOTOR FREIGHT
6. US EPA ID Number: I N D 0 0 9 8 3 2 8 2 6
7. Transporter 2 Company Name
8. US EPA ID Number
9. Designated Facility Name and Site Address: AMERICAN CHEMICAL SERVICE, 920 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)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	Waste No.
a. Waste Acetone-Flammable UN 1090	0 0 3	DM	0 0 1 6 5	P	
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

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

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

Printed/Typed Name: Mark Stearns | Signature | Date: Month 1 2 Day 0 4 Year 8 7

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Date: Month 1 2 Day 0 4 Year 8 7

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

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: Harold F. Schmidt | Signature | Date: Month 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 0159928

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865
3-126R T-63 12/8/87

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

012456

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 J are required by State law.
I L D 0 2 5 2 6 9 6 8 7			

3. Generator's Name and Mailing Address
Richard Rush Studio, Inc.
210 S. Desplaines
Chicago, IL 60606-1120

A. State Manifest Document Number: **INA 0117751**
B. State Generator's ID: **0316285041**
C. State Transporter's ID: **1875**
D. Transporter's Phone: **(219)462-1121**
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID: **9180890002**
H. Facility's Phone: **(219)924-8370**

4. Generator's Phone: **312 645-0046**

5. Transporter 1 Company Name: **Landgrebe Motor Freight**
6. US EPA ID Number: **I N D 0 0 9 8 4 2 8 2 8**
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)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt./Vol.	Waste No.
a. **Waste Acetone-Flammable UN 1090**			**0 0 3 5**	**P**	**F003**
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

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

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Printed/Typed Name	Signature	Date Month	Day	Year
Mark Stearns		**8**	**7**	**3**

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year
ROBERT F. LANGFORD		8	27	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
HARRY F. SCHMIDT		8	27	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

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 0117751

012455

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. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. ILD 025269687 — 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: RICHARD RUSH STUDIO, INC. 210 S. Desplaines St. Chicago, IL 60606
4. Generator's Phone (312) 648-0046
Illinois Manifest Document Number: IL 1811853
Illinois Generator ID:

5. Transporter 1 Company Name: LANDGREBE MOTOR FREIGHT
6. US EPA ID Number: IND 009842824
Illinois Transporter's ID:
Transporter's Phone:

7. Transporter 2 Company Name:
8. US EPA ID Number:
Illinois Transporter's ID:
Transporter's Phone:

9. Designated Facility Name and Site Address: AMERICAN CHEMICAL SERVICE 420 S. Colfax Griffith, Indiana 46319
10. US EPA ID Number: IND 016 360 265
Illinois Facility:

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.	X Isopropyl Acetone - FLAMMABLE UN 1090	003	DM	0 0 1 6 5	G	
b.						
c.						
d.						

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: Mark Stearns — Signature: [signature] — Date: Month 04 Day 02 Year 87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Michael Yurechko — Signature: [signature] — Date: Month 04 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 in Item 19. — Date
Printed/Typed Name: Harold F. Schmidt — Signature: [signature] — Date: Month 04 Day 02 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.

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FACILITY COPY - PART 3

MRL 3-125R 1038

012454

STATE OF ILLINOIS ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62794-9276 (217) 782-6761
P.O. BOX 19275

IL532-0610
LPC 62 8/81

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) **EPA Form 8700-22 (Rev. 9-86)** Form Approved. OMB No. 2050-0039, Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. ILD025269687 — 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
RICHARD RUSH STUDIO, INC.
210 S. Desplaines
Chicago, IL 60606-1120

A. Illinois Manifest Document Number IL 1964697

B. Illinois Generator's ID 0 3 1 6 2 8 5 0 4 1

4. Generator's Phone (312) 648-0046

5. Transporter 1 Company Name LANDGREBE MOTOR FREIGHT

6. US EPA ID Number IND009852824

C. Illinois Transporter's ID 1 8 7 5

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
Griffith, IN 46319

10. US EPA ID Number IND016360265

G. Illinois Facility's ID 9 1 8 0 8 9 0 0 0 2

H. Facility's Phone (219) 924-4370

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 UN 1090	0 0 3	DM	0 0 1 6 5	1	EPA HW Number XXF003 Authorization Number
b.					EPA HW Number XX Authorization Number
c.					EPA HW Number XX Authorization Number
d.					EPA HW Number XX Authorization Number

GENERATOR

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.

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Printed/Typed Name: Mark Stearns — Signature — Date: 05 16 88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: MICHAEL YURECHKO — Signature — Date: 05 16 88

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 — Signature — Date: 05 17 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 1

GENERATOR COPY — PART 1-DO NOT REMOVE PART 1 FROM SET UNTIL COMPLETED.

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FACILITY COPY - PART 3

122 TCT 63 SD-3M

0015278

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.0.2.5.2.6.9.6.8.7 | Manifest Document No. | 2. Page 1 of | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
RICHARD KUSH STUDIO, INC.
210 S. DES PLAINES
CHICAGO, IL 60606-1120

A. State Manifest Document Number: INA 0160039

4. Generator's Phone (312) 648-0046

B. State Generator's ID: 0316285041

5. Transporter 1 Company Name: LANDGREBE MOTOR FREIGHT | 6. Use EPA ID Number: I.N.D.0.0.9.8.4.2.8.2.4

C. State Transporter's ID: 1875

D. Transporter's Phone: (219) 462-4181

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

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
420 S. CALFAX
GRIFFITH, IND. 46319 | 10. Use EPA ID Number: I.N.D.0.1.6.3.0.2.6.5

G. State Facility's ID: 9180890002

H. Facility's Phone: (219) 924-4270

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 UN 1090	003	DM	00165	1	F003
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

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

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

GENERATOR — Printed/Typed Name: ROBERT BRUEMMER | Signature: Robert Bruemmer | Date: Month 11 Day 25 Year 88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: MICHAEL SCHIRO | Signature: Michael Schiro | Date: Month 11 Day 25 Year 88

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

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: FRANK PRICE | Signature: Frank Price | Date: Month 11 Day 28 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 0160039

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

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

12/3

0015279

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

PLEASE PRINT OR TYPE *(Form designed for use on elite (12-pitch) typewriter.)* *Form Approved. OMB No. 2050-0039. Expires 9-30-91*

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.
I L D 0 2 5 2 6 9 5 8 7	0 0 0 8 7		

3. Generator's Name and Mailing Address	A. State Manifest Document Number
RICHARD RUSH STUDIO, INC. 210 S. Desplaines Chicago, IL 60606-1120 4. Generator's Phone (312) 648-0046	INA 0338501 B. State Generator's ID 0316285041
5. Transporter 1 Company Name: LANDGREBE MOTOR FREIGHT	6. US EPA ID Number: I N D 0 0 9 8 4 2 8 2 4
	C. State Transporter's ID: 1875 D. Transporter's Phone: (219) 462-4181
7. Transporter 2 Company Name	8. 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: (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 UN 1090	3	DM	00165	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

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GENERATOR	Printed/Typed Name	Signature	Month	Day	Year
	Richard B. Rush		03	30	89

TRANSPORTER	Printed/Typed Name	Signature	Month	Day	Year
17. Transporter 1 Acknowledgement of Receipt of Materials					
18. Transporter 2 Acknowledgement of Receipt of Materials					

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 KVETKO		03	31	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 0338501

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

12 IRC T63 3/31

COPY 5. TSD COPY

001674

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 2 5 2 6 9 6 8 7
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
RICHARD RUSH STUDIO, INC.
210 S. Desplaines
Chicago, IL 60606-1120
4. Generator's Phone (312) 648-0046

A. State Manifest Document Number: INA 0335099
B. State Generator's ID: 0316285041

5. Transporter 1 Company Name: LANDGREBE MOTOR FREIGHT
6. Use EPA ID Number: I.N.D.0.0.9.8.4.2.8.2.4
C. State Transporter's ID: 1875
D. Transporter's Phone: (219) 462-4181

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
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: 918089002
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 UN 1090	3	DM	00165	1	F003
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

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

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Printed/Typed Name: Richard B. Rush
Signature: Richard B. Rush
Date: Month 7 Day 31 Year 89

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: MICHAEL YURECHKO
Signature: Michael Yurechko
Date: Month 08 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 in Item 19.
Printed/Typed Name:
Signature:
Date: Month Day Year

GENERATOR

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

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

COPY 5. TSD COPY

120TCV630/7

INA 0000000

0016748

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. ILD025289.. Manifest Document No. 687 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: Richard Rush 210 S Wheeling Chicago Ill 60606
4. Generator's Phone (312) 648-0046
A. State Manifest Document Number: INA 0335042
B. State Generator's ID: 03162850411

5. Transporter 1 Company Name: Landgrebe Motor
6. Use EPA ID Number: Ind.009-842-842
C. State Transporter's ID: 1875
D. Transporter's Phone: 219-462-8141

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: Envo Chem Inc 439 W 76th St Hammond IN 46319
10. Use EPA ID Number: IND016360265
G. State Facility's ID
H. Facility's Phone: 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. Waste Acetone - Flammable UN 1090	3	DM	165.	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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GENERATOR — Printed/Typed Name: Richard Rush — Signature: Rich Rush — Date: Month 5 Day 26 Year 89

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials — Printed/Typed Name: Michael Yurechko — Signature: Michael Yurechko — Date: Month 5 Day 26 Year 89
18. Transporter 2 Acknowledgement of Receipt of Materials — Printed/Typed Name — Signature — Date: Month Day Year

19. Discrepancy Indication Space

FACILITY — Certification of receipt of hazardous materials covered by this manifest except as noted Item 19. — Printed/Typed Name: Harold Schmidt — Signature: Harold Schmidt — Date: Month 5 Day 30 Year 89

5 PAILS (30 CAL) ASHCROFT 4/15/89 90103
25 CAL DOT-5L 5/1/89

4/1

If a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the Response Center at 800/424-8802 or 202/426-2675.

INA 0335042

0016749

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.0.2.5.2.6.9.6.8.7 | Manifest Document No. 0-0-0-8-1 | 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
RICHARD RUSH STUDIO, INC.
210 S. Desplaines
Chicago, IL 60606-1120
4. Generator's Phone (312) 648-0086

A. State Manifest Document Number: INA 0160077
B. State Generator's ID: 0316285041

5. Transporter 1 Company Name: LANDGREBE MOTOR FREIGHT
6. Use EPA ID Number: I.N.D.0.0.9.8.4.2.8.2.4
C. State Transporter's ID: 1875
D. Transporter's Phone: (219)462-8181

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: (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 UN 1090	0 0 6	DM	0 0 3 3 5	1	F003
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

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

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GENERATOR — Printed/Typed Name: Richard B. Rush | Signature | Date: Month 0 2 Day 0 2 Year 8 9

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 0160077

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

4-12 IRT 63 2/13 2 Manifest Slips 2/16/89 9/0000

001675D

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

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.0.2.5.2.6.9.6.8.7	00001		

3. Generator's Name and Mailing Address
Richard Rush Studio Inc.
210 S. Desplaines
Chicago Ill 60606 1120

4. Generator's Phone (312) 648-0046

A. State Manifest Document Number: INA 0335100

B. State Generator's ID: 0316285041

5. Transporter 1 Company Name: Landgrebe Motor Freight

6. Use EPA ID Number: IN.D.0.0.9.8.4.2.8.2.4

C. State Transporter's ID: 1875

D. Transporter's Phone: (219) 463-418

7. Transporter 2 Company Name

8. Use EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Service
420 S. Colfax
Griffith Ind. 463A

10. Use EPA ID Number: IN.D.0.1.6.3.6.0.2.6.5

G. State Facility's ID: 91808 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 Acetone-Flammable UN 1090	4	DM	215	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

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GENERATOR

Printed/Typed Name	Signature	Date (Month Day Year)
Richard B. Rush	Richard B. Rush	10 26 89

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)
Michael Yurechko	Michael Yurechko	10 26 89

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)

TRANSPORTER

19. Discrepancy Indication Space

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

Printed/Typed Name	Signature	Date (Month Day Year)
Steve Kulavic	Steve Kulavic	10 27 89

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 0335100

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

IND063103

COPY 5. TSD COPY

0016751

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

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. IL D 0 2 5 2 6 9 6 8 7 | 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
RICHARD RUSH STUDIO, INC.
210 S. Desplaines
Chicago, IL 60606-1120
4. Generator's Phone (312) 648-0046

A. State Manifest Document Number: INA 0338503
B. State Generator's ID: 0316285041
C. State Transporter's ID: 1875
D. Transporter's Phone: (219) 462-4181
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID: 918089002
H. Facility's Phone: (219) 924-4370

5. Transporter 1 Company Name: LANDGREBE MOTOR FREIGHT
6. Use EPA ID Number: N D 0 0 9 8 4 2 8 2 4
7. Transporter 2 Company Name:
8. Use EPA ID Number:
9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
420 S. Colfax
Griffith, IN 46319
10. Use EPA ID Number: N D 0 1 6 3 6 0 2 6 5

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. Waste Acetone-Flammable UN 1090	3	DM	00165	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:

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Printed/Typed Name: Richard B. Rush | Signature: Richard B Rush | Date: Month 12 Day 14 Year 89

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: MICHAEL YURECHKO | Signature: Michael Yurechko | Date: Month 12 Day 22 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: A Whitaker | Date: Month 12 Day 27 Year 89

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

2-204R TSC 2/7/90
1-MAIL TO SHAW 2/13/90 915139

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 0338503

0016752

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.0.2.5.2.6.9.6.8.7 | 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
RICHARD RUSH STUDIO, INC.
210 S. Desplaines
Chicago, Il., 60606-1120

A. State Manifest Document Number: INA 0338502

B. State Generator's ID: 0316285081

4. Generator's Phone (312) 648-[illegible] 0046

5. Transporter 1 Company Name: LANDGREBE MOTOR FREIGHT

6. Use EPA ID Number: I.N.D.0.0.9.8.4.2.8.2.8

C. State Transporter's ID: 1875

D. Transporter's Phone: (219) 862-8181

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: 918088002

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 UN 1090	3	DM	00165	I	F003
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: RICHARD B. RUSH | Signature: Richard B Rush | Date Month 05 Day 06 Year 90

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: MICHAEL YURECHKO | Signature: Michael Yurechko | Date Month 05 Day 06 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: R. W. Tucker | Signature: R W Tucker | Month 05 Day 07 Year 90

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

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120CT63 3/26

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.

INA0338502

0018249

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

78604

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.
1 LD 0 25 2 69 68 7	0 00 0 1	1 of 1	

GENERATOR

3. Generator's Name and Mailing Address
RICHARD RUSH STUDIO, INC.
210 S. Desplaines
Chicago, Il., 60606-1120
4. Generator's Phone (312) 648-0046

A. State Manifest Document Number: INA 0338505
B. State Generator's ID: 0316285041

5. Transporter 1 Company Name: LANDGREBE MOTOR FREIGHT
6. Use EPA ID Number: 1 ND 0 0 98 4 28 2 4
C. State Transporter's ID: 1875
D. Transporter's Phone: (219) 462-4181

7. Transporter 2 Company Name
8. Use EPA ID Number
E. State Transporter's ID
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: 1 IND 0 1 63 6 02 65
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 UN 1090	3	D M	0 0 165	1	F003
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

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

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

Printed/Typed Name	Signature	Date Month Day Year
RICHARD B. RUSH		

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month Day Year
MICHAEL YURECHKO		

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 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

INA0338505

0018250

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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. | Manifest Document No.: ILD983221311 | 84775 JK

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

3. Generator's Name and Mailing Address
RICHARDS BODY SHOP
3044 W. LAWRENCE
CHICAGO, IL 60625

4. Generator's Phone (312-588-3301)

A. State Manifest Document Number

B. State Generator's ID

C. State Transporter's ID 0367

5. Transporter 1 Company Name: ADCOM EXPRESS INC. | 6. US EPA ID Number: ILD004726736

D. Transporter's Phone 708-479-3013

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
420 S. COLFAX AVE
GRIFFITH, IND. 46319

10. US EPA ID Number: IND016360265

G. State Facility's ID

H. Facility's Phone 219 924-4370

	11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	HM	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
GENERATOR a.	WASTE PAINT RELATED MATERIAL, FLAMMABLE LIQUID, NA1263	X	007	DM	00035	G	F003 F005
b.							
c.							
d.							

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above
GE GALLONS

15. Special Handling Instructions and Additional Information

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

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

Printed/Typed Name	Signature	Month	Day	Year
X		03	21	90

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
ROBERT K THORN	Robert K Thorn	03	22	90

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 KILLADICK		04	10	90

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

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

126CT63 4/2/90

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0018261

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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Form Approved OMB No. 2000 0404 Expires 7 31 86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. / Manifest Document No.: M I D 0 5 8 7 2 8 0 5 7 0 0 0 1

2. Page 1 of: 7

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

3. Generator's Name
Richards Chevy
7540 Lewis Avenue Temperance, MI 48182

A. State Manifest Document Number: IN 034156

4. Generator's Phone ( ): 313 847-6711

B. State Generator's ID:

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

6. US EPA ID Number: M I D 0 1 7 1 6 7 2 2 2

C. State Transporter's ID:

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

7. Transporter 2 Company Name:

8. US EPA ID Number:

E. State Transporter's ID:

F. Transporter's Phone:

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

10. US EPA ID Number: 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.
GENERATOR a. WASTE PAINT RELATED MATERIAL. FLAMMABLE LIQUID NA1263	01	DM	220	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	Signature	Month	Day	Year
RICHARD CHEVY		1 2	1 4	8 9

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
[illegible]		1 2	1 4	8 9

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]		1 2	1 4	8 9

IN 034156

EPA Form 8700-22A (Rev. 11-85)
3-126R T-63 12/16/87
1-204R T-50 12/16/87

UHWM 2/LP2

T.S.D. DETACH AND RETAIN THIS COPY

012493

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. IID058723057 | Manifest Document No. 7136
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
Richard ~~Sharp~~ CHEVY
7640 Lewis Ave., Temperence, MI 48182
4. Generator's Phone (313) 847-6761

A. State Manifest Document Number INA 0117136
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone (618)375-9595
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: A&B Industrial Services
6. Use EPA ID Number: ILD017167222
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: INDO16360265

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 Flamable Liquid NA1263	004	DM	220	G	
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

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

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

Printed/Typed Name: Larry Falenbaker | Signature | Date Month Day Year: 07 08 87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: David Kuilema | Signature: David Kuilema | Date Month Day Year: 07 08 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 Day Year: 07 14 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 0117136

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

4-126 T63 B

012492

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

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. M I D 0 5 8 7 2 3 0 6 7 | Manifest Document No. 2 2 2 3 | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Richard Chevy
7640 Lewis Ave. Temperance, MI 48182
4. Generator's Phone (313) 847-6711

A. State Manifest Document Number: INA 0172223
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 3 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 5 3 5 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 NA 1263	004	DM	00220	G	F003
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

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

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

GENERATOR — Printed/Typed Name: Larry Trzcinka | Signature | Date: Month 07 Day 26 Year XX

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials — Printed/Typed Name: Michael White | Signature | Date: Month 07 Day 26 Year XX
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 Whitaker | Signature | Date: Month 07 Day 28 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 0172223

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

126TCT63 7/14/

0015316

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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. S M Q T Y G E N | Manifest Document No. 3069P | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Richards Chevy
7640 Lewis Avenue Temperance, MI 48182
4. Generator's Phone (313) 847-6711

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID 708-429-1660
D. Transporter's Phone 0367
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone 219-924-4370

5. Transporter 1 Company Name: ADCOM EXPRESS
6. US EPA ID Number: I L D 0 4 7 2 6 7 3 6 5
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: 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.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. RQ WASTE PAINT RELATED MATERIAL (F003 & F005) FLAMMABLE LIQUID NA1263	X	002	D M	00100	G	F003 F005
b.						
c.						
d.						

J. Additional Descriptions for Materials Listed Above

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

15. Special Handling Instructions and Additional Information

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

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

GENERATOR

Printed/Typed Name: Larry Fazenbaker | Signature | Month Day Year

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Len Wiesiny | Signature | Month Day Year: 03 07 90

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: Edward F. Kluzniak | Signature | Month Day Year: 03 09 90

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

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

126TCT63 3/12

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0018200

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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.: MID 058 723 057
Manifest Document No.: 50189X
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Richards Chevy
7640 Lewis Avenue Temperance, MI 48182
4. Generator's Phone (313-) 847-6711

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

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

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

9. Designated Facility Name and Site Address
American Chemical Service
420 S. Colfax Ave.
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.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	RQ WASTE PAINT RELATED MATERIAL (F003) FLAMMABLE LIQUID NA1263	X	6	DM	312	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.

GENERATOR

Printed/Typed Name: R. [illegible] A. P. [illegible]
Signature: [signature]
Month 5 Day 2 Year [illegible]

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: C. E. [illegible]
Signature: [signature]
Month 5 Day 2. Year [illegible]

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: Harrison L. Hunt
Signature: [signature]
Month [illegible] Day [illegible] Year [illegible]

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

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

12657633

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0016782

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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.: MID 058 723 057
Manifest Document No.: 071189U
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

GENERATOR

3. Generator's Name and Mailing Address
Richards Chevy
7640 Lewis Avenue, Temperance, MI 48182
4. Generator's Phone (313) 847-6711

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

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

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

9. Designated Facility Name and Site Address
American Chemical Service
420 S. Colfax Avenue
Griffith, IN 46319
10. US EPA ID Number: IND 016 360 265
G. State Facility's ID
H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	HM	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. RQ WASTE PAINT RELATED MATERIAL (F003) FLAMMABLE LIQUID NA1263	X	3	DM	152	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.

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Printed/Typed Name: [illegible] | Signature: [signature] | Month: 7 | Day: 12 | Year: 89

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: [illegible] | Signature: [signature] | Month: 7 | Day: 12 | Year: 89

18. Transporter 2 Acknowledgement of Receipt of Materials

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

FACILITY

19. Discrepancy Indication Space

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

Printed/Typed Name: [illegible] | Signature: [signature] | Month: 7 | Day: 17 | Year: 89

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

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

123763 7/17

TSDF COPY

0016783

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.: MID058723057 92588V

2. Page 1 of 6

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

GENERATOR

3. Generator's Name and Mailing Address
Richards Chevy
7640 Lewis Avenue, Temperance, MI 48182

4. Generator's Phone (313) 847-6711

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.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. RQ WASTE PAINT RELATED MATERIAL (FOO3) FLAMMABLE LIQUID NA 1263	X	002	d m	00098	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: LARRY FAZENBAKER | Signature | Month Day Year: 10 3 86 87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: ERIC WILKOSKY | Signature | Month Day Year: 10 4 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: WHITAKER A | Signature | Month Day Year: 10 6 86

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

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

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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. IND058723057 Manifest Document No. 12499

2. Page 1 of 1

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

GENERATOR

3. Generator's Name and Mailing Address
Richards Chevy
7640 Lewis Avenue, Temperance, MI 48182

4. Generator's Phone (313) 847-6711

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: 708-429-1660

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

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

10. US EPA ID Number: INDO01636026 5

G. State Facility's ID

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

	11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	HM	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	RQ WASTE PAINT RELATED MATERIAL (F003) FLAMMABLE LIQUID NA 1263	X	002	DM	00110	G	F003
b.							
c.							
d.							

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above
G = Gallon

15. Special Handling Instructions and Additional Information

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

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

Printed/Typed Name: LARRY FAZENBAKER — Signature — Month Day Year

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: LEN JAKENITY — Signature — Month Day Year: 12 13 92

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Month Day Year

FACILITY

19. Discrepancy Indication Space

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

Printed/Typed Name: WHITAKER H — Signature — Month Day Year: 12 15 92

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

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

123 of 63 2/0

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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

0647453
Authorization Number 921581

TO BE COMPLETED BY WASTE GENERATOR

THE RICHARDSONG. | 2701 LAKE ST. | 3444300 | 03118600096
(Company Name) | Address | Phone Number | Generator Number

MELROSE PARK | IL | 60160 | ILD057831042
City | State | Zip | EPA Number

WASTE HAULER(S)

MR FRANK | 201 W 155TH ST. S. HOLLAND IL 60473 | S.W.H. Registration Number 0079015
Hauler Name | Hauler Address

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 SER. | 420 S. COLFAX AVE | 91808902
(Facility Name) | Address | Site Number

GRIFFITH | IL | 46319 | 3127683400 | IND016360265
City | State | Zip | Phone Number | EPA Number

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: CHLORINATED SOLVENTS KETONES, ALCOHOLS | 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
HAZARDOUS WASTE	LIQUID NOS ORM-E	NA9189	D001

WEIGHT FOR D.O.T. USE: 4 (LBS / TONS circle one) — WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 700 (1 GALLONS / 2 CU. YDS. circle one) 1

METHOD OF SHIPMENT (Circle One): (DRUMS 4 Number) TANK TRUCK OPEN TRUCK OTHER (Specify) FLAT BED

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 E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Michael Fulin (Authorized Signature) DATE 6-18-82

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: 06 18 82

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

(Authorized Signature) DATE: 6/18/82

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 TO 210 E T-50 GRM 6.18.82

002428

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

0467870 (1–7)

Authorization Number 921579 (8–13)

Richardson Graphics (Company Name) | 9797 W. 151st St. (Address) | 3123497272 (Phone Number) | 0312310004 G (14 Generator Number 24)

Orland Park (City) | IL. (State) | 60462 (Zip) | ILD 251 913 564 (EPA Number)

WASTE HAULER(S)

Mr. Frank Inc. (Hauler Name) | 201 W. 155th St (Hauler Address) | S.W.H. Registration Number 0079015 (25–31)

So. Holland IL. | 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) | 9180902 (39–46 Site Number)

Griffith (City) | IN. (State) | 46319 (Zip) | 3127633400 (Phone Number) | IND066360265 (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 XYLENES (RQ 1000 LB) | 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:

Xylene (xylol) (RQ 1000 LB) Flammable Liquid | UN 1307 (UN or NA Number) | UN 239 (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: 400 (47–52) | 1 GALLONS 2 ~~CU. YDS~~ (Circle One) 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS 8 Number) TANK TRUCK OPEN TRUCK (OTHER) (Specify) FLAT BED

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION (Authorized Signature) | DATE: 6/18/82

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 06/18/82 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

T Dunlap (Authorized Signature) | DATE 6/18/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS _____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637 — OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

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

REV # 3

SITE COPY - PART 3

To 210 F T-50 GKM 6.18.82

002364

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. U T D 9 8 0 9 5 5 2 8 0 — Manifest Document No. 1 2 1 1 L

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

3. Generator's Name and Mailing Address
Rick Warner Body Shop
28 West 700 South, Salt Lake City, UT 84101

4. Generator's Phone (801) 363-4400

A. State Manifest Document Number

B. State Generator's ID

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

6. US EPA ID Number I L D 9 8 4 7 7 5 0 4 9

C. State Transporter's ID 0079

D. Transporter's Phone 708-720-0700

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

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

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

G. State Facility's ID

H. Facility's Phone 219-924-4370

	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	003	DM	000165	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.

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GENERATOR

Printed/Typed Name: Clark E. Mills — Signature: Clark E. Mills — Month Day Year: 11 23 88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Walter C. Klauba — Signature: Walter C. Klauba — Month Day Year: 11 23 88

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Month Day Year

FACILITY

19. Discrepancy Indication Space

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

Printed/Typed Name — Signature — Month Day Year: 11 14 88

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

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

12-42763 X90

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0017893

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Form Approved. OMB /

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. S M L Q T Y G E N — Manifest Document No. 1 2 4 9 K

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

GENERATOR

3. Generator's Name and Mailing Address
Ricky'G's Paint & Repair
8322 Brint Lane, Sylvania, OH 43560

4. Generator's Phone (419) 841-7763

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name
ADCOM EXPRESS

6. US EPA ID Number I L D 0 4 7 2 6 7 3 6 4

C. State Transporter's ID 0367

D. Transporter's Phone 708-429-1660

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

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

10. US EPA ID Number I N D 0 1 8 3 6 0 2 6 5

G. State Facility's ID

H. Facility's Phone 219-924-4370

	11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	HM	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	RQ WASTE PAINT RELATED MATERIAL (F003) FLAMMABLE LIQUID NA 1263	X	002	DM	00100	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.

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Printed/Typed Name | Signature | Month Day Year

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name [illegible] | Signature | Month Day Year 12 04 89

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

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name [illegible] | Signature | Month Day Year 12 04 89

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

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

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TSDF COPY

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HAZARDOUS WASTE MANIFEST

009
1 MANIFEST DOCUMENT NUMBER

0576 Purchase Order Nbr.
SHIPPER NUMBER

Thomas Solvent Company
NAME OF CARRIER (SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND0051377	Rieke Corporation 500 West 7th Street Auburn, IN 46706 (219) 925-3700	9/21/81
TRANSPORTER # 1	MID039993902	Thomas Solvent Company - Ft Wayne, IN 46825 5605 Plainview Dr. (219) 482-9638	
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND0163065	American [illegible] Chemical Service 420 S.Colfax, Griffith IN 46319 (219) 924-4370	
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)
~~14~~ 13 dr		F005	Spent Non-Halogenated Solvents, M.E.K.				55 gal	~~770~~ 720 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 XX No ☐

REMIT C.O.D. TO:
ADDRESS

COD Amt: $

C.O.D. FEE:
PREPAID ☐
COLLECT ☐ $

TOTAL CHARGES: $

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

To 126R T-63 10/8/81 gm

5

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TSDF COPY

000590

HAZARDOUS WASTE MANIFEST

005
MANIFEST DOCUMENT NUMBER

5215 Purchase Orde
SHIPPER NUMBER

Thomas Solvent Company
NAME OF CARRIER (SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND00516377	Rieke Corporation, 500 West 7th St Auburn, IN 46706 (219) 925-3700	4/8/81
TRANSPORTER # 1	MID039993902	Thomas Solvent Co. 5605 Plainview Dr - Ft Wayne IN 46825- (219) 482-9638	4/8/81
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chemical Service 420 S.Colfax, Griffith, IN 46319 (219) 924-4370	
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)
6 dr		F005	Spent Non-Halogenated Solvents, M.E.K.				55 gal	330 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 ☐ $

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

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

_____ Signature

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

_____ (Signature of Consignor)

TOTAL CHARGES. $

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

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

CERTIFICATION

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

GENERATOR'S SIGNATURE / DATE

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (If required)

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

TSDF SIGNATURE 4/14/81 DATE

6

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000556

HAZARDOUS WASTE MANIFEST

005
MANIFEST DOCUMENT NUMBER

5215 Purchase Orde
SHIPPER NUMBER

Thomas Solvent Company
NAME OF CARRIER (SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND00516377	Rieke Corporation, 500 West 7th St Auburn, IN 46706 (219) 925-3700	4/8/81
TRANSPORTER # 1	MID039993902	Thomas Solvent Co. 5605 Plainview Dr - Ft Wayne IN 46825- (219) 482-9638	4/8/81
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DIS— POSAL FACILITY	IND016360265	American Chemical Service 420 S.Colfax, Griffith, IN 46319 (219) 924-4370	
TSDF TREATMENT STORAGE OR DIS— POSAL 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)
6 dr		F005	Spent Non-Halogenated Solvents, M.E.K.				55 gal	330 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 ☐ $

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

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

_____ Signature

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

_____ (Signature of Consignor)

TOTAL CHARGES: $

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

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

CERTIFICATION

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

GENERATOR'S SIGNATURE _____ DATE 4/14/81

This is to certify acceptance of the hazardous waste shipment.

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

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

TSDF SIGNATURE _____ DATE 4/14/81

TO 124x 4/14/81 J-63 9781

5

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TSDF COPY

000033

HAZARDOUS WASTE MANIFEST

006
MANIFEST DOCUMENT NUMBER

5492 Purchase Order #
SHIPPER NUMBER

Thomas Solvent Company
NAME OF CARRIER (SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND00516377	Rieke Corporation - 500 W. 7th St. Auburn, IN 46706 (219) 925-3700	5/27/81
TRANSPORTER # 1	MID039993902	Thomas Solvent Company - Ft Wayne, IN 46825 5605 Plainview Dr (219) 482-9638	
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND01636065	American Chemical Service 420 S. Colfax, Griffith IN 46319 (219)924-4370	6/3/81
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
7 dr		F005	Spent Non-Halogenated Solvents, M.E.K.				55 gal	~~300~~ 385 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

[signature] 5-26-81
GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

Terry Lemmon 5-27 81
TRANSPORTER #1 SIGNATURE & DATE TRANSPORTER #2 SIGNATURE & DATE (if required)

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

[signature] 6-3-81
TSDF SIGNATURE DATE

3

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TRANSPORTER #2

000586

HAZARDOUS WASTE MANIFEST

006
MANIFEST DOCUMENT NUMBER

5492 Purchase Order #
SHIPPER NUMBER

Thomas Solvent Company
NAME OF CARRIER (SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND00516377	Rieke Corporation - 500 W. 7th St. Auburn, IN 46706 (219) 925-3700	5/27/81
TRANSPORTER # 1	MID039993902	Thomas Solvent Company - Ft Wayne, IN 46825 5605 Plainview Dr (219) 482-9638	
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND01636065	American Chemical Service 420 S. Colfax, Griffith IN 46319 (219)924-4370	6/3/81
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
7 dr		F005	Spent Non-Halogenated Solvents, M.E.K.				55 gal	~~XXX~~ 385 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 ☐ $

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

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

_____ Signature

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

_____ (Signature of Consignor)

TOTAL CHARGES: $

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

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

CERTIFICATION

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

GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

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

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

TSDF SIGNATURE DATE

To 142R T-63 6/3/81 9am

5

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TSDF COPY

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

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: NHD 102 787 322
Manifest Document No: 060689K
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Rio Rancho P & B
200 Industrial Park Loop, Rio Rancho, NM 87124
4. Generator's Phone (505) 892-7824

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

5. Transporter 1 Company Name: Ray-Tech Express, Inc.
6. US EPA ID Number: ILD 980 904 304
C. State Transporter's ID: 1846
D. Transporter's Phone: 312-429-9888

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 016 350 265
G. State Facility's ID
H. Facility's Phone: 219-924-4370

GENERATOR

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

J. Additional Descriptions for Materials Listed Above

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

15. Special Handling Instructions and Additional Information

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

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

Printed/Typed Name | Signature | Month Day Year

TRANSPORTER

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

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

FACILITY

19. Discrepancy Indication Space

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

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

117KT63 6/5/1

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0016769

HAZARDOUS WASTE MANIFEST

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	IND069769487	1 RIPCO, INC., 403 Tyler Street, LaPorte, IN 219-362-5513	6-25-8
TRANSPORTER # 1	IND009842824	Landgrebe Motor Transit 219-462-4181	
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chemical Service, 420 S. Colfax, Griffith, IN 219-924-4370	
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)
6 DM			Flammable Liquid N.O.S. UN Ignitable	1993			C 330	6		

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

204 fc T-50

UJ8662

HAZARDOUS WASTE MANIFEST

MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

LANDGREBE MOTOR TRANSIT
NAME OF CARRIER (SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND069769487	RIPCO, INC., 603 Tyler Street, LaPorte, IN 46350 219-362-5513	
TRANSPORTER # 1	IND009842822	Landgrebe Motor Transit 219-462-4181	
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chemical Service, Colfax Griffith, IN 219-924-4370	8/25/5
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)
12 DM			Flammable Liquid N.O.S.	UN	1993		G	12		
			Ignitable				660			

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

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CERTIFICATION

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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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204E T-50

TSDF COPY

038003

HAZARDOUS WASTE MANIFEST

MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

LANDGREBE MOTOR FREIGHT — NAME OF CARRIER — (SCAC) — CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND069769487	RIPCO, INC. 403 Tyler Street, LaPorte, IN 219-362-5513	
TRANSPORTER # 1	IND009842822	LANDGREBE MOTOR TRANSIT 219-462-4181	
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	AMERICAN CHEMICAL SERVICE, Colfax St. Griffith, IN 219-924-4370	
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 DM			Flammable Liquid N.O.S.	UN	1993		G	5 / 275		

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

204 F-5

038004

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: IND069769487

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
RIPCO, INC.
P.O. Box 398
LaPorte, IN 46350

4. Generator's Phone (219) 362-5513

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Landgrebe Motor Transit

6. US EPA ID Number: IND0C9842824

C. State Transporter's ID

D. Transporter's Phone: 219-462-4181

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 Services
420 S. Colfax Avenue
Griffith, IN 46319

10. US EPA ID Number: IND016360265

G. State Facility's ID

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

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	HM	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. Flammable Liquid N.O.S.		5	DM	5 275	G	F005
b.						
c.						
d.						

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above
F005
UN 1993

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, 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
Ripco, Inc.		12	19	85

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Landgrebe		12	19	

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
FDUNFEE		12	19	85

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

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

204 K-T-50

TSDF COPY

U08005

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. IND069769487 | Manifest Document No. 018 | 2. Page 1 of | Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
RIPCO, INC.
P.O. Box 398
LaPorte, IN 46350

4. Generator's Phone (219) 362-5513

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 219-462-4181

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 Services
420 S. Colfax Avenue
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. Flammable Liquid N.O.S.		5	DM	5	G	~~F005~~ D001
b.						
c.						
d.						

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above
F005
UN 1993

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, 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: Ripco, Inc. | Signature: G E. Cudlin | Month 3 Day 17 Year 86

TRANSPORTER

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

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature: 2MT Bay (5) | Month 3 Day 19 Year 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

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

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

204ET50

TSDF COPY

011924

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. IN D069769487

Manifest Document No. 020

2. Page 1 of

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

3. Generator's Name and Mailing Address

RIPCO, INC.
P.O. Box 398
LaPorte, IN. 46350

4. Generator's Phone (219) 324-9195

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: LANDGREBE MOTOR TRANSIT

6. US EPA ID Number: IND009862824

C. State Transporter's ID

D. Transporter's Phone 219-462-4181

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 SERVICES
420 S. Colfax Avenue
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	Waste No.
a. Flammable Liquid N.O.S.		3	Drms	165	Gal	D001
b.						
c.						
d.						

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above
F005
UN 1993

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, 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
RIPCO, INC.		1	7	87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
LANDGREBE FREIGHT		1	7	87

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

19. Discrepancy Indication Space

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

Printed/Typed Name	Signature	Month	Day	Year
		1	08	87

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

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

3-2042 TSD 3

GAU

TSDF COPY

012471

ZARDOUS MATERIALS PUBLISHING CO., KUTZTOWN, PA. 19530, 215-683-6721

UNRECOVERED DIS- QUAL TO OR IN EXCESS OF HAZARDOUS WASTE ASSIGNED "J" VALUE TO NATIONAL RESPONSE CENTER 24-8802	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-[illegible]-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. IND0697694871 — 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
RIPCO, INC.
P.O. Box 398
LaPorte, IN 46350

4. Generator's Phone 219) 362-5513

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 219-462-4181

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, 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. Flammable Liquid N.O.S. Ignitable UN1993	14	DM	770	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
Robert N. Rippy	Robert N. Rippy	4 2 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month Day Year
LANDGREBE MOTOR TSP	Jean Thompson (14)	4 2 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	4 3 85

EPA Form 8700-22 (3-84)

#2 - TREATMENT, STORAGE, DISPOSAL FACILITY COPY

204T-T-50 ✓

CJ8661

HAZARDOUS WASTE MANIFEST

~~0773~~ 074573

1
MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

Landgrebe Motor Transport, Inc.
NAME OF CARRIER (SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND069761443	Ristance Wire - Argos, Indiana 46501 PH. 892-5161	
TRANSPORTER # 1	IND099842824	Landgrebe Motor Transport, Inc./SR 130/Valparaiso, Ind 46383	
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016260265	PH. 312-768-3400 American Chemical Service, Ind/PO Box 190/Griffith, Ind 46319	
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE 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)
29 Drums	X		Dirty B-6186 Dilator Fluid (FLAMMABLE LIQUID)					29 drums 14,760 LBS. 150000 190		

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 (800) 424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are involved or if a container is damaged 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 ☐ $ 30096

TOTAL CHARGES: $

FREIGHT CHARGES
FREIGHT PREPAID except when box at right is checked ☐ Charges and 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.

5/14/81 29
TRANSPORTER #1 SIGNATURE & DATE TRANSPORTER #2 SIGNATURE & DATE (if required)

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

2

5/14/81
GENERATOR'S SIGNATURE DATE TSDF SIGNATURE

UNLOADED AT DOCK 5/15/81
TO 125K 5/20/81 T-63 9AM

001848

HAZARDOUS WASTE MANIFEST

2
MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

Landgrebe Motor Transport, Inc.
NAME OF CARRIER (SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND069761443	Ristance Wire - Argos, Indiana 46501 Ph. (219) 892-5161	
TRANSPORTER # 1	IND099842824	Landgrebe Motor Transport,Inc./SR 130/Valparaiso,In 46383	
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	Ph (312)768-3400 American Chemical Serv., Ind/PO Box 190/Griffith,Ind.46319	6/3/81
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
13 Drums	X		Dirty B-6186 Dilator Fluid (FLAMMABLE LIQUID)					13 drums (5720#)		

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.

To 142R 6/3/81 T-63 Orm

TSDF SIGNATURE DATE: 6/3/81

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TSDF COPY

001899

HAZARDOUS WASTE MANIFEST

0623
MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

Landgrebe Motor Transport, Inc.
NAME OF CARRIER (SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND069761443	Ristance Wire - Argos, Indiana 46501 Ph.(219)892-5161	
TRANSPORTER # 1	IND099842824	Landgrebe Motor Transport,Inc./SR130/Valparaiso,In 46383	
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	Ph (312) 768-3400 American Chemical Service,Ind/P.O.Box 190/Griffith,In 46319	6/23/81
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
~~15~~ 17 Drums	X		Dirty B-6186 Dilator Fluid (Flammable Liquid)					~~15~~ 17 drums (440#/drum) 8360# ~~7480#~~		

SPECIAL HANDLING INSTRUCTIONS

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

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED
Yes ☐ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

TOTAL CHARGES: $

FREIGHT CHARGES
FREIGHT PREPAID except when box at right is checked ☐ Check box if charges are to be collect

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding
$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

_____ Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges

_____ (Signature of Consignor)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

TSDF SIGNATURE 6/23/81 DATE

5

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TSDF COPY

001900

HAZARDOUS WASTE MANIFEST

07208) 4
MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

~~Landgrebe Motor Transport, Inc.~~ (SCAC) CARRIER NUMBER
NAME OF CARRIER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND969761443	~~Distance Wire~~ - Argos, Ind. 46501 Ph. (219) 892-5161	
TRANSPORTER # 1	IND099842824	Landgrebe Motor Transport, Inc/SR 130/Valparaiso, Ind. 46383	
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	PH (312) 768-3400 American Chemical Service, Inc/PO Box 190/Griffith, Ind. 46319	7/20/87
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)
20 Drums 17	X		Dirty B-6186 Dialator Fluid (FLAMMABLE LIQUID)					20 drums (440#/drum 8800#		

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
UNLOADED AT DOCK 7/20/87

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
TO 1262 T-63 7/21/87 8:20 AM

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TSDF COPY

001901

HAZARDOUS WASTE MANIFEST

5
MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

Landgrebe Motor Transport, Inc.
NAME OF CARRIER (SCAC) CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND069761443	Distance Wire - Argos, Ind. 46501 Ph (219) 892-5161	
TRANSPORTER # 1	IND099842824	Landgrebe Motor Transport, Inc./SR 130/Valparaiso, Ind. 46383	
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chemical Service, Inc./PO Box 190/Griffith, Ind 46319	8/13
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)
18 drums	X		Dirty B-6186 Dilator Fluid (FLAMMABLE LIQUID)					18 drums (440#/drum)= 7920#		

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

To 124R T-63 8/13/81

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TSDF COPY

001002

HAZARDOUS WASTE MANIFEST

7
MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

Landgrebe Motor Transport, Inc.
NAME OF CARRIER (SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND069761443	Distance Wire - Argos, Ind. 46501 Ph. (219) 892-5161	9-23-81
TRANSPORTER # 1	IND099842824	Landgrebe Motor Transport, Inc./SR 130/Valparaiso, Ind. 46383	
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	Ph. (312) 768-3400 American Chemical Service, Ind/PO Box 190/Griffith, In. 46319	9/23/81
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
25 drums	X	F005	Dirty B-6186 Dilator Fluid (FLAMMABLE LIQUID)	1993		29039	25 drums @ 440 lb ea = 11,000 lbs	1,375 gal.		

SPECIAL HANDLING INSTRUCTIONS

If an RQ commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED
Yes ☐ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

TOTAL CHARGES: $

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding
$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."
_____ Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement.
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.
_____ (Signature of Consignor)

FREIGHT CHARGES
FREIGHT PREPAID except when box at right is checked ☐ Check box if charges are to be collect

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

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

TO 125T T-63 9/23/81 0930

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TSDF COPY

001903

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0264737

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 998068

RIVER VALLEY COATINGS INC. (Company Name) 800 N HIGHLAND AVENUE (Address)
AURORA (City) ILLINOIS (State) 60506 (Zip)
0894070016 (Generator Number) G
FED. # ILD005237250

WASTE HAULER(S)

STRAND TRUCKING (Hauler Name) 13442 KENTON CRESTWOOD IL. (Hauler Address)
FED # - ILT-000646810
S.W.H. Registration Number 0024-001

Hauler Name / Hauler Address / S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

FED. # - IND-016360265

AMERICAN CHEMICAL SERVICE INC. (Facility Name) 420 S. COLFAX AVE, GRIFFITH (Address)
9180890202 (Site Number)
GRIFFITH (City) INDIANA (State) 46319 (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: DIRTY 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: FLAMMABLE LIQUID NOS.
HAZARD CLASS: 1993
WEIGHT FOR D.O.T. USE: 450# PER DRUM (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.
QUANTITY OF WASTE DELIVERED: 60 DRUMS 3300
(1) 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.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: AUGUST 28, 1981
John D Zieche (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: 8/28/81
(2) (Authorized Signature) DATE:

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[signature] (Authorized Signature) DATE: 8/28/81

COMMENTS OR SPECIAL INSTRUCTIONS: TRAILER SPOTTED 8/28/81
TO 125R T-63 9/3/81 JM

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

000585

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. ILD005237250 — Manifest Document No.

2. Page 1 of 6 — Information in the shaded areas is not required by Federal law, but is required by Illinois law.

3. Generator's Name and Mailing Address
RIVER VALLEY COATINGS INC.
800 N. HIGHLAND AVE
AURORA IL 60506

4. Generator's Phone ( ) 312-8968333

A. Illinois Manifest Document Number: IL 1121468

B. Illinois Generator's ID: 089160500017

5. Transporter 1 Company Name: STRAND TRUCKING

6. US EPA ID Number: ILD000646810

C. Illinois Tranporter's ID: 03111

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 AVE
GRIFFITH INDIANA 46319

10. US EPA ID Number: IND016360265

G. Illinois INDIANA Facility's ID: 9 18 08 9 00012

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.
GENERATOR a.	FLAMMABLE LIQUID LACQUER REMOVING LIQUID NA1142	X	80	DR	4400	gal	EPA HW Number: D005; 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)
JOHN D. ZIECHE	John D. Zieche	03 24 86

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)
Leonard Strand	Leonard M Strand	03 24 86

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name	Signature	Date (Month Day Year)
MICHAEL O'BRIEN	Michael O'Brien	03 26 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

121KT63

011923

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: I.L.D.0.0.5.2.3.7.2.5.0 | Manifest Document No.: 0.0.0.0.1
2. Page 1 of 8 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
RIVER VALLEY COATINGS, INC.
800 N. Highland Ave., P.O. Box 510
Aurora, IL 60507
4. Generator's Phone (312) 896-8333

A. State Manifest Document Number: INA 0162818
B. State Generator's ID: IL-089005017

5. Transporter 1 Company Name: Mr. Frank Inc.
6. Use EPA ID Number: I.L.T.0.6.9.5.0.6.1.6.0
C. State Transporter's ID: 0079
D. Transporter's Phone: (312) 720-0700

7. Transporter 2 Company Name
8. Use EPA ID Number
E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE, INC.
420 S. Colfax Ave.
Griffith, IN 46319
10. Use EPA ID Number: I.N.D.0.1.6.3.6.0.2.6.5
G. State Facility's ID: 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 [redacted] FLAMMABLE LIQUID N.O.S. UN 1993	0 0 1	T	0 5 0 0 0	G	F001, F003 F005
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR

Printed/Typed Name	Signature	Date Month	Day	Year
John D. Ziecha	John D. Ziecha	0 4	0 6	8 8

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year
Michael A. Pfeifer	Michael A. Pfeifer	0 4	0 6	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
P DUNFEE	P Dunfee	0 4	0 7	8 8

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/126-2675.

INA 0162818

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 TO TSD 4/M

0015233

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: I L D 0 0 5 2 3 7 2 5 0 | Manifest Document No.: 0 0 0 0 1
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
RIVER VALLEY COATINGS, INC.
800 N. Highland Ave., P.O. Box 510
Aurora, IL 60506
4. Generator's Phone (312) 896-6333

A. State Manifest Document Number: INA 0162781
B. State Generator's ID: IL 0890050017

5. Transporter 1 Company Name: Mr. Frank Inc.
6. Use EPA ID Number: I L T 0 6 9 5 0 6 1 6 0
C. State Transporter's ID: 0079
D. Transporter's Phone: (312) 720-0700

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE, INC.
420 S. Colfax Ave.
Griffith, IN 46319
10. Use EPA ID Number: I N D 0 1 6 3 6 0 2 5 5
G. State Facility's ID: 9180890002
H. Facility's Phone: (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE FLAMMABLE LIQUID N.O.S. UN 1993	0 0 1	T T	0 5 5 0 0	G	F001, F003 F005
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR
Printed/Typed Name: John D. Ziecha
Signature: John D. Ziecha
Date: Month 0 5 Day 2 3 Year 8 8

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: John Van Vlymen
Signature:
Date: Month 0 5 Day 2 3 Year 8 8
18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Date: Month Day Year

FACILITY
19. Discrepancy Indication Space
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: T DUNFEE
Signature:
Date: Month 0 5 Day 2 3 Year 8 8

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/126-2675.

INA 0162781

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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INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I L D 0 0 0 6 6 5 8 5 1 | 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
Riverdale Body Shop Ltd.
501 E. 142nd Street, Dolton, IL 60419
4. Generator's Phone (312) 849-9400

A. State Manifest Document Number: INA 0159716
B. State Generator's ID: 1970600001
C. State Transporter's ID: IN9908-0050-11
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 Service | 6. Use EPA ID Number: W I D 0 7 6 1 5 9 8 3 9
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: 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. RQ WASTE PAINT RELATED MATERIAL (F003) FLAMMABLE LIQUID NA1263	004	DM	002.20	G	F003
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

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GENERATOR — Printed/Typed Name: CHARLES H RYAN | Signature: Charles H Ryan | Date: Month 05 Day 04 Year 88

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: K.P Nelson | Signature: K.P Nelson | Date: Month 05 Day 04 Year 88
18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: CHARLES H RYAN | 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: Edward E. Bruno | Signature: Edward E. Bruno | Date: Month 05 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 0159716

EPA Form 8700-22 (Rev. 9-86) Previous editions are obsolete.
State Form 11865
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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
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PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

0015237

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I L D 0 0 0 6 6 5 8 5 1 — Manifest Document No. 0 0 0 0 2
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
Riverdale Body Shop
501 E. 142nd Street Dolton, Ill. 60419

A. State Manifest Document Number: INA 0159624

4. Generator's Phone (312) 849-9400

B. State Generator's ID: 197 060 0001

5. Transporter 1 Company Name: Strand Trucking
6. Use EPA ID Number: I L D 0 0 0 0 6 6 6 8 1 0
C. State Transporter's ID: 0311
D. Transporter's Phone: 312-385-8440

7. Transporter 2 Company Name
8. Use EPA ID Number
E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Service
420 S. Colfax
Griffith, IN 46319
10. Use 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. WASTE PAINT RELATED MATERIAL (F003) FLAMMABLE LIQUID NA1263 RQ	2	DM	1.65	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: CHARLES RYAN — Signature: Charles H Ryan — Date: Month 7 Day 27 Year 88

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials — Printed/Typed Name: STEPHEN J MISSAIT — Signature: Stephen J Missait — Date: Month 7 Day 27 Year 88
18. Transporter 2 Acknowledgement of Receipt of Materials — Printed/Typed Name — Signature — Date: Month Day Year

FACILITY
19. Discrepancy Indication Space
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19. — Printed/Typed Name: FRANK PRICE — Signature: Frank Price — Date: Month 7 Day 27 Year 88

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

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

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INA 0159624

0015298

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. ILD 000 665 851 | 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
Riverdale Body Shop
501 East 142nd Street - Dolton, IL. 60419

4. Generator's Phone (312) 849-9400

A. State Manifest Document Number: INA 0159678
B. State Generator's ID: 1970 600 001

5. Transporter 1 Company Name: Strand Trucking
6. Use EPA ID Number: ILD 000 646 810
C. State Transporter's ID: 0311
D. Transporter's Phone: 312-385-8440

7. Transporter 2 Company Name
8. Use EPA ID Number
E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Service
420 S. Colfax Ave.
Griffith, IN. 46319

10. Use EPA ID Number: IND.016.360.265
G. State Facility's ID
H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
GENERATOR a. RQ WASTE PAINT RELATED MATERIAL FLAMMABLE LIQUID NA 1263	03	d	01/65	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: Charles H. Ryan | Signature | Date: Month 10 Day 16 Year 88

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Leonard III Strand | Signature | Date: Month 10 Day 16 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 | Date: Month 10 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.

EPA Form 8700-22 (Rev. 9-86)
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State Form 11865
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PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

INA 0159678

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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.: ILD 000 665 851
Manifest Document No.: 12128F
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Riverdale Body Shop
501 East 142nd Street, Dolton, IL 60419
4. Generator's Phone (312) 849-9400

A. State Manifest Document Number:
B. State Generator's ID: 1970 600 001

5. Transporter 1 Company Name: Strand Trucking
6. US EPA ID Number: ILD 000 646 810
C. State Transporter's ID: 0311
D. Transporter's Phone: 312-385-8440

7. Transporter 2 Company Name:
8. 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.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. RQ WASTE PAINT RELATED MATERIAL (F003) FLAMMABLE LIQUID NA 1263		02	dm	0110	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.

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Printed/Typed Name	Signature	Month	Day	Year
[illegible]	[signature]	12	20	8[illegible]

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
[illegible]	[signature]	12	20	8[illegible]

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
[illegible]	[signature]	12	21	88

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D.GTCT63 12/21

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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.: ILD 000 665 851
Manifest Document No.: 021388G
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Riverdale Body Shop, Ltd.
501 East 142nd Street, Donton, IL 60419
4. Generator's Phone (312) 849-9400

A. State Manifest Document Number:
B. State Generator's ID: 197 060 0001

5. Transporter 1 Company Name: Strand Trucking
6. US EPA ID Number: ILD 000 646 810
C. State Transporter's ID: 0311
D. Transporter's Phone: 312-385 8440

7. Transporter 2 Company Name:
8. 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
Griffith, IN 46319
10. US EPA ID Number: IND 016 360265
G. State Facility's ID:
H. Facility's Phone: 219-924-4370

GENERATOR

	11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	HM	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	RQ WASTE PAINT RELATED MATERIAL (F003) FLAMMABLE LIQUID NA 1263		01	dm	111	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

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Printed/Typed Name: CHARLES H Read
Signature:
Month Day Year: 12 13 87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Leonard M Strand
Signature:
Month Day Year: 12 13 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: Whitaker A
Signature:
Month Day Year: 12 13 87

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EPA Form 8700-22 (Rev. 9/86) Previous editions are obsolete.

126OCT63 Y/14

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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. ILD 000 665 851 | Manifest Document No. 041789B | 2. Page 1 of | Information in the shaded areas is not required by Federal law.

GENERATOR

3. Generator's Name and Mailing Address
Riverdale Body Shop Ltd.
501 East 142nd St., Dolton, IL 60419
4. Generator's Phone (312) 849-9400

A. State Manifest Document Number
B. State Generator's ID 1970 800 001

5. Transporter 1 Company Name: ADCO Express | 6. US EPA ID Number: ILD 047 267 364
C. State Transporter's ID 0367
D. Transporter's Phone 312-429-1660

7. Transporter 2 Company Name | 8. US EPA ID Number
E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Service
420 South Colfax Avenue
Griffith, IN 46319
10. US EPA ID Number: IND 016 360 265
G. State Facility's ID
H. Facility's Phone 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. RQ WASTE PAINT RELATED MATERIAL (F003) FLAMABLE LIQUID NA 1263	02	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.

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Printed/Typed Name: Charles H Rund | Signature | Month 11 Day 15 Year 87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Lawrence A. Gould | Signature | Month 11 Day 15 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 in Item 19.
Printed/Typed Name: Steve Kunnick | Signature | Month 11 Day 17 Year 87

Style F15REV-6 Labelmaster, Div. of American Labelmark Co. Inc. 60646

EPA Form 8700-22 (Rev. 9/86) Previous editions are obsolete.

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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.: ILD 000 665 851
Manifest Document No.: 552289C
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Riverdale Body Shop Ltd
501 E. 142nd Street, Bolton, IL 60419
4. Generator's Phone (312) 849-9400

A. State Manifest Document Number:
B. State Generator's ID: 1920 600 001

5. Transporter 1 Company Name: ADCO Express
6. US EPA ID Number: ILD 047 267 364
C. State Transporter's ID: 0367
D. Transporter's Phone: 312-429-1660

7. Transporter 2 Company Name:
8. US EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Service
420 South Colfax Avenue
Griffith, IN 46319
10. US EPA ID Number: IND 016 360 265
G. State Facility's ID:
H. Facility's Phone: 219-924-4370

	11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	RQ WASTE PAINT RELATED MATERAIL (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.

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GENERATOR

Printed/Typed Name: C Hazlett + Ryan
Signature: C Hazlett + Ryan
Month Day Year: 5 24 89

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: STEPHEN SEERUP
Signature: Stephen Seerup
Month Day Year: 5 24 89

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name:
Signature:
Month Day Year:

TRANSPORTER

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: WHITAKER A
Signature: A Whitaker
Month Day Year: 5 24 89

FACILITY

Style F15REV-6 Labelmaster, Div. of American Labelmark Co. Inc 60646

EPA Form 8700-22 (Rev. 9/86) Previous editions are obsolete

12-47CT63 5/86

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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. / Manifest Document No.: ILD 000 665 851 731 8 G

2. Page 1 of 6 | Information in the shaded areas is not required by Federal law.

GENERATOR

3. Generator's Name and Mailing Address
Riverdale Body Shop Ltd.
501 East 142nd Street, Dolton, IL 60419

4. Generator's Phone (312) 849-9400

A. State Manifest Document Number:

B. State Generator's ID: 1970 600 001

5. Transporter 1 Company Name: ADCOM 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 071 636 026 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.	HM RQ WASTE PAINT RELATED MATERIAL (F003) FLAMMABLE LIQUID NA 1263	02	DM	0110	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.

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Printed/Typed Name: [illegible] | Signature: [signature] | Month Day Year: 8 6 87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: [illegible] | Signature: [signature] | Month Day Year: [illegible]

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name: | Signature: | Month Day Year:

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: [illegible] | Signature: [signature] | Month Day Year: 8 11 87

Style F15REV-6 LABELMASTER, Div. of AMERICAN LABELMARK CO., CHICAGO, IL 60646

EPA Form 8700-22 (Rev. 9-88) Previous editions are obsolete.

1 2 6 T C T 6 3 8/8

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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. / Manifest Document No.: I L D 0 0 0 6 6 5 8 5 1 1 0 2 4 1

2. Page 1 of 6

Information in the shaded areas is not required by Federal law.

GENERATOR

3. Generator's Name and Mailing Address
Riverdale Body Shop Ltd.
501 East 142nd Street, Dolton, IL 60419

4. Generator's Phone (312) 849-9400

A. State Manifest Document Number

B. State Generator's ID: 197 060 0001

5. Transporter 1 Company Name: ADCOM EXPRESS

6. US EPA ID Number: I L D 0 4 7 2 6 7 3 6 4

C. State Transporter's ID: 0367

D. Transporter's Phone: 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 Chemcial Service
420 South Colfax Avenue,
Griffith, IN 46319

10. US EPA ID Number: I N D 0 1 6 3 6 0 2 6 5

G. State Facility's ID

H. Facility's Phone: 219-924-4370

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. X RQ WASTE PAINT RELATED MATERIAL (F003) FLAMMABLE LIQUID NA 1263	002	DM	00100	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.

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Printed/Typed Name: CHARLES H RYAN | Signature: [signature] | Month Day Year: 1 1 0 1 8 9

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: CARL DAFFRON | Signature: [signature] | Month Day Year: 1 1 0 1 8 9

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: WHITAKER M | Signature: [signature] | Month Day Year: 1 1 0 6 8 9

Style F15 REV-6 LABELMASTER, Div. of AMERICAN LABELMARK CO., CHICAGO, IL 60646

EPA Form 8700-22 (Rev. 9-88) Previous editions are obsolete.

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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. | Manifest Document No.: ILD006558511 | 12390

2. Page 1 of 1 | Information in the shaded areas is not required by Federal law.

GENERATOR

3. Generator's Name and Mailing Address
Riverdale Body Shop Ltd.
501 E. 142nd Street, Dolton, IL 60419

4. Generator's Phone (708) 849-3400

A. State Manifest Document Number:

B. State Generator's ID: 1970 600 001

5. Transporter 1 Company Name: ADCOM EXPRESS

6. US EPA ID Number: ILD047267364

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: 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. RQ WASTE PAINT RELATED MATERIAL (F003) FLAMMABLE LIQUID NA 1263	X	12	DM	1100	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

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Printed/Typed Name: CHARLES H. RIHN | Signature: Charles H. Rihn | Month Day Year: 8/30/90

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: LAURENCE A. GODBOLD | Signature: Laurence A. Godbold | Month Day Year: 8/26/90

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: STEVE KLINUCK | Signature: Steve Klinuck | Month Day Year: 9/3/90

Style F15 REV-6 LABELMASTER, Div. of AMERICAN LABELMARK CO., CHICAGO, IL 60646

EPA Form 8700-22 (Rev. 9-88) Previous editions are obsolete.

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STATE OF ILLINOIS ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

P.O. BOX 19276, SPRINGFIELD, ILLINOIS 62794-9276 (217) 782-6761

FOR SHIPMENT OF HAZARDOUS, INFECTIOUS AND SPECIAL WASTE.

State Form LPC 62 8/81 IL532-0610

PLEASE TYPE (Form designed for use on elite ~~5PHA~~ QUANT. Cal) EPA Form 8700-22 (Rev. 9-86) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: ILD111025006 — Manifest Document No.: 82702

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: Riverside Auto, PO Box 454, Joe River Grv. Il.

Location If Different:

4. Generator's Phone: (708) 639-3222

A. Illinois Manifest Document Number: IL3044980 MANIFEST FEE EXEMPT

B. Illinois Generator's ID: [illegible]

5. Transporter 1 Company Name: ADCO Services — 6. US EPA ID Number: ILD047267264

C. Illinois Transporter's ID: [illegible]

D. Transporter's Phone: [illegible]

7. Transporter 2 Company Name — 8. US EPA ID Number

E. Illinois Transporter's ID: [illegible]

F. Transporter's Phone: [illegible]

9. Designated Facility Name and Site Address: American Chemical Service, 420 S. Colfax Ave. Griffith In. 46319 — 10. US EPA ID Number: IND016360264

G. Illinois Facility's ID: [illegible]

H. Facility's Phone: (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
GENERATOR a. Waste Paint Related Material N.O.S. UN 1263 flammable liq.	001	DM	00050	G	EPA HW Number: XXF003; Authorization Number: IF0005
b.					EPA HW Number: XX; Authorization Number:
c.					EPA HW Number: XX; Authorization Number:
d.					EPA HW Number: XX; 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.

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Printed/Typed Name	Signature	Date (Month Day Year)
Janet Leland	Janet Leland	07 03 90

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)
LEW WARRIANT	[signature]	07 03 90

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name	Signature	Date (Month Day Year)
STEVE KULAVICK	Steve Kulavick	07 11 90

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 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.

COPY 3. TSD COPY

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In case of a spill call the Illinois Office of Emergency Response at 217/782-3637 and the National Response Center at 800/424-8802 or 202/426-2675.

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. TLR 000 035 096 — Manifest Document No. 537 04

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address: Riverside

4. Generator's Phone ( )

A. State Manifest Document Number

B. State Generator's ID: 1110265006

5. Transporter 1 Company Name: ADOC

6. US EPA ID Number

C. State Transporter's ID: 0247

D. Transporter's Phone: 708 499 [illegible]

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address

10. US EPA ID Number

G. State Facility's ID

H. Facility's Phone: 519-894-1576

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.						
b. Waste Paint Related Material NOS. UN 1263 Flammable Liquid	X	002	DM	00100	G	F003 F005
c.						
d.						

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above: G=GALLONS

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

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Printed/Typed Name: J [illegible] — Signature — Month Day Year

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: ROBERT K THORN — Signature: Robert K Thorn — Month Day Year: 03 23 90

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: Steve Kuzmick — Signature: Steve Kuzmick — Month Day Year: 4 4 90

Style F15 REV-6 LABELMASTER, Div. of AMERICAN LABELMARK CO., CHICAGO, IL 60646

EPA Form 8700-22 (Rev. 9-88) Previous editions are obsolete.

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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 D D 9 8 4 6 6 7 1 5 4 — Manifest Document No. 1 2 1 3 F

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Riverside Auto Refinish
315 East 35th, Boise, ID 83714

4. Generator's Phone (208) ~~377-5610~~ 345-7201

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: MR. FRANK, INC.

6. US EPA ID Number: I L D 9 8 4 7 7 5 0 4 9

C. State Transporter's ID: 0079

D. Transporter's Phone: 708-720-0700

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Service
420 South Colfax Avenue
Griffith, IN 46319

10. US EPA ID Number: I N D 0 1 6 3 6 0 2 6 5

G. State Facility's ID

H. Facility's Phone: 219-9244370

GENERATOR

	11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	HM	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	RQ WASTE PAINT RELATED MATERIAL (F003) FLAMMABLE LIQUID NA 1263	X	001	DM	00055	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

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Printed/Typed Name: [illegible] — Signature: [signature] — Month Day Year: 11 27 89

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Walter C Klauba — Signature: Walter C Klauba — Month Day Year: 11 27 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: Whitaker A — Signature: [signature] — Month Day Year: 11 29 89

Style F15 REV-6 LABELMASTER, Div. of AMERICAN LABELMARK CO., CHICAGO, IL 60646

EPA Form 8700-22 (Rev. 9-88) Previous editions are obsolete

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IL 532-610
LPC 62 & 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

0634362

Authorization Number ____ (8–13)

TO BE COMPLETED BY WASTE GENERATOR

RIVERSIDE LAB. (Company Name) | 411 UNION ST. (Address) | 312 232 4705 (Phone Number) | 089 035 0004 (Generator Number)

GENEVA (City) | ILL (State) | 60134 (Zip) | ILD 045051 42 (EPA Number)

WASTE HAULER(S)

MR FRANK INC (Hauler Name) | 201 W. 155TH ST. (Hauler Address) | S.W.H. Registration Number 0079009 (25–31)

312 596 3377 (Phone Number) | ILD 069506166 (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 So. COLFAX. (Address) | 918 089 02 (39–46 Site Number)

GRIFFITH (City) | IND. (State) | (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: WASTE SOLVENTS. | WASTE PHASE: LIQUID. (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION	HAZARD CLASS:	UN or NA Number	EPA HW Number
WASTE SOLVENTS. IGNITABLE		NA1993	#D001

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: 002200 (47–52) | 1 GALLONS (Circle One) 2 CU. YDS. (53)

METHOD OF SHIPMENT (Circle One) (DRUMS ____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) ____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION. ____ (Authorized Signature) | DATE: 4-7-83.

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) ____ (Authorized Signature) | DATE: 04 07 83 (54–59)

(2) ____ (Authorized Signature) | DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

____ (Authorized Signature) | DATE 04 07 83 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: ____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637 | OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV. # 4

SITE COPY - PART 3

TO IART-63 GRM 4.7.83

035016

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.
ILD045055142	00007		

GENERATOR

3. Generator's Name and Mailing Address
RIVERSIDE COATINGS
411 UNION STREET
GENEVA, IL 60134

A. State Manifest Document Number: INA 0117702

4. Generator's Phone: (312) 232-4705

B. State Generator's ID:

5. Transporter 1 Company Name: MT. FRANK, INC

6. Use EPA ID Number: ILD069506160

C. State Transporter's ID: IN9505-0000-21

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 SOUTH COLVAX AVENUE
GRIFFITH, IN 46319

10. Use EPA ID Number: IND016360265

G. State Facility's ID: 9180890002

H. Facility's Phone: (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt./Vol.	I. Waste No.
a. WASTE FLAMMABLE LIQUID N.O.S. UN-1993	001	DM	02400	P	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
WASTE PAINT

K. Handling Codes for Wastes Listed Above
1=GALLONS

15. Special Handling Instructions and Additional Information

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Printed/Typed Name	Signature	Date Month	Day	Year
THOMAS FALLON	Thomas Fallon	06	28	87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year
Miguel GARCIA	Miguel Garcia	06	28	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
DONEE	Donee	06	28	87

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.

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

all 212 TK TSD B

INA 0117702

012470

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.045055142 | 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
RIVERSIDE COATINGS
411 UNION ST
4. Generator's Phone (312-232-4705) GENEVA, IL 60134

A. State Manifest Document Number: INA 0160191
B. State Generator's ID:
C. State Transporter's ID: 110079
D. Transporter's Phone: 312 562 3377
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID: 918089000 2
H. Facility's Phone: 219-924-4370

5. Transporter 1 Company Name: MR. FRANK, INC | 6. Use EPA ID Number: ILD.069506160
7. Transporter 2 Company Name | 8. Use EPA ID Number
9. Designated Facility Name and Site Address: AMERICAN CHEMICAL SERVICE, 420 S. COLFAX AVE, GRIFFITH IN 46319 | 10. Use EPA ID Number: IND.016360265

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 HAZARDOUS LIQUID FLAMMABLE LIQUID ID# 1993~~	001	T	1		~~F003~~
b. WASTE FLAMMABLE LIQUID N.O.S. FLAMMABLE UN 1993	001	T	02800	1	~~F003~~ F005
c.					
d.					

J. Additional Descriptions for Materials Listed Above: WASTE PAINT
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: THOMAS FALLON | Signature: Thomas Fallon | Date: Month 6 Day 23 Year 88

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials — Printed/Typed Name: JOE WEBER | Signature: Joe Weber | Date: Month 6 Day 23 Year 88
18. Transporter 2 Acknowledgement of Receipt of Materials — Printed/Typed Name | Signature | Date: Month . Day . Year .

FACILITY
19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: EDUNFEE | Signature: EDunfee | Date: Month 6 Day 28 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

ADDRESS 3-31

INA 0160191

0015295

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.0.4.5.0.5.5.1.4.7 | 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
RIVERSIDE COATINGS
411 UNION ST.
4. Generator's Phone 312-232-4745 GENEVA, IL 60134

A. State Manifest Document Number: INA 0160190
B. State Generator's ID:
C. State Transporter's ID: 00079
D. Transporter's Phone: 3125963377

5. Transporter 1 Company Name: MR. FRANK, INC
6. Use EPA ID Number: I.L.D.0.6.9.5.0.6.1.6.0
7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
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: 918089000 2
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 UN 1993	001	TT	5300	1	F003 F005
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
WASTE PAINT

K. Handling Codes for Wastes Listed Above
1 = GALLONS

15. Special Handling Instructions and Additional Information

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GENERATOR — Printed/Typed Name: THOMAS FALLON | Signature: Thomas Fallon | Date: Month 8 Day 24 Year 88

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: PETER C. RAUEN | Signature: Peter C. Rauen | Date: Month 8 Day 24 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: T DUNFEE | Signature: T Dunfee | Date: Month 9 Day 6 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.

INA 0160190

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

2 10 KT 90 %

0015296

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 A D 0 5 8 0 4 2 6 2 3	0 0 0 1 0		

3. Generator's Name and Mailing Address
Riverside International Inc.
2160 W. River Drive
Davenport Iowa 52802

4. Generator's Phone 319-323-9743

A. State Manifest Document Number INA 0135282

B. State Generator's ID IAD058042623

5. Transporter 1 Company Name	6. Use EPA ID Number	C. State Transporter's ID
Watts Trucking Service Inc.	I L D 0 4 5 3 7 6 1 0 0	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	10. Use EPA ID Number	G. State Facility's ID
American Chemical Services 420 S. Colfax Ave. Griffith, IN.	I N D 0 1 6 3 6 0 2 6 5	219-924-4770

H. Facility's Phone IND016360265

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt./Vol.	Waste No.
a. "RQ" Flammable Liquid N.O.S., Flammable Liquid, UN 1993 (D001)	0 0 4	D M	0 0 2 2 5	2	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
Item a: Waste Misc. Paint Thinners

K. Handling Codes for Wastes Listed Above
2 = 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.

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Printed/Typed Name	Signature	Date Month	Day	Year
Mr. Ed Conroy		7	3	87

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year
DANNY ROBERTS		7	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 in Item 19.

Printed/Typed Name	Signature	Date Month	Day	Year
Harold E. Pennell		08	04	

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.

EPA Form 8700-22 (Rev. 9-86) Previous editions are obsolete.
State Form 11865
4-204F-T-50 9/N/87M

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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

INA 0135282

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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.	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.0.5.8.0.4.2.6.2.3	9.0.0.0.1		

3. Generator's Name and Mailing Address
RIVERSIDE INTERNATIONAL TRUCKS
2160 WEST RIVER DRIVE, DAVENPORT, IA. 52801
4. Generator's Phone (319) 323-9743

A. State Manifest Document Number: INA 0371573
B. State Generator's ID: N/A

5. Transporter 1 Company Name: WATTS TRUCKING SERVICE, INC.
6. Use EPA ID Number: I.L.D.0.4.5.3.7.6.1.0.0
C. State Transporter's ID: 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 S. COLFAX AVE.
GRIFFITH, IN. 46319
10. Use EPA ID Number: I.N.D.0.1.6.3.6.0.2.6.5
G. State Facility's ID: N/A
H. Facility's Phone: (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. "RQ" WASTE FLAMMABLE LIQUID,N.O.S.	2	D.M	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 government regulations.

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GENERATOR

Printed/Typed Name	Signature	Date Month	Day	Year
[illegible]	[signature]	06	15	90

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year
[illegible]	[signature]	06	15	90

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year
[illegible]	[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.

Printed/Typed Name	Signature	Date Month	Day	Year
[illegible]	[signature]	6	19	90

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY

2047750 6/14

0018247

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 0371573

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. 9 1 C C 2

2. Page 1 of 1 | Information in the shaded areas is not required by Federal law.

GENERATOR

3. Generator's Name and Mailing Address
Rizza Body Shop
485 S. River Rd
Des Plaines IL 60016
4. Generator's Phone (708) 297 3430

A. State Manifest Document Number

B. State Generator's ID 0031063511 6

5. Transporter 1 Company Name: HDC Services | 6. US EPA ID Number: I L D 0 4 7 2 6 7 3 6 4

C. State Transporter's ID

D. Transporter's Phone (708) 424-2013

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
430 S. Clifton Ave
Griffith, IN 46319

10. US EPA ID Number: I N D 0 1 1 3 6 6 3 4 5

G. State Facility's ID

H. Facility's Phone (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	HM	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE PAINT RELATED MATERIAL N.O.S. (D001) FLAMMABLE LIQUID	X	001	DM	00455	1	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
[illegible]	[signature]	04 18 90

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month Day Year
Ronald R. Bullard	[signature]	04 18 90

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 KUNNICK	[signature]	04 23 90

Style F15 REV-6 LABELMASTER, Div of AMERICAN LABELMARK CO., CHICAGO, IL 60646

EPA Form 8700-22 (Rev. 9-88) Previous editions are obsolete

176FT63 4/26

TSDF COPY

0018258

STATE OF MICHIGAN

WASTE-DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS) ☐ Act 136 Waste (OTHER) MI 0074503

IDENTIFICATION

Generator's Name	Primary Transporter's Name	Treatment, Storage or Disposal Facility
ROBERTS CONSOLIDATED IND. INC.	MR. FRANK INC	AMERICAN CHEMICAL SERV. CO.
Site Address	**Transporters Address**	**Facility Address**
2305 SUPERIOR	201 W. 155TH ST.	4205 COLFAX ST.
KALAMAZOO MICH 49001	SO. HOLLAND ILL	GRIFFITH IND
Phone Number	**Phone Number**	**Phone Number**
(616) 381-1100	(312) 596-3377	(219) 924-4370
Generator's Site EPA I.D. Number	**Transporter's EPA I.D. Number**	**Facility Site EPA I.D. Number**
MI D 0 9 5 3 4 2 1 3 4	I L D 0 6 9 5 0 6 1 6 0	I N D 0 1 6 3 6 0 2 6 5

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 PETROLEUM NAPTHA N.O.S	COMBUSTIBLE LIQUID	UN-1255	0 1	1	CT		X			4 3 0 0	GALS.	D 0 0 1
2.													
3.													
4.													
5.													
6.													

COMMENTS

Include Safety precautions and special handling instructions.

PREVIOUSLY SENT TO THIS T.S.D.F.

ACCT. THOMAS SOK

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 Welbon O Louden — Date Shipped MO. DAY YEAR: 9-16-81

TRANSPORTER COMPLETES

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No. 1007908

Subsequent Transporter Vehicle I.D. No's

Transporter Signature ② E. Ellis Owens — Date(s) Received 09 16 81

Subsequent transporter(s) signature(s) ③

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF COMPLETES

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature ④ J. Dwyer — ☐ Accepted ☐ Rejected — Date Received 9/16/81

Facility Site EPA I.D. Number I N D 0 1 6 3 6 0 2 6 5

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 12th T-63 9/14/81 gm.

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. M N D 0 1 8 7 2 5 4 7 3 6 — Manifest Document No. 3 1 9 0 F

2. Page 1 of 1

Information in the shaded areas is not required by Federal law.

GENERATOR

3. Generator's Name and Mailing Address
Rochester Motor Cars
2720 N. Hwy 52 Rochester, MN 55901
4. Generator's Phone (507) 282-9468

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name
ADCOM EXPRESS

6. US EPA ID Number I L D 0 4 7 2 6 7 3 6 5

C. State Transporter's ID 0367

D. Transporter's Phone 708-429-1660

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Service
420 S. Colfax Avenue
Griffith, IN 46319

10. US EPA ID Number I N D 0 1 6 3 6 0 2 6 5

G. State Facility's ID

H. Facility's Phone 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	HM	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. RQ WASTE PAINT RELATED MATERIAL FLAMMABLE LIQUID NA1263		1	DM	55	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 STEVEN TRAUTMAN Signature [signature] Month 3 Day 21 Year 90

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name STEPHEN SEERUP Signature Stephen Seerup Month 3 Day 21 Year 90

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 A. WHITAKER Signature [signature] Month 3 Day 28 Year 90

Style F15REV-6 LABELMASTER, Div. of AMERICAN LABELMARK CO., CHICAGO, IL 60646

EPA Form 8700-22 (Rev. 9-88) Previous editions are obsolete.

26TCT634

TSDF COPY

0018255

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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 087 254 736
Manifest Document No.: 0515898
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Rochester Volkswagon
2720 N. Hwy. 52, Rochester, MN. 55901
4. Generator's Phone (507) 282-9468

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: ADCO Express
6. US EPA ID Number: ILD 047 267 364
C. State Transporter's ID: 0367
D. Transporter's Phone: 312-429-1660

7. Transporter 2 Company Name
8. US EPA ID Number
E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Service
420 South Colfax Avenue
Griffith, IN. 46319
10. US EPA ID Number: IND 016 360 265
G. State Facility's ID
H. Facility's Phone: 219-924-4370

	11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	HM	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	RQ WASTE PAINT RELATED MATERIAL ((F003) FLAMMABLE LIQUID NA 1263	X	1	dm	54	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.

GENERATOR — Printed/Typed Name: Bud Seidel — Signature — Month 05 Day 16 Year 89

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Vincent C. Aguilar — Signature — Month 05 Day 16 Year 89

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature — Month 5 Day 23 Year 89

Stylo F15REV-6 Labelmaster, Div. of American Labelmark Co. Inc. 60646

EPA Form 8700-22 (Rev. 9/86) Previous editions are obsolete

12TCT63 5/23

TSDF COPY

0010759

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. N N D 0 8 7 2 5 4 7 3 6
Manifest Document No.
2. Page 1 of 8
Information in the shaded areas is not required by Federal law

3. Generator's Name
Rochester Volkswagon
2720 N. Highway 52, Rochester, MN 55901
4. Generator's Phone (507) 282-9468

A. State Manifest Document Number IN 034277
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 6 3 6 0 2 6 5
G. State Facility's ID
H. Facility's Phone 219-924-4370

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
RQ WASTE PAINT RELATED MATERIAL (F003) FLAMMABLE LIQUID NA1263	2	D N	1 V E E	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: Bud Seidel
Signature:
Month 1 Day 1 Year 1

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jay Strand
Signature:
Date: Month 1 Day 1 Year 1

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 0 1 Day 1 Year 1

IN 034277

EPA Form 8700-22A (Rev. 11-85)

UHWM 2/LP2

T.S.D. DETACH AND RETAIN THIS COPY

0013202

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 5 5 8 0 1 8 5 — Manifest Document No. D 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
Rock Island Argus
1724 4th Ave.; Rock Island, Il. 61201

4. Generator's Phone (309) 786-6441

A. State Manifest Document Number IN 085966

B. State Generator's ID 1 6 1 0 6 5 5 0 3 1

5. Transporter 1 Company Name: Watts Trucking Service, Inc.

6. US 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. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Service
C&O Railrodd and Colfax Ave.
Griffith, IN. 46319

10. US EPA ID Number: I N D 0 1 6 3 6 0 2 6 5

G. State Facility's ID

H. Facility's Phone 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. Waste Flammable Liquid, N.O.S. UN1993 Flammable Liquid		D M	1650	1	D 0 0 1
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above: Item 14. 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

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: William L. Hoke | 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: Harold F Schmidt | Signature | Month Day Year: 0 6 1 3 86

IN 085966

EPA Form 8700-22A (Rev. 11-85) UHWM 2/LP2

MRC T.S.D. DETACH AND RETAIN THIS COPY

30-2645 4 of

011919

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0116227
1 7

WASTE GENERATOR

ROCKDALE COATINGS + CHEMICAL (Company Name) | 200 MOEN (Address)
ROCKDALE (City) | IL (State) | 60436 (Zip)

Authorization Number 997037
8 13

19708500026
14 Generator Number 24

WASTE HAULER(S)

(1) AMERICAN CHEMICAL SERVICE (Hauler Name) | 420 S. COLFAX GRIFFITH IN 46319 (Hauler Address)
S.W.H. Registration Number 0024002
25 31

(2) ~~AMERICAN CHEMICAL~~ (Hauler Name) | (Hauler Address)
S.W.H. Registration Number
32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) | (Address)
91808902
39 Site Number 46

(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: SOLVENT, PAINT THINNING LIQUID
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: 1/29/80
Robert A. Miller (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 2000 - 4000 (1 GALLONS 2 CU. YDS. (Circle One))
47 52 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) John Hargrood (Authorized Signature) DATE: 01 29 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: 1/29/80
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

0000086

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0116228 (1–7)

WASTE GENERATOR

ROCKDALE COATINGS + CHEMICAL (Company Name) 200 MOEN (Address)
ROCKDALE (City) IL (State) 60436 (Zip)

Authorization Number 997037 (8–13)

1970850002 (14) Generator Number (24)

WASTE HAULER(S)

(1) AMERICAN CHEMICAL SERVICE (Hauler Name) 420 S. COLFAX GRIFFITH IN 46319 (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) _____ (Address) 91808902 (39–46 Site Number)
_____ (City) _____ (State) _____ (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS

WASTE PHASE: _____ (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: SOLVENT, PAINT THINNING LIQUID

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: 3/28/80 Robert L. Miller (Authorized Signature)

WASTE HAULER*

80 QUANTITY OF WASTE RECEIVED 004400 (52) (1 GALLONS / 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) John Haywood (Authorized Signature) DATE: 03/28/80 (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 O Burge (Authorized Signature) DATE: 3 28 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

00000091

COMPLETED BY
IE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0116229

WASTE GENERATOR

Authorization Number 997037

ROCKDALE COATINGS + CHEMICAL (Company Name) 200 MOEN Address
ROCKDALE City IL State 60436 Zip

1970850002 Generator Number

WASTE HAULER(S)

(1) AMERICAN CHEMICAL SERVICE Hauler Name 420 S. COLFAX GRIFFITH IN 46319 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) SAME Address
91808902 Site Number
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: SOLVENT, PAINT THINNING LIQUID
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: 4/13/80 Robert L. Miller (Authorized Signature)

WASTE HAULER*

80 QUANTITY OF WASTE RECEIVED: 004400 1 GALLONS (Circle One) 2 LBS. T

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 Haywood (Authorized Signature) DATE: __/__/__

(2) (Authorized Signature) DATE: 04/14/80

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

(Authorized Signature) DATE: 4/15/80

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

00-00093

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0116230 (1–7)

Authorization Number (8–13): 997037

ROCKDALE COATINGS + CHEM. (Company Name)
200 MOEN (Address)
ROCKDALE (City)
IL (State)
60436 (Zip)

L 970850002 G (14–24) Generator Number

WASTE HAULER(S)

(1) AMERICAN CHEMICAL SERVICE (Hauler Name)
420 S. COLFAX GRIFFITH IN 46319 (Hauler Address)
S.W.H. Registration Number (25–31): 0 0 2 4 0 0 2

(2) (Hauler Name) (Hauler Address)
S.W.H. Registration Number (32–38):

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name)
SAME (Address)
91808902 (39–46) Site Number
(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: SOLVENT, PAINT THINNING LIQUID
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: 6/25/80
Robert L. Miller (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED (47–52): 004400
~~1 GALLONS~~ 2 CU. YDS. (Circle One) (53): 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 Haywood (Authorized Signature) DATE (54–59): 06 25 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. Burg (Authorized Signature) DATE (60–65): 6 25 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

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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
WASTE GENERATOR

0116231 (1–7)

Authorization Number 997037 (8–13)

ROCKDALE COATINGS (Company Name) | 200 MOEN (Address)
ROCKDALE (City) | IL (State) | 60436 (Zip)

1970850002 (14–24) Generator Number

WASTE HAULER(S)

(1) AMERICAN CHEMICAL SERV. (Hauler Name) | 420 S. COLFAX GRIFFITH IN 46319 (Hauler Address)

S.W.H. Registration Number 0024 0002 (25–31)

(2) (Hauler Name) | (Hauler Address)

S.W.H. Registration Number (32–38)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERV (Facility Name) | SAME (Address)

9180890 2 (39–46) Site Number

(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: SOLVENT, PAINT THINNING LIQUID

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: 7-17-80 Robert G Miller (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 4400 (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) John Bodenstab (Authorized Signature) DATE: 7/12/80 (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 E Berg (Authorized Signature) DATE: 7/12/80 (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

00 00078

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0116232

WASTE GENERATOR

ROCKDALE COATINGS (Company Name)
200 MOEN Address
ROCKDALE City
IL State
60436 Zip

Authorization Number 997037

197085 0002 G Generator Number

WASTE HAULER(S)

(1) AMERICAN CHEMICAL SERVICE Hauler Name
420 S. COLFAX GRIFFITH IN 46319 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 SERVICE (Facility Name)
SAME Address
City
State
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: SOLVENT, PAINT THINNING LIQUID
HAZARD CLASS: FLAMMABLE

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 8/21/80 Robert J. Miller (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) J. Haywood (Authorized Signature) DATE 8/21/80

(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 8/21/80

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

00-0076

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0323355

Authorization Number 997037

1970850002 G
Generator Number

TO BE COMPLETED BY WASTE GENERATOR

ROCKDALE COATINGS (Company Name)
200 MOEN Address
ROCKDALE City
IL State 60436 Zip

WASTE HAULER(S)

AMERICAN CHEMICAL SERVICE Hauler Name
4205 COLFAX Hauler Address
GRIFFITH IN 46319

S.W.H. Registration Number 0024001

Hauler Name
Hauler Address

S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name)
SAME Address
City
State
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: SOLVENT, PAINT THINNING LIQUID
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: 004400
(1) GALLONS (Circle One) (2) CU. YDS.

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.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 10/6/80
Robert L. Miller (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) William J. Schuster (Authorized Signature) DATE: 10/6/80

(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:

Michael C. Burg (Authorized Signature) DATE: 10/6/80

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

0000060

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0323357 (1–7)

Authorization Number 997037 (8–13)

BE COMPLETED BY WASTE GENERATOR

ROCKDALE COATINGS (Company Name) | 200 MOEN (Address)
ROCKDALE (City) | IL (State) | 60436 (Zip)

19708500025 (14–24) Generator Number

WASTE HAULER(S)

AMERICAN CHEMICAL SER. (Hauler Name) | 420 S COLFAX GRIFFITH IN. 46319 (Hauler Address)
S.W.H. Registration Number 0024001 (25–31)

(Hauler Name) | (Hauler Address)
S.W.H. Registration Number (32–38)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SER. (Facility Name) | SAME (Address)
91808902 (39–46) Site Number

(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: SOLVENT, PAINT THINNING LIQUID
HAZARD CLASS: FLAMMABLE
WEIGHT FOR D.O.T. USE 40,000 LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.
QUANTITY OF WASTE DELIVERED: 00 40 00 (47–52)
1. GALLONS (Circle One) 2. CU. YDS. (53)

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.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 10/21/80 Robert L. Mills (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) Donald Stout (Authorized Signature) DATE: 10 21 80 (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: 10 21 (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

00-0067

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

0323358

Authorization Number 997037

ROCKDALE COATINGS (Company Name) | 280 MOEN (Address)
ROCKDALE (City) | IL (State) | 60436 (Zip)

197085 002
~~197085 000~~ (Generator Number)

WASTE HAULER(S)

AMERICAN CHEMICAL SERVICE (Hauler Name) | 420 S. COLFAX GRIFFITH IN 46319 (Hauler Address)
S.W.H. Registration Number 0024001

(Hauler Name) | (Hauler Address)
S.W.H. Registration Number

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SER (Facility Name) | SAME (Address)
91 808902 (Site Number)
(City) | (State) | (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS B27K

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: SOLVENT, PAINT THINNING LIQUID | HAZARD CLASS: FLAMMABLE

WEIGHT FOR D.O.T. USE 40,000 LBS TONS (Circle One)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 004000

1 GALLONS (Circle One)
2 CU. YDS.

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.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 11/3/80

Robert J. Miller (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) William J. Taylor (Authorized Signature) DATE: 11 03 80

(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:

Michael O'Brien (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

0000095

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0323359

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 997037

Rockford Coating — 200 Moen — ILD069947559
(Company Name) — Address

Rockford — IL — 61126 — 19708S002
City — State — Zip — Generator Number

WASTE HAULER(S)

American Chemical Service — 420 S Colfax — S.W.H. Registration Number 0024/001
Hauler Name — Hauler Address

c/o Strand Trkg — Griffith IN 46319 — ILT000646810
Hauler Name — Hauler Address — S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Serv — Same — 9108902
(Facility Name) — Address — Site Number

City — State — Zip — TN001636026S

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: Solvent, Paint Thinning Liquid — HAZARD CLASS: Flammable

WEIGHT FOR D.O.T. USE 40000 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 040000

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: 12-5-80 F005 — M. Bulger (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) William J. Lafferty (Authorized Signature) — DATE: 12 Dec 80

(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:

Michael O'Bulger (Authorized Signature) — To Dock 12/5/80 — DATE: 12/9/80

COMMENTS OR SPECIAL INSTRUCTIONS: To 125R 12/10/80 0700 T-13

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

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0323360

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 997037

ROCKDALE COATINGS 200 WOEW #5 — (Company Name) — Address
ILO069997559
ROCKDALE — City — IL — State — 60436 — Zip
19708500 2 G — Generator Number

WASTE HAULER(S)

STRAW TRUCKING — Hauler Name
13642 KENTON CRESTWOOD IL 60312 — Hauler Address
ILT 0006468 10 — S.W.H. Registration Number 0024/002

Hauler Name — Hauler Address — S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE — (Facility Name)
420 S. COLFAX — Address
INDO01360265
91089 02 — Site Number
GRIFFITH — 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: SOLVENT, PAINT THINNING LIQUID
HAZARD CLASS: FLAMMABLE
WEIGHT FOR D.O.T. USE 40,000 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. F005
QUANTITY OF WASTE DELIVERED: 004000
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: 1-20-81 — M. Baldwin (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: 1/20/81

(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: 1 DOBL

COMMENTS OR SPECIAL INSTRUCTIONS: TO 125# 1/20/81 Jim Murphy T-63

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

000375

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0323361

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 197037

ROCKDALE COATINGS | 200 MCEN #S | ILD006997559
(Company Name) | Address

ROCKDALE | IL | 60436 | 197085002 G
City | State | Zip | Generator Number

WASTE HAULER(S)

STRAHN TRUCKING | 13642 KENTON | ILT000646810
Hauler Name | Hauler Address

CRESTWOOD IL 60312

S.W.H. Registration Number 0 0 2 4 2 0 1

Hauler Name | Hauler Address

S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

SERVICE

AMERICAN CHEMICAL | 420 S. COLFAX | IND016360265
(Facility Name) | Address | 9108902 Site Number

City | State | 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: SOLVENT, PAINT THINNING LIQUID

HAZARD CLASS: FLAMMABLE

WEIGHT FOR D.O.T. USE 40,000 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 004000

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: 3-19-81 K078 F005 M. Dadlingard
(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) Stan Strahn (Authorized Signature) DATE: 3/19/81

(2) (Authorized Signature) DATE:

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO /

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Richard [illegible] (Authorized Signature) DATE: 3/19/81

COMMENTS OR SPECIAL INSTRUCTIONS: TRAILER SPOTTED 3/19/81
PUMPED TO 125R T-63 3/26/81 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

000576

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

0323362

SPECIAL WASTE HAULING MANIFEST

Authorization Number 197037

ROCKDALE COATINGS (Company Name) | 200 WOEN #5 (Address) | ILD069959 / 1970850026 (Generator Number)
ROCKDALE (City) | IL. (State) | 60436 (Zip)

WASTE HAULER(S)

STRAN TRUCKING (Hauler Name) | 13643 KENTON CRESTWOOD IL. 60312 (Hauler Address) | ILT 000646410 (S.W.H. Registration Number) 0024/001

(Hauler Name) | (Hauler Address) | (S.W.H. Registration Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | 420 S. COLFAX (Address) | IND016860265 / 9108903 (Site Number)
GRIFFITH (City) | IN. (State) | 46319 (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SOLVENT | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

F005

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: SOLVENT, PAINT THINNER LIQUID | HAZARD CLASS: FLAMMABLE | WEIGHT FOR D.O.T. USE 40,000 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 004000 | 1 GALLONS 2 CU. YDS. (Circle One) 1

METHOD OF SHIPMENT (Circle One) (DRUMS) TANK TRUCK OPEN TRUCK (OTHER) (Specify) N/A

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: 4-15-81 K078 F005 | M. Burke (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: 04 15 81

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[signature] (Authorized Signature) DATE: 4 15 81

COMMENTS OR SPECIAL INSTRUCTIONS: TRAILER SPOTTED 4/15/81
TO 1242 4/15/81 9:30 AM T-63

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

00:0576

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0323363
1 7

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 997037 (8–13)

ROCKDALE COATINGS — 200 MOCK ST — (Company Name / Address)
ROCKDALE — IL — 60436 — (City / State / Zip)
ILD069997559
197085002 G (14–24) Generator Number

WASTE HAULER(S)

STRAW TRUCKING — 13642 KENTON — (Hauler Name / Hauler Address)
CRESTWOOD IL 60312
ILT000646810
S.W.H. Registration Number 0024002 (25–31)

Hauler Name — Hauler Address
S.W.H. Registration Number (32–38)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE — 420 S COLFAX — (Facility Name / Address)
INDO16310265
9108902 (39–46) Site Number
GRIFFITH — IN — 46319 — (City / State / 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:	WEIGHT FOR D.O.T. USE
SOLVENT, PAINT THINNING LIQUID	FLAMMABLE	40,000 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.
QUANTITY OF WASTE DELIVERED: 008000 (47–52)
1 (GALLONS) (Circle One)
2 CU. YDS. (53)

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.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 5/13/81 FOOS — M. Barkley (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: 5/13/81 (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:

James T Murphy (Authorized Signature) DATE: 5/13/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: UNLOADED AT DOCK 5/13/81
PUMPED TO 124E 5/14/81 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

066957

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0403956

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 947037

Rockdale Container 200 Mack #5 815-727-4510 1970850002 G
(Company Name) Address Phone Number Generator Number

Rockdale IL 60436 ILD069997559
City State Zip EPA Number

WASTE HAULER(S)

Strang Trucking 13642 Kenton S.W.H. Registration Number 0034603
Hauler Name Hauler Address

Crestwood IL. 60312 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 Chem. Service 420 S Colfax 9108902
Facility Name Address Site Number

Griffith IND 46319 3127883400 INDO16360215
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: 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	UN or NA Number	EPA HW Number
Solvent Paint	Flammable	UN1993	F005

WEIGHT FOR D.O.T. USE 40,000 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS OR GAL.

QUANTITY OF WASTE DELIVERED 040000

1 (GALLONS) (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One) (DRUMS) Number 35 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] DATE 2-23-81
(Authorized Signature)

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] DATE 02/23/81
(Authorized Signature)

(2) _____ DATE ___/___/___
(Authorized Signature)

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] DATE 2/23/81
(Authorized Signature)

COMMENTS OR SPECIAL INSTRUCTIONS: TRAILER SPOTTED AT DOCK 2/23/81
PUMPED TO 125E 2/24/81 T-63 Jim Murphy

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

000553

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

0403957 (1–7)

Authorization Number 9 9 7 0 3 7 (8–13)

Rockdale Coatings (Company Name) | 200 Moen Ave #5 (Address) | 8 1 5 7 2 9 4 5 1 0 1 (Phone Number 14) | 9 7 0 8 5 0 0 0 2 G (Generator Number 24)

Rockdale (City) | Illinois (State) | 60436 (Zip) | I L I 0 0 6 4 6 8 1 0 (EPA Number)

WASTE HAULER(S)

Stran Trucking (Hauler Name) | 13642 Kenton Crestwood, Il. 60312 (Hauler Address) | S.W.H. Registration Number 0 0 2 4 0 0 8 (25–31)

3 1 2 3 8 5 4 4 4 0 (Phone Number) | I L I 0 0 0 6 4 6 8 1 0 (EPA Number)

[illegible] (Hauler Name) | (Hauler Address) | S.W.H. Registration Number (32–38)

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chem. Service (Facility Name) | 420 S. Colfax (Address) | 9 1 8 0 8 9 0 2 (39–46 Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip) | 3 127683400 (Phone Number) | I N D 0 1 6 3 6 0 2 6 5 (EPA Number)

(Alternate (Facility Name)) | (Address) | (39–46 Site Number)

(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: 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: Solvent, paint | HAZARD CLASS: flammable | U N 1 9 9 3 (UN or NA Number) | F 0 0 5 (EPA HW Number)

WEIGHT FOR D.O.T. USE 40,000 LBS / TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 0 0 4 4 0 0 (47–52) | GALLONS (Circle One) / CU. YDS (53)

METHOD OF SHIPMENT (Circle One) (DRUMS X 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] 8-22-81 (Authorized Signature) | DATE 8/24/81

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 8/23/81 (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.

[signature] (Authorized Signature) | DATE 8 24 81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS TRAILER SPOTTED 8/24/81 - 40 TO 124 TX 8/24/81 T-63 gpm
40 TO 124 TX T-63 8/27/81 gpm

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

000350

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0403958

Authorization Number 997037

TO BE COMPLETED BY WASTE GENERATOR

Rockdale Coatings (Company Name) | 200 Moen Ave. #5 (Address) | 8157294510 (Phone Number) | 1970850002 (Generator Number)

Rockdale (City) | Il (State) | 60436 (Zip) | ILD069997559 (EPA Number)

WASTE HAULER(S)

Stran Trucking (Hauler Name) | 13642 Kenton - Crestwood, Il. 60312 (Hauler Address) | S.W.H. Registration Number 0024/001

3123854440 (Phone Number) | ILT000646810 (EPA Number)

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

~~American Chem. Service~~ (Facility Name) | 420 S. Colfax (Address) | 91808902 (Site Number)

Griffith (City) | Indiana (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 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
Solvent, paint	Flammable	UN1993	F005

WEIGHT FOR D.O.T. USE: 40,000 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 004000 (1 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 M. Daly (Authorized Signature) DATE: 10-5-81

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) James Batt (Authorized Signature) DATE: 10/5/81

(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:

M. Clair Busse (Authorized Signature) DATE 10/5/81

COMMENTS OR SPECIAL INSTRUCTIONS: TRAILER SPOTTED 10/5/81 TO 126E J-63 10/8/81 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

SITE COPY - PART 3

0403951

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0403959

Authorization Number 9 9 7 0 3 7

TO BE COMPLETED BY WASTE GENERATOR

Rockdale Coatings (Company Name) | 200 Moen Ave. #5 (Address) | 8157294510 (Phone Number) | 1 9 7 0 8 5 0 0 0 2 G (Generator Number)

Rockdale (City) | Il. (State) | 60436 (Zip) | ILD069997559 (EPA Number)

WASTE HAULER(S)

Stran Trucking (Hauler Name) | 13642 Kenton - Crestwood, Il. (Hauler Address) | S.W.H. Registration Number 0 0 2 4 / 0 0 2

3123854440 (Phone Number) | ILT000646810 (EPA Number)

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chem. Service (Facility Name) | 420 S. Colfax (Address) | 9 1 8 0 8 9 0 2 (Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip) | 3127683400 (Phone Number) | INDO163600265 (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:	HAZARD CLASS:	UN or NA Number	EPA HW Number
Solvent, paint	Flammable	UN1993	F005

WEIGHT FOR D.O.T. USE 40,000 (LBS) TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS OR GAL. | QUANTITY OF WASTE DELIVERED: 4000 | (1) GALLONS (Circle One) (2) CU. YDS.

METHOD OF SHIPMENT (Circle One) (DRUMS 80 Number) TANK TRUCK OPEN TRUCK (OTHER (Specify) VAC)

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 T Burgess (Authorized Signature) DATE 11/12/81

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) DATE 11/12/81

(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:

(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. # 3

SITE COPY - PART 3 To 125 R T-63 GPM 11/12/81

000352

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

0410758

Authorization Number 9 9 7 0 3 7

Rockdale Coatings (Company Name) | 200 Moen Ave #5 (Address) | 8 1 5 7 2 9 4 5 1 0 (Phone Number) | 1 9 7 0 8 5 0 0 0 2 (Generator Number) G

Rockdale (City) | Illinois (State) | 60436 (Zip) | I L D 0 6 9 9 9 7 5 5 9 (EPA Number)

WASTE HAULER(S)

Stran Trucking (Hauler Name) | 13642 Kenton Crestwood, Il. 60312 (Hauler Address) | S.W.H. Registration Number 0 0 2 4 / 0 0 1

3 1 2 3 8 5 4 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 Chem. Service (Facility Name) | 420 S. Colfax (Address) | 9 1 8 0 8 9 0 2 (Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip) | 3 1 2 7 6 8 3 4 0 0 (Phone Number) | I N D 0 1 6 2 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: 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:	UN or NA Number	EPA HW Number
Solvent, paint	flammable	U N 1 9 9 3	F 0 0 5

WEIGHT FOR D.O.T. USE 40,000 LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 0 0 4 0 0 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 H. B. Bell (Authorized Signature) DATE: 6/15/81

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 6/15/81 (54–59)

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

Michael W. Burgess (Authorized Signature) DATE 6/15/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TRAILER SPOTTED 6/15/81

25 TO 125K T-63 6/19/81 JPM 55 TO 125K T-63 6/22/81 JPM

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

000375

HAZARDOUS WASTE MANIFEST

ORIGINAL – NOT NEGOTIABLE

MANIFEST DOCUMENT NUMBER: ILD 069997559

Mr. Frank — NAME OF CARRIER (SCAC)

SHIPPER NUMBER: ILD 069506160

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPP OR RECEIVE
GENERATOR/ SHIPPER	ILD 069997559	Rockdale Coatings 200 Moen Ave Bldg #5 Rockdale, Ill 60436 815-729-4510	3/10/8
TRANSPORTER # 1	ILD 069506160	Mr. Frank Inc. 201 W. 155th St., So. Holland, Il. 312-596-3377	3/10/8
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DIS– POSAL FACILITY			
TSDF TREATMENT STORAGE OR DIS– POSAL FACILITY	IND 016360265	American Chemicals Service 420 S. Colfax Griffith, Ind. 312-768-3400	3/10/8

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARG (For Car Use Or
Tank Truck	XX	Waste Solvent Flammable Liquid, N.O.S.	UN1993		4,500 gal	4,500 gal		

SPECIAL HANDLING INSTRUCTIONS

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERE Yes ☐ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

TOTAL CHARGES: $

FREIGHT CHARGES

FREIGHT PREPAID except when box at right is checked — Check box if cr

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding.
$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."
_____ Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges
_____ (Signature of Consignor)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

GENERATOR'S SIGNATURE — DATE

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE — TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

TSDF SIGNATURE — DATE

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

003756

HAZARDOUS WASTE MANIFEST

ORIGINAL – NOT NEGOTIABLE

MANIFEST DOCUMENT NUMBER: ILD 069997559

American Chemical Service — NAME OF CARRIER (SCAC)

SHIPPER NUMBER: IND 016360265 — CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	ILD 069997559	Rockdale Coatings 200 Moen Ave Bldg #5 Rockdale, Ill 60436 815-729-4510	6/9/82
TRANSPORTER # 1	IND 016360265	American Chemicals Service 420 S. Colfax Griffith, Ind. 312-768-3400	6/9/82
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND 016360265	American Chemicals Service 420 S. Colfax Griffith, Ind. 312-768-3400	6/9/82

DATE

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHAR (For C Use C
80 Drums	XX	Waste Solvent Flammable Liquid, N.O.S.	UN1993			4800gal		

SPECIAL HANDLING INSTRUCTIONS

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED: Yes ☐ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding.
$ _____ per _____

"If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

_____ Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

_____ (Signature of Consignor)

TOTAL CHARGES: $

FREIGHT CHARGES
FREIGHT PREPAID (except when box at right is checked) ☐ Check box if

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

GENERATOR'S SIGNATURE — DATE

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE — TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

TSDF SIGNATURE — DATE

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

003788

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0403960

Authorization Number 9 9 7 0 3 7

TO BE COMPLETED BY WASTE GENERATOR

Rockdale Coatings (Company Name) | 200 Moen Ave #5 (Address) | 8 1 5 7 2 9 4 5 1 0 (Phone Number) | 1 9 7 0 8 5 0 0 0 2 G (Generator Number)

Rockdale (City) | Il (State) | 60436 (Zip) | I L D 0 6 9 9 9 7 5 5 9 (EPA Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) | 201 West 155th Street, S. Holland, Il. 60473 (Hauler Address) | S.W.H. Registration Number 0 0 7 9 0 1 9 | FED ID ILD 069506160

312-596-3377 (Phone Number) | EPA Number

Hauler Name | Hauler Address | S.W.H. Registration Number | EPA Number

Phone Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chem. Service (Facility Name) | 420 S. Colfax (Address) | 9 1 8 0 8 9 0 2 (Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip) | 9 1 2 7 6 8 3 4 0 0 (Phone Number) | I N D 0 1 6 3 6 0 2 6 5 (EPA Number)

Alternate (Facility Name) | Address | 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: Solvent, paint | HAZARD CLASS: flammable

U N 1 9 9 3 (UN or NA Number) | F 0 0 5 (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 0 0 4 8 0 0 | 1 GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) (DRUMS_____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION T. Bruno & Bruno (Authorized Signature) DATE 7-18-82

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 02/18/82

(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 2/18/82

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. # 3

SITE COPY - PART 3 To 210 R T-50 GRM 2/18/82

003755

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0403961

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 9 9 7 0 3 7 (8–13)

ROCKDALE COATINGS (Company Name) | 200 MOEN AVE (Address) | 815-729-4510 (Phone Number) | 1 9 7 0 8 5 0 0 0 2 G (14 Generator Number 24)

Rockdale (City) | Il (State) | 60436 (Zip) | I L D 0 6 9 9 9 7 5 5 9 (EPA Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) | 201 West 155th Street (Hauler Address) | S.W.H. Registration Number 0 0 7 9 0 2 / (25–31)

S. Holland, Il. 60473 | 312-596-3377 (Phone Number) | FED ID 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. Service (Facility Name) | 420 S. Colfax (Address) | 9 1 8 0 8 9 0 2 (39 Site Number 46)

Griffith (City) | Indiana (State) | 46319 (Zip) | 312-768-3400 (Phone Number) | I N D 0 1 6 3 6 0 2 6 5 (EPA Number)

Alternate (Facility Name) | Address | 39 Site Number 46

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:	HAZARD CLASS:	UN or NA Number	EPA HW Number
Solvent, paint	flammable	U N 1 9 9 3	F 0 0 5

WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 0 4 7 0 0 (47–52) GALLONS (Circle One) / CU. YDS. (53)

METHOD OF SHIPMENT (Circle One) (DRUMS _____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE 3-10-82

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 3/10/82 (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 3 10 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 / 426-267

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

To 210 R T-50
GEM 3/10/82

003757

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

0527787

Authorization Number 9 9 7 0 3 7

Rockdale Coatings	200 Moen Ave	815-729-4510	1 9 7 0 8 5 0 0 0 2 G
(Company Name)	Address	Phone Number	Generator Number
Rockdale	Il	60436	I L D 0 6 9 9 9 7 5 5 9
City	State	Zip	EPA Number

WASTE HAULER(S)

American Chemical Ser.	420 S. Colfax	S.W.H. Registration Number 0 02 4
Hauler Name	Hauler Address	
	Griffith, Ind. 312-768-3400	IND 0 1 6 3 6 0 2 6 5
		Phone Number / EPA Number
Stevens Trucking	13640 Kenton	S.W.H. Registration Number
Hauler Name	Hauler Address	
	312-385-5440	ILT 0 0 0 6 4 6 8 1 0
		Phone Number / EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chem. Service	420 S. Colfax			9 1 8 0 8 9 0 2
(Facility Name)	Address			Site Number
Griffith	Indiana	46319	312-768-3400	I N D 0 1 6 3 6 0 2 6
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: 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:	UN or NA Number	EPA HW Number
Solvent, paint	flammable	U N 1 9 9 3	F 0 0 5

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 4400 (1) GALLONS (2) CU YDS. (Circle One)

METHOD OF SHIPMENT (Circle One) (DRUMS 40 Number) TANK TRUCK OPEN TRUCK OTHER (Specify) VAC

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 6-10-82

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) Stan [signature] (Authorized Signature) DATE 6/10/82

(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 O'Brien (Authorized Signature) DATE 6/10/82

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 6.10.82 To 125 KT-63 GRM

003759

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

0527788

Authorization Number 997037

ROCKDALE COATINGS (Company Name) | 200 MOEN AVE (Address) | 815-729-4510 (Phone Number) | 1 9 7 0 8 5 0 0 0 2 G (Generator Number)

ROCKDALE (City) | IL (State) | 60436 (Zip) | I L D 0 6 9 9 9 7 5 5 9 (EPA Number)

WASTE HAULER(S)

AMERICAN CHEM. SERVICE (Hauler Name) | 420 S. COLFAX GRIFFITH, IND. 46319 (Hauler Address) | S.W.H. Registration Number 0 0 2 4 0 0 1 | 312-768-3400 (Phone Number) | I N D 0 1 6 3 6 0 2 6 5 (EPA Number)

S THAND Truck (Hauler Name) | 13642 KEENTON (Hauler Address) | S.W.H. Registration Number 0 0 2 7 0 0 1 | 3123555440 (Phone Number) | LT000646510 (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEM. SERVICE (Facility Name) | 420 S. COLFAX (Address) | 9 1 8 0 8 9 0 2 (Site Number)

GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | 312-768-3400 (Phone Number) | I N D 0 1 6 3 6 0 2 6 5 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: 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:	UN or NA Number	EPA HW Number
SOLVENT, PAINT	FLAMMABLE	U N 1 9 9 3	F 0 0 5

WEIGHT FOR D.O.T. USE 26550 LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS OR GAL.

QUANTITY OF WASTE DELIVERED: 3245 (47–52) 0 (53) GALLONS (Circle One) / CU. YDS.

METHOD OF SHIPMENT (Circle One) (DRUMS 59 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 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) Stan [signature] (Authorized Signature) DATE 6/11/82 (54–56)

(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 Bridges (Authorized Signature) DATE 6/11/82 (60–61)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS, 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS, 800 / 424-8802 or 202 / 426-25

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV # 3

SITE COPY - PART 3

On dock 6-11-82 To 126 RT-63 6/14/82

003761

HAZARDOUS WASTE MANIFEST

ORIGINAL – NOT NEGOTIABLE

MANIFEST DOCUMENT NUMBER: ILD 069997559

AMERICAN CHEMICAL SERVICE — NAME OF CARRIER — (SCAC)

SHIPPER NUMBER: IND 016360265 — CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPP OR RECEIV
GENERATOR/ SHIPPER	ILD 069997559	ROCKDALE COATINGS 200 MOEN AVE BLDG 35 ROCKDALE, ILL 60436 815-729-4510	6/11/8
TRANSPORTER # 1	IND 016360265	AMERICAN CHEM. SERVICE 420 COLFAX GRIFFITH, IND. 46319 312-768-3400	6/11/8
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DIS– POSAL FACILITY			
TSDF TREATMENT STORAGE OR DIS– POSAL FACILITY	IND 016360265	AMERICAN CHEM. SERVICE 420 COLFAX GRIFFITH, IND. 46319 312-768-3400	6/11/8

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHAR((For Ca Use O
59	XX	WASTE SOLVENT FLAMMABLE LIQUID, N.O.S.	UN1993					

SPECIAL HANDLING INSTRUCTIONS

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERE Yes ☐ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

TOTAL CHARGES: $

FREIGHT CHARGES — Check box if c except when box at right is checked ☐ a

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding.
$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."
_____ Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.
_____ (Signature of Consignor)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

GENERATOR'S SIGNATURE _____ DATE _____

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE _____ TRANSPORTER #2 SIGNATURE & DATE (If required) _____

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

TSDF SIGNATURE _____ DATE _____

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

003760

TO BE COMPLETED BY WASTE GENERATOR

TO BE RECYLED

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0161888

Authorization Number 998687

~~ROCK - OLA MFG. CORP., 800 N. Kedzie Ave.~~
(Company Name) Address

CHICAGO, Illinois 60651
City State Zip

0316000088 G
Generator Number

WASTE HAULER(S)

(1) AMERICAN CHEMICAL SERVICE, 420 S. Colfax Ave.
Hauler Name Hauler Address
Griffith, Indiana 46319
Lake County

S.W.H. Registration Number 0024002

(2) ~~XXXXXXX~~ Hauler Address

S.W.H. Registration Number

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE, 420 S. Colfax Ave.
(Facility Name) Address

91808902
Site Number

Griffith, Indiana 46319
City State Zip

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ORGANIC SOLVENTS
(To be recyled)

WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Waste Solvents & Paint Pigments

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: 9/22/80

(Authorized Signature) Maintenance Foreman

WASTE HAULER* 39055

QUANTITY OF WASTE RECEIVED: 2145

(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) Thomas Strand-Brien
(Authorized Signature)

DATE: 9 / 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:

Thomas Strand-Brien
(Authorized Signature)

DATE: 9-22-80

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

000071

TO BE COMPLETED BY WASTE GENERATOR

TO BE RECYLED

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0161890

Authorization Number 9 9 8 6 8 8

ROCK-OLA MFG. CORP. 800 N. Kedzie Ave.
(Company Name) Address

Chicago, Illinois 60651
City State Zip

0 3 1 6 0 0 0 0 8 8 6
Generator Number

WASTE HAULER(S)

(1) AMERICAN CHEMICAL SERVICE, 420 S. Colfax Ave.
Hauler Name Hauler Address
Griffith, Indiana 46319, Lake County

S.W.H. Registration Number ~~0 0 2 4~~ XXXXXXXXXXXXXX

(2) XXXXX
Hauler Name Hauler Address

S.W.H. Registration Number 0024002

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE, 420 S. Colfax Ave. 9 1 8 0 8 9 0 2
(Facility Name) Address Site Number

Griffith, Indiana 46319
City State Zip

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ORGANIC SOLVENT

WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

(To be recyled)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: 1,1,1 Trichloroethane

HAZARD CLASS: ~~Toxic (1-Mildly)~~

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 9/22/80 Joseph Komatsu (Authorized Signature) Maintenance Foreman

WASTE HAULER* 29@55

QUANTITY OF WASTE RECEIVED: 1595 (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) Donna Shard-Driver (Authorized Signature) DATE: 9 / 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:

M. Ellis (Authorized Signature) DATE: 9 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

000072

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

0634355 (1–7)

Authorization Number ____ (8–13)

TO BE COMPLETED BY WASTE GENERATOR

ROCKOLA MFG. CO. (Company Name) | 800 N. KEDZIE AVE (Address) | 3126387600 (Phone Number) | 0316000088 G (Generator Number, 14–24)

CHICAGO (City) | IL (State) | 60651 (Zip) | ILD005163068 (EPA Number)

WASTE HAULER(S)

STRAND TRUCKING CO. (Hauler Name) | CRESTWOOD IL. (Hauler Address) | S.W.H. Registration Number 0311 (25–31)

3123858440 (Phone Number) | ILT000646810 (EPA Number)

AMERICAN CHEMICAL SERV. (Hauler Name) | GRIFFITH, IN (Hauler Address) | S.W.H. Registration Number 00240 (32–38)

2199244370 (Phone Number) | IND016360263 (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERV (Facility Name) | 420 S. COLFAX AVE (Address) | 9180890 (Site Number, 39–46)

GRIFFITH (City) | IN (State) | 46319 (Zip) | 2199244370 (Phone Number) | IND016360263 (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: FLAMMABLE LIQUID N.O.S. | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
WASTE SOLVENTS	IGNITABLE	UN1993	F005

WEIGHT FOR D.O.T. USE: 10,800 (LBS) TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 001350 (47–52) | (1) GALLONS (Circle One) 2 CU. YDS | 1 (53)

METHOD OF SHIPMENT (Circle One) | (DRUMS 27 Number) | TANK TRUCK | OPEN TRUCK | (OTHER (Specify) UAN)

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: G David Fisher (Authorized Signature) | DATE: 10/14/82

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) James Button (Authorized Signature) | DATE: 10 14 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 O Davis (Authorized Signature) | DATE: 10/14/82 (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 / 426-25

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV. # 4

SITE COPY - PART 3

To 124 K T-63 GKM 10-14-82

003762

610
8/81

BE COMPLETED BY
ASTE 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

0634356

Authorization Number

OCKOLA MFG. CO. (Company Name) | 800 N. KEDZIE AVE (Address) | 3126387600 (Phone Number) | 0316000088 (Generator Number)

CHICAGO (City) | IL (State) | 60651 (Zip) | ILD005163068 (EPA Number)

WASTE HAULER(S)

STRAND TRUCKING CO (Hauler Name) | CRESTWOOD, IL. (Hauler Address) | S.W.H. Registration Number 0311

3123858440 (Phone Number) | ILT000646815 (EPA Number)

AMERICAN CHEMICAL SERV. (Hauler Name) | GRIFFITH, IN. (Hauler Address) | S.W.H. Registration Number 002400

2199244370 (Phone Number) | IND016360263 (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERV (Facility Name) | 420 S. COLFAX AVE (Address) | 9180890 (Site Number)

GRIFFITH (City) | IN (State) | 46319 (Zip) | 2199244370 (Phone Number) | IND016360263 (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 SOLVENTS

HAZARD CLASS: CHLORINATED

UN2831 (UN or NA Number)

F001 (EPA HW Number)

WEIGHT FOR D.O.T. USE [redacted] (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 000700 (GALLONS (Circle One)) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) (DRUMS 14 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 G. David Fisher (Authorized Signature) DATE: 10/14/82

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) James Batten (Authorized Signature) DATE: 10/14/8

(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'Day (Authorized Signature) DATE: 10/14/82

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-25

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV. # 4

SITE COPY - PART 3

To 18FT-63 11-23-82

003763

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

0376

SPECIAL WASTE HAULING MANIFEST

Authorization Number ____ (8–13)

ROCKOLA MFG. CO. (Company Name) 800 N. KEDZIE AVE (Address)
CHICAGO (City) IL (State) 60651 (Zip)

0316000088 G (14–24) Generator Number

WASTE HAULER(S)

STRAND TRUCKING CO. (Hauler Name) CRESTWOOD, IL (Hauler Address)
S.W.H. Registration Number 0311 ILD 000246810 (31)

AMERICAN CHEMICAL SERV. (Hauler Name) GRIFFITH, IL (Hauler Address)
S.W.H. Registration Number 0024002 (32–38)

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERV. (Facility Name) 420 S. COLFAX AVE (Address) 91808902 (39–46) Site Number
GRIFFITH (City) IN (State) 46319 (Zip) IND 016360 ICS

X TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: FLAMMABLE LIQUID N.O.S. WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: F005 WASTE SOLVENTS HAZARD CLASS: IGNITABLE

WEIGHT FOR D.O.T. USE 10,000 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 001000 (47–52)

(1) GALLONS (Circle One) 2 CU. YDS. 1 (53)

METHOD OF SHIPMENT (Circle One) 20 (DRUMS) TANK TRUCK OPEN TRUCK (OTHER) (Specify) UAN

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: 10-5-83 G. David Fisher (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) Jim Bates (Authorized Signature) DATE: 10 5 83 (54–59)

(2) _____ (Authorized Signature) DATE: ___ ___ ___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Michael C. Bailey (Authorized Signature) DATE: 10 5 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

10 To Solid Mix T-50
10 To 204 RT-50 GRM 10.5.83 SITE COPY - PART 3

CJ5348

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

037[illegible]

Authorization Number _____

ROCKOLA MFG. CO. (Company Name) | 800 N. KEDZIE AVE (Address)
CHICAGO (City) | IL (State) | 60651 (Zip)

0316000088 G (Generator Number)

WASTE HAULER(S)

STRAND TRUCKING CO. (Hauler Name) | CRESTWOOD, IL (Hauler Address) | S.W.H. Registration Number 0311 ILD000646810

AMERICAN CHEMICAL SER. (Hauler Name) | GRIFFITH, IL (Hauler Address) | S.W.H. Registration Number 002400

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEM. SERV. (Facility Name) | 420 S. COLFAX AVE (Address) | 9 18089 02 (Site Number)
GRIFFITH (City) | IN. (State) | 46319 (Zip) | IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME FLAMMABLE LIQUID N.O.S. WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

	SHIPPING DESCRIPTION:	HAZARD CLASS:
D001	WASTE FLUX & OIL	IGNITABLE

WEIGHT FOR D.O.T. USE 1800 LBS (circle one) / TONS

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. 3

QUANTITY OF WASTE DELIVERED: 000 155

GALLONS (Circle One) / 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) 4 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.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 10-5-83

David Fisher (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) Jim Baker (Authorized Signature) DATE: 10 5 83

(2) _____ (Authorized Signature) DATE: ___ ___ ___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Michael O'Day (Authorized Signature) DATE: 10 15 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

To 204 R T-50
GRM 10.14.83 ON DOCK

SITE COPY - PART 3

035349

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

037[illegible]

Authorization Number _____

ROCKOLA MFG. CO. (Company Name) 800 N. KEDZIE AVE (Address)
CHICAGO (City) IL (State) 60651 (Zip)

0316000088 G (Generator Number)

WASTE HAULER(S)

STRAND TRUCKING CO. (Hauler Name) CRESTWOOD, IL (Hauler Address)
S.W.H. Registration Number 0311 ILD 000646810

AMERICAN CHEMICAL SERV. (Hauler Name) GRIFFITH, IN (Hauler Address)
S.W.H. Registration Number 002400

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERV. (Facility Name) 420 S. COLFAX AVE (Address) 9180890 (Site Number)
GRIFFITH (City) IN (State) 46319 (Zip) IND 016360265

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:	HAZARD CLASS:	WEIGHT FOR D.O.T. USE
F001 WASTE SOLVENTS	CHLORINATED	5400 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 000450

(1) GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) 9 (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.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 10-5-83 G. David Fisher (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) DATE: 10/5/83

(2) _____ (Authorized Signature) DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[signature] (Authorized Signature) DATE: 10/5/83

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

~~TO 204 R~~
ON DOCK T-50 GRM 10

ON DOCK

TO 118 R 7-63 GRM 10-26-83

SITE COPY - PART 3

035350

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. FLD 032 832 996

Manifest Document No. 0004

2. Page 1 of 1

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Roger Dean Chevrolet
2235 Okeechobee Blvd.
West Palm Beach Fla. 33409

4. Generator's Phone (305-683-8100)

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Strand Trucking Co.

6. US EPA ID Number: ILD 000 646 810

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 Services Co.
420 So. Colfax Ave.
Griffith Ind. 46319

10. US EPA ID Number: IND 016-360-265

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	Waste No.
a. Waste Paint Related Material Flammable Liquid NA 1263		1	dr	55	G	D001
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.

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: Jesse Lunsford

Signature

Month Day Year: 02 04 87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: JAMES BATTEN

Signature

Month Day Year: 02 04 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: Howard E Edwards

Signature

Month Day Year

Style F15R-6 Labelmaster, Div. of American Labelmark Co Inc. 60646

EPA Form 8700-22 (Rev. 4-85) Previous edition is obsolete.

1-126R TC3 b

TSDF COPY

012462

HAZARDOUS WASTE MANIFEST

ORIGINAL – NOT NEGOTIABLE

12-011
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			
TRANSPORTER # 1			
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY			10/29/84
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)
	X									

Rogers Cartage Co.

SPECIAL HANDLING INSTRUCTIO

and, the incident 800-424-8802 (toll ls are discharged per or Chemtrec

COMMENTS Recon

On "Collect on Delivery" shipments, the fe

ENDERED No ☐

REMIT C.O.D. TO: ADDRESS

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 _____

FREIGHT CHARGES

FREIGHT PREPAID except when box at right is checked ☐

Check box if charges are to be collect

(Signature of Consignor)

RECEIVED, subject to the classifications and ... Bill of Lading the property described above in ... 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.

T. Dunfee 10/26/84

TSDF SIGNATURE DATE

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TSDF COPY 125 R-T-63

007227

HAZARDOUS WASTE MANIFEST

ORIGINAL – NOT NEGOTIABLE

12-003
MANIFEST DOCUMENT NUMBER

Rogers Cartage Company
NAME OF CARRIER (SCAC)

IND010594505
SHIPPER NUMBER

ILD006932438
CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND010594505	ROGERS CARTAGE CO 1302 S 11th AVE ROBY, IN 459 1562	
TRANSPORTER # 1	ILD006932438	ROGERS CARTAGE CO 1302 S 11th AVE ROBY IN 459 1562	
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	AMERICAN CHEMICAL 120 COLFAX GRIFFITH, IND 924-4390	
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203)	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
1	X	F005	SPENT NON-HALOGENATED SOLVENT MIXTURE CLASS, FLAMMABLE 1294				GALS	1700		

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

TO 125R T-63

CERTIFICATION 5/13/81

This is to certify that the above-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

Wayne J Stewart 5-13-81
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.

TDonlon 5/13/81
TSDF SIGNATURE DATE

3

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TRANSPORTER #2

0009573

HAZARDOUS WASTE MANIFEST

ORIGINAL – NOT NEGOTIABLE

12-004
MANIFEST DOCUMENT NUMBER

INDD105145 55
SHIPPER NUMBER

Rogers Cartage
NAME OF CARRIER (SCAC)

ILDD061 3 5 4 7
CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IN A 105145 55	Rogers Cartage Co 350 Fifth Ave Robey IN	
TRANSPORTER # 1	IL DD 061 3547	Rogers Cartage Co 350 Fifth Ave Robey IN	
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND 071 20 2 5	American Chemical 435 Colfax Gr. Fe-ll IN	8/12
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203.	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
1	X	F05	SPENT NON-HALOGENATED SOLVENTS, N.O.S. (ACETONE, METHYL ETHYL KETONE) CLASS FLAMMABLE II 1241				ALS	1500		

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 8-11-85

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 8/12/85

To 125 T-63 8/12/85

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TSDF COPY

000574

HAZARDOUS WASTE MANIFEST

ORIGINAL – NOT NEGOTIABLE

11-002
MANIFEST DOCUMENT NUMBER

ILD984[illegible]
SHIPPER NUMBER

ROGERS CARTAGE — [illegible] — [illegible]
NAME OF CARRIER (SCAC) CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	[illegible]	[illegible]	
TRANSPORTER # 1	[illegible]	[illegible]	
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND[illegible]	[illegible]	3/24/91
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 T		F025	Spent non-halogenated solvent mixture Class 1 flammable liquid				K	2000		

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

[illegible] — 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.

T. Dunlop — TSDF SIGNATURE — 3/24/91 — DATE

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TSDF COPY

0030572

HAZARDOUS WASTE MANIFEST

ORIGINAL – NOT NEGOTIABLE

12-005
MANIFEST DOCUMENT NUMBER

IND010594526
SHIPPER NUMBER

Rogers Cartage Co. (SCAC) TCD006913244
NAME OF CARRIER CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND010594526	S. H. [illegible] Co. [illegible] Calumet City, IN	
TRANSPORTER # 1	ILD006913244	Rogers Cartage Co. 1235 E. 95th Ave Lowell, IN	
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND048502261	AMERICAN CHEMICAL 4333 Cline Ave. Griffith IN	3/9/82
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGE (For Carr Use Onl
1	X	F05	Spent Halogenated Solvent Mixture Chlorinated	NA			Gals	7,150		

SPECIAL HANDLING INSTRUCTIONS

If an RQ commodity is spilled on a waterway or adjoining land, the incide must be promptly reported to the Federal government at 1-800-424-8802 (to free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharge creating a serious situation, call shipper's telephone number or Chemtre 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

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.

[illegible] 3/11/25

TSDF SIGNATURE DATE

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TSDF COPY To 125 RT-63 6PM 3/9/82

003764

HAZARDOUS WASTE MANIFEST

ORIGINAL – NOT NEGOTIABLE

12-006
MANIFEST DOCUMENT NUMBER

IND010594505
SHIPPER NUMBER

NAME OF CARRIER (SCAC)

ILD006932138
CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND010594505	ROGERS CARTAGE CO 1302 FIFTH AVE ROBY, IN 659-1562	
TRANSPORTER # 1	ILD006932138	ROGERS CARTAGE CO 1302 FIFTH AVE ROBY, IN	
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	AMERICAN CHEMICAL 4705 COLFAX GRIFFITH IN 924-4310	9/17/82
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrie Use Only)
1	X	F225	WASTE TOLUENE SOLVENT MIXTURE CLASS I FLAMMABLE #1294				GALS	1500		

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

Wayne D. Flavor 9-17-82
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 9/17/82 DATE

3

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TRANSPORTER #2

003785

HAZARDOUS WASTE MANIFEST

ORIGINAL — NOT NEGOTIABLE

12-008
MANIFEST DOCUMENT NUMBER

IND010594505
SHIPPER NUMBER

Rogers Cartage Co.
NAME OF CARRIER (SCAC)

ILD006932438
CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND0o10594505	Rogers Cartage Co., 1302 Fifth Ave., Roby, IN 659-1662	
TRANSPORTER # 1	ILD006932438	Rogers Cartage Co., 1302 Fifth Ave., Roby, IN	
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chemical, 420 Colfax, Griffith, IN 924-4370	9/22/83
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)
	X	F005	Waste Toluene Solvent Mixture Class, Flammable #1294				Gals	2000		

SPECIAL HANDLING INSTRUCTIONS

If an RQ commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED
Yes ☒ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

TOTAL CHARGES: $

FREIGHT CHARGES
FREIGHT PREPAID except when box at right is checked ☐
Check box if charges are to be collected

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding
$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

_____ Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement.
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

_____ (Signature of Consignor)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

_____
GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

T. Smith 9/22/83
TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

T Mulee 9/22/83
TSDF SIGNATURE DATE

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TSDF COPY To 126 ET-63 ERM 9.22.83

CJ5333

HAZARDOUS WASTE MANIFEST

ORIGINAL – NOT NEGOTIABLE

12-007
MANIFEST DOCUMENT NUMBER

INDO 059 4505
SHIPPER NUMBER

ROGERS CARTAGE CO (SCAC) ILD 006 932 438
NAME OF CARRIER CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	INDO 059 4505	ROGERS CARTAGE CO 8025 Tyler Ave Rob, IN 659-1561	
TRANSPORTER # 1	ILD 006 932 438		
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND 063 600 615	AMERICAN CHEMICAL SERVICE 4205 Colfax Griffith, IN	4/25/83
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
1	X	F005	Waste Toluene Solvent Mixture Class Flammable #1294				Gal	2000		

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 4/25/83

5

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TSDF COPY TO124E T-63 GRM 4.25.83

CJ5352

HAZARDOUS WASTE MANIFEST

ORIGINAL – NOT NEGOTIABLE

12010
MANIFEST DOCUMENT NUMBER

IND010594505
SHIPPER NUMBER

ROGERS CARTAGE CO (SCAC) ILD006932438
NAME OF CARRIER CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND010594505	ROGERS CARTAGE CO 1302 5TH AVE ROBY, IN 659-1562	
TRANSPORTER # 1	ILD006932438	ROGERS CARTAGE CO. 1302 5TH AVE ROBY IN.	
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	AMERICAN CHEMICAL 420 CLIFFA GRIFFITH IN 924-4370	6/6/84
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)
	X	F005	WASTE TOLUENE SOLVENT MIXTURE CLASS FLAMABLE #1294				GAL	1500		

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 6-6-84 DATE

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

TSDF SIGNATURE 6/10/84 DATE

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TSDF COPY 124R T-63

007226

HAZARDOUS WASTE MANIFEST

ORIGINAL – NOT NEGOTIABLE

12-011
MANIFEST DOCUMENT NUMBER

IND 079 394 305
SHIPPER NUMBER

[illegible] (Contract)
NAME OF CARRIER (SCAC)

IL D 0 61 2 4 3 0
CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND 079 394 305	[illegible]	
TRANSPORTER # 1	[illegible]	[illegible]	
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	[illegible]	[illegible]	10/29/84
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)
	X		[illegible]							

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

Received 2085 gals

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

[illegible] [illegible]
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.

T Dunlap 10/26/84
TSDF SIGNATURE DATE

STYLE F-50 © LABELMASTER CHICAGO, IL 60628

TSDF COPY 125 K T-63

007227

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. IND 001059 4505 — Manifest Document No. 85 1 — 2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
ROGERS CARTAGE
1302 5TH AVE
ROBY IN

4. Generator's Phone ( ) 659-1562

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: ROGERS CARTAGE — 6. US EPA ID Number: IND 001059 4505 — C. State Transporter's ID — D. Transporter's Phone

7. Transporter 2 Company Name — 8. US EPA ID Number: IND 069 552 950 — E. State Transporter's ID — F. Transporter's Phone

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
420 So Colfax
GRIFFITH IN 46319

10. US EPA ID Number: IND 016 360 265 — G. State Facility's ID

H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE SOLVENT			2100		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)

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Date (Month Day Year): 2 27 85

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature: Paul Lenzi | 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: EDWARD F. DUNNE | Signature: E F Dunnee | Date (Month Day Year): 2 27 85

EPA Form 8700-22 (3-84)

125 R 7-63

#2 - TREATMENT, STORAGE, DISPOSAL FACILITY COPY

038030

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.: IND 0010594505 — 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
ROGERS CARTAGE
1302 5th AVE
ROBYS, INDIANA 219) 659-1562

A. State Manifest Document Number
B. State Generator's ID

4. Generator's Phone

5. Transporter 1 Company Name: ROGERS CARTAGE
6. US EPA ID Number: IND 0010594505
C. State Transporter's ID
D. Transporter's Phone

7. Transporter 2 Company Name
8. US EPA ID Number: IND 006952950
E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
AMERICAN CHEMCAL SERVICE INC
420 S. COLFAX AVE
GRIFFITH, INDIANA 46319
10. US EPA ID Number: IND -16360265
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. WASTE SOLVENT FLAMMABLE LIQUID NOS UN 1993	1	TT	850		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)
David Reddy	David Reddy	6 17 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)
David Reddy	David Reddy	6 17 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)
ED UNFEE		6 17 85

EPA Form 8700-22 (3-84)

123 RT-63

#2 - TREATMENT, STORAGE, DISPOSAL FACILITY COPY

U36031

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.: IND 0010594505 | 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
ROGERS CARTAGE CO.
1302 5th AVE, ROBY, INDIANA 46326
4. Generator's Phone (219) 659-1562

A. Illinois Manifest Document Number: IL 1187825

B. Illinois Generator's ID

5. Transporter 1 Company Name: ROGERS CARTAGE CO. | 6. US EPA ID Number: IND 0010594505

C. Illinois Tranporter's ID

D. ( ) Transporter's Phone

7. Transporter 2 Company Name | 8. US EPA ID Number: IND 006952950

E. Illinois Transporter's ID

F. ( ) Transporter's Phone

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE INC.
420 S. COLFAX AVE.
GRIFFITH, INDIANA 46319 | 10. US EPA ID Number: IND 16360265

G. Illinois Facility's ID

H. Facility's Phone: (219-924-4370

GENERATOR

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	WASTE SOLVENT FLAMMABLE LIQUID NOS UN 1993		1	TT	1100		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

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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: F STROHMEYER | Signature | Date: Month 9 Day 30 Year 82

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: F STROHMEYER | Signature | Date: Month 9 Day 30 Year 82

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: EDUNFEE | Signature | Date: Month 9 Day 30 Year 82

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637 OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV. # 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½ Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

125 E. T-63

U38600

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 IND 0010594505 | Manifest Document No.

2. Page 1 of 1

Information in the shaded areas is not required by Federal law

3. Generator's Name
Rogers Cartage Co.
1302 5th Ave
Hammond, In. 46326

4. Generator's Phone (219)659-1562

A. State Manifest Document Number IN 009577

B. State Generator's ID

5. Transporter 1 Company Name
Rogers Cartage Co.

6. US EPA ID Number ILL | ILD006932438

C. State Transporter's ID

D. Transporter's Phone

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9 Designated Facility Name and Site Address
American Chemical Service Inc.
420 S/ Colfax Av
Griffith, In. 46319

10. US EPA ID Number IND 163602655

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. Waste Solvent Flammable Liquid NOS UN 1993	1	TT	1500		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

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 FDUNFEE | Signature | Month Day Year 4 1 86

EPA Form 8700-22A (Rev. 11-85) UHWM 2/LP2

T.S.D. DETACH AND RETAIN THIS COPY

125 F T63

011920

IN 009577

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.: IND 0010594505

2. Page 1 of

Information in the shaded areas is not required by Federal law.

3. Generator's Name: Rogers Cartage Co.
4. Generator's Phone ( ): 1302 Fifth Ave Hammond, In.46326 (219)659-1562

A. State Manifest Document Number: IN 009579

B. State Generator's ID:

5. Transporter 1 Company Name: Rogers Cartage Co.
6. US EPA ID Number: ILL ILD006932438

C. State Transporter's ID:

D. Transporter's Phone:

7. Transporter 2 Company Name:
8. US EPA ID Number:

E. State Transporter's ID:

F. Transporter's Phone:

9. Designated Facility Name and Site Address: American Chemical Service Inc. 420 S. Colfax Av Griffith, In. 46319
10. US EPA ID Number: IND 16360265

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.
GENERATOR a. Waste Solvent, Flammable Liquid NOS UN 1993	1	TT	1500		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

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
		6	12	86

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
		6	12	86

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	6	16	86

IN 009579

EPA Form 8700-22A (Rev. 11-65) UHWM 2/LP2

T.S.D. DETACH AND RETAIN THIS COPY

122 F 763

011921

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.: IND 010594505

2. Page 1 of: 1

Information in the shaded areas is not required by Federal law

3. Generator's Name: Rogers Cartage Co.
4. Generator's Address: 1302 5th Av Hammond, In 46326 (219)659-1562

A. State Manifest Document Number: IN 009581
B. State Generator's ID:

5. Transporter 1 Company Name: Rogers Cartage Co.
6. US EPA ID Number: ILL ILD006932438
C. State Transporter's ID:
D. Transporter's Phone: 219-659-1562

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 Av
Griffith, In. 46319
10. US EPA ID Number: IND 016360265
G. State Facility's ID:
H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. Waste Solvent Flammable Liquid NOS UN 1993	1	TT	2000	VOL	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: [illegible] | Signature: [signature] | Month/Day/Year: 10 12 21 [illegible]

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials — Printed/Typed Name: [illegible] | Signature: [signature] | Date: Month/Day/Year: 10 12 21 [illegible]

18. Transporter 2 Acknowledgement of Receipt of Materials — Printed/Typed Name: | Signature: | Date: Month/Day/Year:

FACILITY

19. Discrepancy Indication Space

20 Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.

Printed/Typed Name: F DUNFEE | Signature: F Dunfee | Month/Day/Year: 10 12 21 [illegible]

IN 009581

EPA Form 8700-22A (Rev. 11-85)

T.S.D. DETACH AND RETAIN THIS COPY 125R-T-63

UHWM 2/LP2

011922

HAZARDOUS WASTE MANIFEST

ORIGINAL – NOT NEGOTIABLE

Ar. 1:00 PM.
LU.

12-009
MANIFEST DOCUMENT NUMBER

IND010594505
SHIPPER NUMBER

ROGERS CARTAGE CO. 4146-43
NAME OF CARRIER (SCAC)

ILD006932438
CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND001594505	ROGERS CARTAGE CO. 1302 fifth ave. ROBY, IN 659-1562	
TRANSPORTER # 1	ILD006932438	ROGERS CARTAGE CO. 1302 fifth ave. ROBY, IN	
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	AMERICAN CHEMICAL 420 COLFAX GRIFFITH, IN. 924-4370	
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)
	X	F005	WASTE TOLUENE SOLVENT MIXTURE CLASS, FLAMMABLE	1294			GALS.	2000		

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

2-13-84
GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

F. Sutko 2-13-84
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

2

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TRANSPORTER #1

To 210 RT-50 GRAY 2-13-84

007225

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.: IND 010594505 0000 3

2. Page 1 of: 1

Information in the shaded areas is not required by Federal law

3. Generator's Name: Rogers Cartage Co.
1302 5th Av
Hammond, In 46326

4. Generator's Phone: (219)659-1562

A. State Manifest Document Number: IN 009589

B. State Generator's ID:

5. Transporter 1 Company Name: Rogers Cartage Co.

6. US EPA ID Number: ILL IL0006932438

C. State Transporter's ID:

D. Transporter's Phone: 219-659-1562

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 Av
Griffith, In 46319

10. US EPA ID Number: IND 016360265

G. State Facility's ID:

H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
GENERATOR a. Waste Solvent Flammable Liquid NOS UN 1993	1	TT	125100	VOL	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
T. Keithley		09	24	87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date
R. Bailey		09 24 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
P DUNFEE	P Dunfee	09	24	87

IN 009589

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126TR T63M

012466

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.: I N D 0 1 0 5 9 4 5 0 5 0 0 0 0 2

2. Page 1 of: 1

Information in the shaded areas is not required by Federal law

3. Generator's Name: Rogers Cartage Co.
1302 5th Av
4. Generator's Phone: Hammond, In. 46326 (219) 659-1562

A. State Manifest Document Number: IN 009586

B. State Generator's ID:

5. Transporter 1 Company Name: Rogers Cartage Co.
6. US EPA ID Number: I L D 0 0 6 9 3 2 4 3 8

C. State Transporter's ID:

D. Transporter's Phone: 219-659-1562

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 Av.
Griffith, In. 46319
10. US EPA ID Number: I N D 0 1 6 3 6 0 2 6 5

G. State Facility's ID:

H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
GENERATOR a. Waste Solvent Flammable Liquid NOS UN 1993	1	T T	1500	G VOL	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
T. Keithley		7	28	87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Stanley Kolze		7	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
EDWARD		07	02	87

IN 009586

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.: I N D 0 1 0 5 9 4 5 0 5 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
Rogers Cartage Co.
1302 5th Av
Hammond, In. 46326

4. Generator's Phone: (210) 659-1562

A. State Manifest Document Number: IN 009585

B. State Generator's ID:

5. Transporter 1 Company Name: Rogers Cartage Co.

6. US EPA ID Number: I N D 0 0 6 9 3 2 4 3 8

C. State Transporter's ID:

D. Transporter's Phone: 219-659-1562

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 Av
Griffith, In. 46319

10. US EPA ID Number: I N D 0 1 6 3 6 0 2 6 5

G. State Facility's ID:

H. Facility's Phone: (219-924-4370)

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
GENERATOR a. Waste Solvent Flammable Liquid NOS UN 1993	1	TT	2000	VOL	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
T. Keithley		5	11	87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date: Month	Day	Year
Stanley Kolze		5	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
[illegible]		5	12	87

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2.12R - T5D E

IN 009585

012464

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. IND 010594505 — Manifest Document No. 0000 1
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law

3. Generator's Name: Rogers Cartage Co.
4. Generator's Phone: 1302 Fifth Av, Hammond, In.46326 219-659-1562

A. State Manifest Document Number: IN 009582
B. State Generator's ID:

5. Transporter 1 Company Name: Rogers Cartage Co. — 6. US EPA ID Number: ILL ILD005932438
C. State Transporter's ID:
D. Transporter's Phone: 219-659-1562

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 Av Griffith, In. 46319 — 10. US EPA ID Number: IND 016360265
G. State Facility's ID:
H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a. Waste Solvent Flammable Liquid NOSD UN 1993	1	TT	2000	VOL	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
T. Keithley		2-13-87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials — Date

Printed/Typed Name	Signature	Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials — Date

Printed/Typed Name	Signature	Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.

Printed/Typed Name	Signature	Month Day Year
FDUNFEE		2 16 87

IN 009582

EPA Form 8700-22A (Rev. 11-85) UHWM 2/LP2

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206K TSD 012463

Division of Land Pollution Control - Manifest
Indiana State Board of Health
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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.: IND 010594505 | Manifest Document No.: 00 00 6 | 2. Page 1 of: 1 | Information in the shaded areas is not required by Federal law

3. Generator's Name: Rogers Cartage Co.
4. Generator's Phone: 1302 5th Av, Hammond, In 46326 219-659--1562

A. State Manifest Document Number: IN 009593
B. State Generator's ID:

5. Transporter 1 Company Name: Rogers Cartage Co.
6. US EPA ID Number: ILL IL0016932438
C. State Transporter's ID:
D. Transporter's Phone: 219-659-1562

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 Av, Griffith, In. 46319
10. US EPA ID Number: IND 016360265
G. State Facility's ID:
H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. Waste Solvent Flammable Liquid NOS UN 1993 R.Q.	1	T T	2500	VOL	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

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. Keithley		2	26	88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
L. Smith				

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
C. Mills	C. Mills	02	29	88

IN 009593

EPA Form 8700-22A (Rev. 11-85)

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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.: IND 010594505 | Manifest Document No.: 0 0 0 0 7
2. Page 1 of: 1
Information in the shaded areas is not required by Federal law

3. Generator's Name
Rogers Cartage Co.
1302 5th Av, Hammond, In 46326
4. Generator's Phone (219-659-1562

A. State Manifest Document Number: IN 009594
B. State Generator's ID:

5. Transporter 1 Company Name: Rogers Cartage Co.
6. US EPA ID Number: I LL 1 1 D 0 6 9 3 2 4 3 8
C. State Transporter's ID:
D. Transporter's Phone: 219-659-1562

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 Av
Griffith, In 46319
10. US EPA ID Number: IND 016360265
G. State Facility's ID:
H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. Waste Solvent, Flammable Liquid NOS UN 1993 R.Q.	1	T T	2500	VOL	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.

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. Keithley		2	29	88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
C. Wynn		2	29	88

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name	Signature	Month	Day	Year
C. Mumma				

IN 009594

EPA Form 8700-22A (Rev. 11-85)

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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. IND 010594505 — Manifest Document No. 0 0 0 0 B
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law

3. Generator's Name
Rogers Cartage Co.
1302 5th Av
Hammond, In 46326
(219) 659-1562

A. State Manifest Document Number: IN 009596
B. State Generator's ID:

5. Transporter 1 Company Name: Rogers Cartage Co
6. US EPA ID Number: ILL ILD006932438
C. State Transporter's ID:
D. Transporter's Phone: 219-659-1562

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 Av
Griffith, In 46319
10. US EPA ID Number: IND 016360265
G. State Facility's ID:
H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. Waste Solvent, Flammable Liquid NOS (RQ) UN 1993	1	TT	2500	VOL	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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GENERATOR

Printed/Typed Name: T. Keithley — Signature — Month Day Year: 07 18 88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: R. Bailey — 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: FOUNFEE — Signature — Month Day Year: 07 19 88

IN 009596

EPA Form 8700-22A (Rev. 11-85) UIHWM 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. IND 010594505 | Manifest Document No. 00009 | 2. Page 1 of | Information in the shaded areas is not required by Federal law

3. Generator's Name
Rogers Cartage Co.
1302 5th Av
Hammond, In 46326 (219-659-1562)

A. State Manifest Document Number IN 009599

B. State Generator's ID

4. Generator's Phone ( )

5. Transporter 1 Company Name: Rogers Cartage Co.

6. US EPA ID Number: ILD 006932438

C. State Transporter's ID

D. Transporter's Phone 219-659-1562

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 Idc.
420 S.Colfax Av
Griffith, In

10. US EPA ID Number: IND 016360265

G. State Facility's ID

H. Facility's Phone 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
GENERATOR a. Waste, Solvent Flammable Liquid NOS (RQ) UN 1993	1	TT	2000	VOL	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
T. Keithley		10	2	88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
T. Schultz		10	2	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
P DUNFEE	P Dunfee	10	4	88

IN 009599

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UHWM 2/LP2

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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	Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.
IND .010594505 . . .	.00010		

3. Generator's Name and Mailing Address
Rogers Cartage Co.
1302 5th Av
Hammond, In 46326
4. Generator's Phone ( ) (219) 659-1582

A. State Manifest Document Number: INA 0303327
B. State Generator's ID:

5. Transporter 1 Company Name: Rogers Cartage Co
6. Use EPA ID Number: ILL ILD006932438. .
C. State Transporter's ID:
D. Transporter's Phone: 219-659-1562

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 Av
Griffith, In
10. Use EPA ID Number: IND. 016360265. . . .
G. State Facility's ID:
H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. Waste Solvent Flammable Liquid NOS (RQ) UN1993	.1.	TT	.2000.	VOL	F003 F005
b.	. .	.	. . . .		
c.	. .	.	. . . .		
d.	. .	.	. . . .		

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR

Printed/Typed Name	Signature	Date Month	Day	Year
T. Keithley	T Keithley	12	07	88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year
Jerry Wilber		12	07	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	Signature	Month	Day	Year
F DUNFEE	F Dunfee	12	07	88

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0303327

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

JIITCT50 12/7/88

COPY 5. TSD COPY

0015291

HAZARDOUS WASTE MANIFEST

ORIGINAL — NOT NEGOTIABLE

12-001
MANIFEST DOCUMENT NUMBER

IND010594505
SHIPPER NUMBER

ROGERS CARTAGE COMPANY
NAME OF CARRIER (SCAC)

ILD006932438
CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND010594505	ROGERS CARTAGE CO., 1302 & 5TH AVE. ROBY, IND. 659-1562	/ /
TRANSPORTER # 1	ILD006932438	ROGERS CARTAGE CO., 1302 - 5TH AVE. ROBY, IND. 659-1562	/ /
TRANSPORTER # 2 (If required)			/ /
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	AMERICAN CHEMICAL, 420 COLFAX, GRIFFTH, IND. 924-4370	/ /
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/NA #	EXEMPTION SHIPPING LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
1	X	F005	SPENT NON-HALOGENATED SOLVENT MIXTURE, CLASS, FLAMMABLE, #1294				GALS	2000		

SPECIAL HANDLING INSTRUCTIONS
124F

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."

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

_____ (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.
To 124F 12/5/13

TRANSPORTER #1 SIGNATURE & DATE

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

TRANSPORTER #2 SIGNATURE & DATE (if required)

TSDF SIGNATURE 12/5/13 DATE

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TSDF COPY

000273

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.: INDO10594505 / 00005

2. Page 1 of: 1

Information in the shaded areas is not required by Federal law

3. Generator's Name
Rogers Cartage Co.
1302 5th Av
4. Generator's Address: Hammond, In. 46326
(219)659-1562

A. State Manifest Document Number: IN 009591

B. State Generator's ID

5. Transporter 1 Company Name: Rogers Cartage Co.
6. US EPA ID Number: ILD006932438
C. State Transporter's ID
D. Transporter's Phone: 219-659-1562

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 Av
Griffith, In. 46319
10. US EPA ID Number: INDO16360265
G. State Facility's ID
H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
GENERATOR a. Waste Solvent Flammable Liquid NOS UN 1993	1	T T	2500	VOL	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
T. Keithley		12	11	87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date: Month	Day	Year
Bill Sica				

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
J DUNFEE	J Dunfee	12	11	87

EPA Form 8700-22A (Rev. 11-85) UHWM 2/LP2

T.S.D. DETACH AND RETAIN THIS COPY

126TC T63A

IN 009591

012467

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of	Information in the shaded areas not required by Federal law. but items D, F, H and I are required b State law.
IND 010594505 . . .	00013.		

3. Generator's Name and Mailing Address
Rogers Cartage Co.
1302 5th Av
Hammond, In 46326

4. Generator's Phone (219-659-1562

A. State Manifest Document Number: INA 0303330
B. State Generator's ID:

5. Transporter 1 Company Name	6. Use EPA ID Number	C. State Transporter's ID
Rogers Cartage Co	.ILL ILD006932438.	D. Transporter's Phone 219-659-156
7. Transporter 2 Company Name	8. Use EPA ID Number	E. State Transporter's ID
	. . . . .	F. Transporter's Phone

9. Designated Facility Name and Site Address	10. Use EPA ID Number	G. State Facility's ID
American Chemical Services Inc 420 S. Colfax Av Griffith, In	.IND. 016360265. . .	H. Facility's Phone 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. Waste Solvent Flammable Liquid NOS (RQ) UN 1993	.1.	TT	20.00 .	VOL	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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GENERATOR

Printed/Typed Name	Signature	Date Month	Day	Year
T. Keithley		07	14	89

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year
C. Wynn	C. Wynn	07	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 Item 19.

Printed/Typed Name	Signature	Month	Day	Year
FDUNFEE	FDunfee	07	14	89

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

2187C750 7/14

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0016755

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

1252 5125

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.: IND. 010594505 . . .
Manifest Document No.: 00014
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
Rogers Cartage Co.
1302 5th Av, Hammond, In 46326
4. Generator's Phone (219) 659-1562

A. State Manifest Document Number: INA 0378117
B. State Generator's ID:

5. Transporter 1 Company Name: Rogers Cartage Co.
6. Use EPA ID Number: ILL ILD006932438
C. State Transporter's ID:
D. Transporter's Phone: 219-659-1562

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 Av
Griffith, In
10. Use EPA ID Number: IND 016360265 . . .
G. State Facility's ID:
H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. Waste Solvent Flammable Liquid NOS (RQ) UN 1993	1	TT	2000	VOL	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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GENERATOR

Printed/Typed Name: T. Keithley
Signature:
Date: Month 09 Day 05 Year 89

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: J. Crews
Signature:
Date: Month 09 Day 05 Year 89

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Date: Month . Day . Year .

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19
Printed/Typed Name: FDUNFEE
Signature:
Date: Month 09 Day 05 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.

INA0378117

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

212 TSD 9/5/89

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0016756

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-9

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of	Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.
IN D 010594505	00015		

3. Generator's Name and Mailing Address
Rogers Cartage Co.
1302 5th Av, Hammond, In 46326

A. State Manifest Document Number: INA 0378118

B. State Generator's ID:

4. Generator's Phone (219-659-1562

5. Transporter 1 Company Name	6. Use EPA ID Number	C. State Transporter's ID
Rogers Cartage Co	ILL ILD006932438	D. Transporter's Phone 219-659-1562
7. Transporter 2 Company Name	8. Use EPA ID Number	E. State Transporter's ID
		F. Transporter's Phone

9. Designated Facility Name and Site Address	10. Use EPA ID Number	G. State Facility's ID
American Chemical Services Inc 420 S. Colfax Av Griffith, In	IND 016360265	H. Facility's Phone 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol.	I Waste No.
a. Waste Solvent Flammable Liquid NOS (RQ) UN 1993	1	TT	2000	VOL	F003 F005
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	Signature	Date Month	Day	Year
T. Keithley		11	09	89

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year
J. Wilber		11	09	89

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name	Signature	Date Month	Day	Year
F DUNFEE	F Dunfee	11	09	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

0016757

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.: IND 010594505
Manifest Document No.: 00012
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
Rogers Cartage Co.
1302 5th Av
Hammond, In 46326
4. Generator's Phone ( ) 219-659-1562

A. State Manifest Document Number: INA 0303329
B. State Generator's ID:

5. Transporter 1 Company Name: Rogers Cartage Co.
6. Use EPA ID Number: ILL.ILD006932438
C. State Transporter's ID:
D. Transporter's Phone: 219-659-1562

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 Av
Griffith, In
10. Use EPA ID Number: IND.016360265
G. State Facility's ID:
H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. Waste Solvent Flammable Liquid NOS (RQ) UN 1993	1	TT	2000	VOL	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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GENERATOR

Printed/Typed Name: T. Keithley
Signature: [signature]
Date: Month 5 Day 04 Year 89

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: D. Taylor
Signature: [signature]
Date: Month 5 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: F DUNFEE
Signature: [signature]
Date: Month 5 Day 04 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 0303329

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY 2117C750 5/4

0016754

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.: IND.010594505. . .
Manifest Document No.: 00011.
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
Rogers Cartage Co.
1302 5th Av
Hammodd, In 46326

A. State Manifest Document Number: INA 0303328
B. State Generator's ID:

4. Generator's Phone (219-659-1562

5. Transporter 1 Company Name: Rogers Cartage Co.
6. Use EPA ID Number: ILL ILD006932438. .
C. State Transporter's ID:
D. Transporter's Phone: 219-659-1562

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 Ind
420 S. Colfax Av
Griffith, In
10. Use EPA ID Number: IND 016360265 . . . . .
G. State Facility's ID:
H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. Waste Solvent Flammable Liquid NOS (RQ) UN1993	1	TT	2500	VOL	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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GENERATOR

Printed/Typed Name: T. Keithley
Signature: [signature]
Date: Month 2 Day 13 Year 89

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Bill Shea
Signature: Bill Shea
Date: Month 2 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. 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: Thumfee
Date: Month 02 Day 13 Year 89

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

212 ICT 50 2/13

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 0303328

0016758

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.: IND 010594505
Manifest Document No.: 00018
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
Rogers Cartage Co.
1302 5th Av, Hammond, In 46326

A. State Manifest Document Number: INA 0446695
B. State Generator's ID:

4. Generator's Phone (219-659-1562

5. Transporter 1 Company Name: Rogers Cartage Co.
6. Use EPA ID Number: ILL ILD006932438
C. State Transporter's ID:
D. Transporter's Phone: 219-659-1562

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 Av
Griffith, In
10. Use EPA ID Number: IND 016360265
G. State Facility's ID:
H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. Waste Solvent Flammable Liquid NOS (RQ) UN 1993	1	TT	1400 3000X	VOL	F003 F005
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR
Printed/Typed Name | Signature | Date Month Day Year

TRANSPORTER
17. Transporter Acknowledgement of Receipt of Materials
T. Keithley | Signature | 06 21 90
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 the manifest except as noted in Item 19
Printed/Typed Name: FDUNFEE | Signature: F Dunfee | Month Day Year: 06 21 90

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-89)

COPY 5. TSD COPY

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0446695

0018254

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	Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.
IND 010594505			

3. Generator's Name and Mailing Address
ROGERS CARTAGE
1302 FIFTH AVE. HAMMOND, IN. 46326

4. Generator's Phone (219) 659-1563

A. State Manifest Document Number: INA 0378120
B. State Generator's ID:

5. Transporter 1 Company Name: ROGERS CARTAGE CO.
6. Use EPA ID Number: ILL ILD006932438
C. State Transporter's ID:
D. Transporter's Phone: 219-659-1562

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: IND 016360265
G. State Facility's ID:
H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. RQ WASTE SOLVENT FLAMMABLE LIQUID NOS UN 1993	1	TT.	1500	VOL	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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GENERATOR

Printed/Typed Name	Signature	Date Month	Day	Year
LEONA PATTEN		3	26	90

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year
KENMAXRAXXKN	Ken Cable	3	26	90

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name	Signature	Date Month	Day	Year
EDUNFEE	FDunfee	03	27	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.

INA0378120

0018253

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.: IND 010584505
Manifest Document No.: 00016
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
Rogers Cartage Co.
1302 5th Av, Hammond, In 46326

A. State Manifest Document Number: INA 0378119

B. State Generator's ID:

4. Generator's Phone (219-659-1562

5. Transporter 1 Company Name: Rogers Cartage Co.
6. Use EPA ID Number: ILL ILD006932438
C. State Transporter's ID:
D. Transporter's Phone: 219-659-1562

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 Av
Griffith, In
10. Use EPA ID Number: IND 016360265
G. State Facility's ID:
H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
GENERATOR a. Waste Solvent Flammable Liquid NOS (RQ) UN 1993	1	TT	2000	VOL	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	Date Month	Day	Year
T. Keithley		1	1	

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year
T. Di Novo				

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name	Signature	Month	Day	Year
F DUNFEE	F Dunfee	01	29	90

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY

296TCTSD 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.

INA0378119

0018252

HAZARDOUS WASTE MANIFEST

ORIGINAL – NOT NEGOTIABLE

12-006
MANIFEST DOCUMENT NUMBER

IND010594505
SHIPPER NUMBER

Rogers Cartage Co.
NAME OF CARRIER (SCAC)

ILD006932438
CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	IND0010594505	Rogers Cartage Co.1302 Fifth Ave.Roby,Ind. 659-1562	
TRANSPORTER # 1	ILD006932438	Rogers Cartage Co.1302 Fifth Ave, Roby, In	
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chemical 420 Colfax, Griffith, Ind. 924-4370	2/19/83
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)
1	X	F005	Waste Toluene Solvent Mixture Class, Flammable #1294				Gals.	2000		

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

[signature] 2/19/83
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 12FR T-63 6RM 2-1883

005351

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: ROLLIE WILLIAMS PAINT SPOT, 1179 KENT ST. ELKHART, IN. 46514

A. State Manifest Document Number

B. State Generator's ID

4. Generator's Phone (219)-264-3174

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 SERVICE, 420 S. COLFAX AVE, GRIFFITH, IN 46319

10. US EPA ID Number: IND016360265

G. State Facility's ID: 9180890002

H. Facility's Phone: 219-924-4370

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	001	TT	02500	G	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: WASTE SOLVENTS

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.

Printed/Typed Name	Signature	Date (Month Day Year)
JOHN T. DICKS		12 V 084

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)
MICHAEL A. PFEIFER		12 V 084

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)
FDU NFEB		12 V 084

EPA Form 8700-22 (3-84)

#2 - TREATMENT, STORAGE, DISPOSAL FACILITY COPY

210 K T-50 0.9 Y. C. UJ4223

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.

GENERATOR

3. Generator's Name and Mailing Address
Kelly Williams Paint Spot
1171 Kay St.
Elkhart, IN 46515
4. Generator's Phone (219) 264-3174

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: American Chemical Service
6. US EPA ID Number: IND 016380265
C. State Transporter's ID
D. Transporter's Phone 219-924-4370

7. Transporter 2 Company Name: Strand Trucking Co
8. US EPA ID Number: ILD 000646810
E. State Transporter's ID
F. Transporter's Phone 312-785-8440

9. Designated Facility Name and Site Address
American Chemical
420 S Calsay Ave.
Griffith, IN 46319
10. US EPA ID Number: IND 016380265
G. State Facility's ID
H. Facility's Phone 219.924.4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	HM	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. Flammable Liquid Ignitable N.O.S. UN 1993		38	DM	2090	1	D001
b.						
c.						
d.						

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above
1 = 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 governmental regulations.

Printed/Typed Name: [illegible] | Signature: [signature] | Date: Month 7 Day 21 Year [illegible]

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: William P. Strand | Signature: [signature] | Date: Month 7 Day 24 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: G.R. Murphy | Signature: [signature] | Date: Month 7 Day 24 Year 87

Style F15-6 Labelmaster, Chicago, IL 60646

EPA Form 8700-22 (3-84)

TSDF COPY 204 F T-50

000005

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 N D 0 1 6 2 7 4 8 9 6 — Manifest Document No.

2. Page 1 of 1

Information in the shaded areas is not required by Federal law

3. Generator's Name
Rollie Williams Paint Spot, Inc.
1179 Kent Street Elkhart, In 46515

4. Generator's Phone (219) 264-3174

A. State Manifest Document Number IN 085254

B. State Generator's ID

5. Transporter 1 Company Name: American Chemical — 6. US EPA ID Number: I N D 0 1 6 3 6 0 2 6 5

C. State Transporter's ID

D. Transporter's Phone 219-924-4370

7. Transporter 2 Company Name: Strand Trucking Company — 8. US EPA ID Number: I L D 0 0 0 6 4 6 8 1 0

E. State Transporter's ID

F. Transporter's Phone 312-385-8440

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

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.
GENERATOR a. NA-1993 Flammable Liquid Hazardous Material	1	DM	1210	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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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: Timothy H [illegible] — Signature — Month 1 1 Day 1 1 Year 1 7

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials — Date

Printed/Typed Name: [illegible] — Signature — Month 1 1 Day 1 1 Year 1 7

18. Transporter 2 Acknowledgement of Receipt of Materials — Date

Printed/Typed Name — Signature — Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.

Printed/Typed Name: Harold F Schmidt — Signature — Month 1 1 Day 1 1 Year 1 7

EPA Form 8700-22A (Rev. 11-85) UHWM 2/LP2

T.S.D. DETACH AND RETAIN THIS COPY

MRK 4-20-87 TSD B

IN 085254

012461

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.: IND016274896 | 000001

2. Page 1 of: 1

Information in the shaded areas is not required by Federal law

3. Generator's Name
Rollie Williams Paint Spot, Inc.
1179 Kent St. P.O. Box 1385 Elkhart, IN 46515

4. Generator's Phone (219) 264-3174

A. State Manifest Document Number: IN 085262

B. State Generator's ID:

5. Transporter 1 Company Name: Mr. Frank, Inc.

6. US EPA ID Number: ILD069506160

C. State Transporter's ID: 0079

D. Transporter's Phone: 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
420 S. Colfax Ave.
Griffith, In 46319

10. US EPA ID Number: INDO16360265

G. State Facility's ID:

H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. Waste Paint related material Flammable Liquid UN-1993	009	DM	00495	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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GENERATOR

Printed/Typed Name: Robert Holdeman | Signature | Month Day Year: 02 16 88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: JACK MCCLEVERTY | Signature | Month Day Year: 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 in Item 19.

Printed/Typed Name: HAROLD F SCHMIDT | Signature | Month Day Year: 02 17 88

IN 085262

EPA Form 8700-22A (Rev. 11-85) UHWM 2/LP2

9-20-FF T-50 2/19/88 T.S.D. DETACH AND RETAIN THIS COPY

001286

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. IND016279896 | 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
Rollie Williams Paint Spot
1174 Kent St
Elkhart, IN 46514
4. Generator's Phone (219) 264-3174

A. State Manifest Document Number: INA 0294152
B. State Generator's ID:

5. Transporter 1 Company Name: Mr. Franks
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, IN 46319
10. Use EPA ID Number: INA016360265
G. State Facility's ID: 918089000 2.
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. NA 1294 Waste Toluene Flammable Liquid	001	DM	000055	Gal	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 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: Bob Holderman | Signature: Bob Holderman | Date: Month 01 Day Year

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials — Printed/Typed Name: Dave Voss | Signature: Dave Voss | Date: Month 01 Day 19 Year 89
18. Transporter 2 Acknowledgement of Receipt of Materials — Printed/Typed Name: | Signature: | Date: Month Day Year

FACILITY
19. Discrepancy Indication Space
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. — Printed/Typed Name: Whitaker A | Signature: | Date: Month 01 Day 20 Year 89

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

204TCTSO 1/4

COPY 5. TSD COPY

If you have questions, 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.

INA0294152

0016511

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.: SMQNTYGENERT10248

2. Page 1 of 6 | Information in the shaded areas is not required by Federal law.

GENERATOR

3. Generator's Name and Mailing Address
Rolling Wheels, Inc.
207 West Main Street, Griffith, IN 46329

4. Generator's Phone (219) 924-3188

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: 312-829-1660

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: INDO16360265
G. State Facility's ID
H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	HM	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. RQ WASTE PAINT RELATED MATERIAL (F003) FLAMABLE LIQUID NA 1263	X	001	DM	00055	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: PETER ANDERSON | Signature | Month Day Year

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: [illegible] | 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: WHITAKER A | Signature | Month Day Year: 11 16 07

Style F15REV-6 LABELMASTER, Div of AMERICAN LABELMARK CO., CHICAGO, IL 60646

EPA Form 8700-22 (Rev. 9-88) Previous editions are obsolete

126TC63 11/7

TSDF COPY

0016753

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

0261989

Authorization Number 997252

ROLLPRINT PKG PROD (Company Name) 2301 W. WABANSIA AV Address FED. ILD 051832 (98) 1
CHICAGO City ILLINOIS State Zip
03/6000372 G Generator Number

WASTE HAULER(S)

LANDGRIEB TRUCK Hauler Name 3009 S. SHIELDS Hauler Address CHICAGO, IL
S.W.H. Registration Number [illegible]

Hauler Name Hauler Address
S.W.H. Registration Number ILC2980 IND009842824

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) 420 S. COLFAX Address 9180890.2 Site Number
GRIFFITH City INDIANA State 46319 Zip IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Ink Solvents WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Ink Solvents HAZARD CLASS: FLAMMABLE BY NOS WEIGHT FOR D.O.T. USE [illegible] LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. 1800 GAL QUANTITY OF WASTE DELIVERED: 14000 LBS 1 GALLONS (Circle One) CU. YDS.

METHOD OF SHIPMENT (Circle One) DRUMS 37 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: 7/13/81 [signature] (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) DATE: 8/14/81

(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:

Jim Cahill (Authorized Signature) DATE: 8/12/81

COMMENTS OR SPECIAL INSTRUCTIONS: UNLOADED AT DOCK 8/13/81
TO 124E T-63 8/14/81 9PM.

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

0000571

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

0640341

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 997252
FED ILD 05163298

ROLLPRINT PKG. PROD | 2301 W. WABANSIA AV. | 6287700 | 0816000372 | G
(Company Name) | Address | Phone Number | Generator Number

CHICAGO | ILLINOIS | 60647 | EPA Number
City | State | Zip

WASTE HAULER(S)

LANDGRAB TRUK | 3009 S SHIELDS | IND005842824 | ICC2980
Hauler Name | Hauler Address | S.W.H. Registration Number

CHICAGO, IL. | 3129847311 | EPA Number
Phone Number

Hauler Name | Hauler Address | S.W.H. Registration Number

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL | 420 S. COLFAX | 9180902
(Facility Name) | Address | Site Number

GRIFFITH | INDIANA | 46319 | 3127683400 | IND016360265
City | State | Zip | Phone Number | EPA Number

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: 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:	HAZARD CLASS:	UN or NA Number	EPA HW Number
Ink Solvents	Flammable by NOS	UN1993	F003

WEIGHT FOR D.O.T. USE: 8800 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 1210 (1) GALLONS (Circle One) (2) CU. YDS.

METHOD OF SHIPMENT (Circle One): (DRUMS) 22 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 Leo Laliberte (Authorized Signature) DATE: 6/15/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) DATE: 6/14/82

(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:

Frank Dmic (Authorized Signature) DATE: 6/15/82

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

On dock 6-15-82 To 210 RT-50
EKM 6-23-82
003100

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.: ILD005183298
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: ROLLPRINT PACKAGING PRODUCTS
320 STEWART ST.
ADDISON, IL. 60101
4. Generator's Phone (312) 628-1700

A. Illinois Manifest Document Number: IL 1175440
B. Illinois Generator's ID: 0430051061
C. Illinois Tranporter's ID: 1835
D. 219-462-4181 Transporter's Phone

5. Transporter 1 Company Name: LAIDGREBE MOTOR TRANSIT
6. US EPA ID Number: IND009842824

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: 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.
GENERATOR a.	FLAMMABLE LIQUID N.O.S. IGNITABLE UN-1993	X	27	DM	1,480	1	EPA HW Number: F003; Authorization Number:
b.	WASTE HYDRAULIC OIL IGNITABLE UN-1993	X	1	DM	385	1	EPA HW Number: D001; 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: ROLLPRINT PACKAGING PRODUCTS — Signature: Leo Kaskaduna — Date: Month 9 Day 11 Year 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: F W. Schlundt — Signature: F W Schlundt — Date: Month 9 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: KRHUIPHY — Signature — Date: Month 9 Day 13 Year 85

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV.# 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½ Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center

FACILITY COPY - PART 3

204K T-50

UJ8004

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 8 3 2 5 2 0 0 0	0 0 0 – 1		

GENERATOR

3. Generator's Name and Mailing Address
Romeo, Inc.
139 South Washington
Green Bay, WI 54305
4. Generator's Phone (414) 437-8743

A. State Manifest Document Number: INA 0137040
B. State Generator's ID:
C. State Transporter's ID:
D. Transporter's Phone: 414-458-6030
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: K&K Hazardous Waste Services
6. US EPA ID Number: I N D 0 9 5 9 9 7 9 7
7. Transporter 2 Company Name:
8. US EPA ID Number:
9. Designated Facility Name and Site Address: American Chemical Services, 120 S Colfax, 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.	I. Waste No.
a. RQ Waste Flammable Liquid, Flammable Liquid, UN1993 (D001)	5	DM	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

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If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good 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 G. Mizo — Signature: [signature] — Date: Month 10 Day 21 Year 87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Robert Williams — Signature: [signature] — Date: Month 10 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: Harold Fechant — Signature: [signature] — Date: Month 10 Day 21 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 0137040

EPA Form 8700-22 (Rev. 9-86) Previous editions are obsolete.
State Form 11865 4-123R-T-63 10/8/87 N
1-204R-T-50 10/8/87

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

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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. ILD981793482 Manifest Document No. 12394

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

GENERATOR

3. Generator's Name and Mailing Address
RON'S AUTO BODY SHOP
128 COLLINS ST. JOLIET, ILL 60432
4. Generator's Phone (815) 726-5660

A. State Manifest Document Number

B. State Generator's ID ILL 1970455093

5. Transporter 1 Company Name: ADCOM EXPRESS
6. US EPA ID Number: ILD047267364
C. State Transporter's ID 0367
D. Transporter's Phone 708-429-3013

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
420 S. COLFAX
GRIFFITH, IND 46319
10. US EPA ID Number: IND006382265
G. State Facility's ID
H. Facility's Phone (219-924-4370)

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	HM	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE PAINT RELATED MATERIAL NOS, FLAMMABLE LIQUID NA 1263	X	005	AM	1250	GL	F003 F005
b.						
c.						
d.						

J. Additional Descriptions for Materials Listed Above
1. WASTE NO. E.P.A. HAZARDOUS WASTE NO. F003, F005

K. Handling Codes for Wastes Listed Above
1 GALLON 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.

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Printed/Typed Name: RONALD AESCHLIMAN — Signature: Ronald Aeschliman — Month 12 Day 22 Year 90

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: ROBERT K THORN — Signature: Robert K Thorn — Month 12 Day 22 Year 90

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: STEVE KOWALCZYK — Signature: Steve Kowalczyk — Month 12 Day 24 Year 90

Style F15 REV-6 LABELMASTER, Div of AMERICAN LABELMARK CO., CHICAGO, IL 60646

EPA Form 8700-22 (Rev. 9-88) Previous editions are obsolete.

126 TCT03 2/2

TSDF COPY

0018251

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

0464135

Authorization Number

Roper Corp. (Company Name) | 2207 W. State (Address) | 8159376099 (Phone Number) | 0210550001 G (Generator Number)

Kankakee (City) | Illinois (State) | 60901 (Zip) | ILD005071139 (EPA Number)

WASTE HAULER(S)

RID Inc (Hauler Name) | 1360 E Locust (Hauler Address) | S.W.H. Registration Number 0066013

Kankakee, Ill. 60901 | 8159332931 (Phone Number) | ILD054155080 (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) | Railroad & Calfax St (Address) | 0180902 (Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip) | 2199244270 (Phone Number) | IND064726265 (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 & 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: Waste Paint & Thinner | HAZARD CLASS: Flammable | UN or NA Number | EPA HW Number

WEIGHT FOR D.O.T. USE 16,370 LBS TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: | (2) GALLONS (Circle One) CU. YDS. | 1

METHOD OF SHIPMENT (Circle One) (DRUMS_____ Number) (TANK TRUCK) OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION | W. [illegible] (Authorized Signature) | DATE: 10/10/83

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] RID (Authorized Signature) | DATE: 10/10/83

(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 10/10/83

COMMENTS OR SPECIAL INSTRUCTIONS _____

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV # 3

SITE COPY - PART 3

To 210 FT-50 GRN 10-10-83

CJ5320

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

0464136

Authorization Number

Lopez Corporation (Company Name) | 2207 W. Station St (Address) | 8159376099 (Phone Number) | 09105500016 (Generator Number)

Kankakee (City) | Illinois (State) | 60901 (Zip) | ILD054155080 (EPA Number)

WASTE HAULER(S)

Kankakee, ILL, 60901

KID, Inc (Hauler Name) | 1360 E Locust St (Hauler Address) | S.W.H Registration Number 0066013

8159332931 (Phone Number) | ILD054155080 (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) | Railroad + Colfax Ave (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 Paint-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
Waste Paint-Thinner	Flammable	UN1263	D001

WEIGHT FOR D.O.T. USE: 27,900 (LBS / TONS (circle one))

WEIGHT FOR I.E P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 002700 (1 GALLONS / 2 CU YDS. (Circle One)) 1

METHOD OF SHIPMENT (Circle One): (DRUMS_____ Number) | (TANK TRUCK) | OPEN TRUCK | OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE: 9/22/83

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) Keith Kadow (Authorized Signature) DATE: 09/23/83

(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 9/23/83

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

T0211 KT-50 GRM 9-23-83

CJ5819

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

0464140

Authorization Number

ROPER CORPORATION (Company Name) | 2207 W. STATION ST. (Address) | 8159376099 (Phone Number) | 09105500011 G (Generator Number)

KANKAKEE (City) | ILLINOIS (State) | 60901 (Zip) | ILD095071139 (EPA Number)

WASTE HAULER(S):

KID, Inc. (Hauler Name) | 1360 E. LOCUST ST. (Hauler Address) | S.W.H. Registration Number 006613

Kankakee, Ill. 60901 | 8159332931 (Phone Number) | ILD054155080 (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) | RAILROAD & COLFAX AVE. (Address) | 918089021 (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 PAINT & 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
WASTE PAINT-THINNER	FLAMMABLE	UN1263	D001

WEIGHT FOR D O T USE: 37,200 (LBS / TONS (circle one))

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS OR GAL.

QUANTITY OF WASTE DELIVERED: 004000 (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: Wendell U. Prowt (Authorized Signature) | DATE: 9-16-83

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) Keith Kaclow (Authorized Signature) | DATE: 09/16/83

(2) _____ (Authorized Signature) | DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

HAZARDOUS WASTE SUBJECT TO FEE: YES____ NO X

(Authorized Signature) J Darlee | DATE 9/16/83

COMMENTS OR SPECIAL INSTRUCTIONS: _____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS 217 / 782-3637 | OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

To 210 E T-50 GRM 9.16.83

05316

Division of Land Pollution Control - Manifest
Indiana State Board of Health
P.O. Box 7035
Indianapolis, IN 46207-7035

DO NOT WRITE IN THIS SPACE

Please print or type. (Form designed for use on elite (12-pitch) typewriter) Form Approved OMB No. 2000 0404 Expires 7 31 86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. M I D 0 0 6 0 1 4 0 7 0 — Manifest Document No.

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law

3. Generator's Name
RoseJohnson Inc.
1111 Godfrey S.W.
4. Generator's Phone (Grand)Rapids, MI 49503 (616) 246-0246

A. State Manifest Document Number IN 076760
B. State Generator's ID

5. Transporter 1 Company Name: Mr. Frank, Inc.
6. US EPA ID Number: I L D 0 6 9 5 0 6 1 6 0
C. State Transporter's ID
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 RR
Griffith, IN 46319
10. US EPA ID Number: I N D 0 1 6 3 6 0 2 6 5
G. State Facility's ID
H. Facility's Phone (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. Waste Flammable Liquid, NOS Flammable Liquid UN 1993	0 0 1	T T		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.

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: FDUNFEE | Signature: FDunfee | Month Day Year: 11 6 86

IN 076760

EPA Form 8700-22A (Rev. 11-85) UHWM 2/LP2

T.S.D. DETACH AND RETAIN THIS COPY 125R076289

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

170
31671

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. IND 006 146 786 — Manifest Document No. 00002
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
ROSE JOHNSON INC.
1111 GODFREY S.W. GRAND RAPIDS MI 49503
4. Generator's Phone (616) 241-6246

A. State Manifest Document Number: INA 0114749
B. State Generator's ID
5. Transporter 1 Company Name: A P FRANT INC.
6. Use EPA ID Number: ILD 069 501 160
C. State Transporter's ID: 0079
D. Transporter's Phone: 312-594-3377
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 SERV.
4500 COLFAX AVE
GARY IN 46409
10. Use EPA ID Number: IND 061 360 265
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.	Type	13. Total Quantity	14. Unit Wt/Vol.	L Waste No.
a. WASTE FLAMMABLE LIQUID N.O.S. UN1993	001	TT	02500	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: Wayne H. Hitesbeck — Signature — Date: Month 04 Day 27 Year 87

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: MARGARET GARCIA — Signature — Date: Month 04 Day 27 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: FDUNFEE — Signature — Date: Month 04 Day 27 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 0114749

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

125 TC T63 04 B

013095

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: M.I.D.0.0.6.0.1.4.0.7.0 | Manifest Document No.: 0.0.0.0.2
2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
RoseJohnson Inc.
1111 Godfrey S.W., Grand Rapids, MI 49503
4. Generator's Phone (616) 246-0246

A. State Manifest Document Number: INA 0162798
B. State Generator's ID:

5. Transporter 1 Company Name: Mr. Frank Inc.
6. Use EPA ID Number: I.L.D.0.6.9.5.0.6.1.6.0
C. State Transporter's ID: 0079
D. Transporter's Phone: 312-596-3377

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Serv.
4305 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: 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 flammable liquid N.O.S. UN1993	0.0.1	T.T	0.1.0.5.0	G	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR

Printed/Typed Name	Signature	Month	Day	Year
DAVID SCHICK		10	15	87

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
RONALD W. PROSSER		10	15	87

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
T DUNTEE		10	15	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 0162798

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

013096

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.
M I D 0 0 6 0 1 4 0 7 0	0 0 0 0 2		

3. Generator's Name and Mailing Address
ROSE JOHNSON, INC
1111 GODFREY S.W. GRAND RAPIDS, MI. 49503

4. Generator's Phone (616) 246-0246

A. State Manifest Document Number: INA 0247904

B. State Generator's ID:

5. Transporter 1 Company Name: MR FRANK INC

6. Use EPA ID Number: I L D 0 6 9 5 0 6 1 6 0

C. State Transporter's ID: 0029

D. Transporter's Phone: 3125963377

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 SERV.
4305 COLFAX AVE
GRIFFITH, IND 46319

10. Use 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. WASTE FLAMMABLE LIQUID NOS UN1993	001	T	01200	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
Virgil Fitch				

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year
John Hudson	John Hudson	07	21	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	Signature	Date Month	Day	Year
EDUNFEE		07	21	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. 9-85) 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 0247904

0015930

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: M I D 0 0 6 0 1 4 0 7 0
Manifest Document No.: 4 6 4 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
ROSE JOHNSON FURNITURE COMPANY
1111 GODFREY S.W.., GRAND RAPIDS, MICHIGAN 49503
4. Generator's Phone (616) 246-0246

A. State Manifest Document Number: INA 0346448
B. State Generator's ID:

5. Transporter 1 Company Name: MR. FRANK INC.
6. Use EPA ID Number: I.L.D.0.6.9.5.0.6.1.6.0
C. State Transporter's ID:
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., INC.
420 SOUTH COLFAX AVENUE
GRIFFITH, INDIANA., 46319
10. Use EPA ID Number: I.N.D.0.1.6.2.6.0.2.6.5
G. State Facility's ID:
H. Facility's Phone: (219)-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE FLAMMABLE LIQUID., N.O.S. FLAMMABLE LIQUID UN 1993 (D001)	0 0 1	T T	0 1 0 0 0	G	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above:
K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information:

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR — Printed/Typed Name: [illegible] Signature: [signature] Date: Month 04 Day 24 Year 89

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: RONALD D PROSSER Signature: [signature] Date: Month 04 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 Item 19
Printed/Typed Name: FDUNFEE Signature: FDunfee Date: Month 04 Day 24 Year 89

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY

3 1 2 C 4 0 7 2 4

0017283

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.

INA0346448

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE *(Form designed for use on elite (12-pitch) typewriter.)* *Form Approved. OMB No. 2050-0039. Expires 9-30-91*

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: M.I.D.0.0.6.0.1.4.0.7.0 | Manifest Document No.: 4 2 4 7 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.

3. Generator's Name and Mailing Address
RoseJohnson Inc.
1111 Godfrey Ave. SW Grand Rapids, MI 49503

4. Generator's Phone (616) 246-0246

A. State Manifest Document Number: INA 0442476
B. State Generator's ID:

5. Transporter 1 Company Name: Mr. Frank Inc.
6. Use EPA ID Number: ~~9842175049~~ I L D 0 5 5 3 5 8 1 8 0
C. State Transporter's ID: 0079
D. Transporter's Phone: 708 ~~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 Chemicals Services
420 South Colfax Ave
Griffith, IN 46319
10. Use EPA ID Number: I N D 0 1 6 2 6 0 2 6 5
G. State Facility's ID: 918089000 02
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. (Toluene Acetone ~~F003~~ UN1993 FLAMMABLE Liquid (F005)	0.0.1	T.T	0.1755	G	F005 ~~D001~~
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: D001, F003
K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information
~~D001~~, ~~F003~~

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good 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: Vaughn Etterbeek | Signature: Vaughn Etterbeek | Date: Month 07 Day 20 Year 90

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials — Printed/Typed Name: Miguel Garcia | Signature: Miguel Garcia | Date: Month 07 Day 20 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: FD UNFEE | Signature: | Date: Month 07 Day 20 Year 90

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0442476

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-89)

212550 63

COPY 5. TSD COPY

0017990

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

Authorization Number: Out of State (8–13)

ROSELAND METAL PROD (Company Name) | 14753 GREENWOOD (Address) | 3122643322 (Phone Number) | 0310690006 G (14–24 Generator Number)

DOLTON (City) | ILL (State) | 60419 (Zip) | ILD043914209 (EPA Number)

WASTE HAULER(S)

MR FRANK INC (Hauler Name) | 201 WEST 155TH ST (Hauler Address) | S.W.H. Registration Number 0079007 (25–31)

SO. HOLLAND, ILL 60473 | 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 SER. (Facility Name) | 420 So. COLFAX (Address) | 91808902 (39–46 Site Number)

GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | (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: ORGANIC 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
TANK TRUCK	WASTE FLAMABLE LIQUID NOS	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: 002000 (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 Norman Hultman (Authorized Signature) DATE: 2-21-84

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Gabriel Garcia (Authorized Signature) DATE: 02/21/84 (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: 02/21/84 (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 202FT-50 6LM 2-22-84

007222

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0338271

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 925695

ROSELAND METAL (Company Name) | 14753 GREENWOOD AVE (Address) | ILD003106900066 (Generator Number)

DOLTON (City) | ILLINOIS (State) | 60417 (Zip)

WASTE HAULER(S)

MR FRANK INC. (Hauler Name) | 201 WEST 155TH ST (Hauler Address) | So. HOLLAND ILL 60423 | S.W.H. Registration Number 0079/027

ILD 069506160

Hauler Name | Hauler Address | S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SER. (Facility Name) | 420 So COLFAX (Address) | 91808902 (Site Number)

GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ORGANIC 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: TANK TRUCK

HAZARD CLASS: WASTE FLAMMABLE LIQUIDS NOS HAZARDOUS NOT. BOILING POINT 176 F — UN1993

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 002000 (47–52) GALLONS (Circle One) 2 CU. YDS. 1 (53)

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 12-24-91 | X Norman Kleitman (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) Ronald Bridgewater (Authorized Signature) | DATE: 12/24/91 (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:

(Authorized Signature) | DATE: 12/29/91 (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 212 R T-50 GRN 12/28/91

SITE COPY - PART 3

001871

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

0625638 (1–7)
Authorization Number [redacted] (8–13)

ROSELAND METAL FAB | 14253 GREENWOOD | 312-264-3372 | 0310690006 G
(Company Name) | Address | Phone Number | Generator Number (14–24)

DOLTON | ILL | 60419 | ILD043914209
City | State | Zip | EPA Number

WASTE HAULER(S)

MR FRANK INC | 201 WEST 155TH ST SO. HOLLAND, ILL 60473 | S.W.H. Registration Number 0079/027 (25–31)
Hauler Name | Hauler Address

312-596-3377 | ILD069506160
Phone Number | EPA Number

Hauler Name | Hauler Address | S.W.H. Registration Number (32–38)

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERKAN CHEMICAL SER | 420 S COLFAX | 91808902 (39–46)
(Facility Name) | Address | Site Number

GRIFFITH | INDIANA | 46319 | 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: ORGANIC - 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
TANK TRUCK	WASTE FLAMABLE LIQUID - NOS	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: 002000 (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 x Norman Williams (Authorized Signature) DATE: 3/4/83

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) Ron O'Bridgewater (Authorized Signature) DATE: 03/04/83 (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:

[illegible] (Authorized Signature) DATE: 3/4/83 (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 IAF 7-30 6CM 3.4.83

CJ5354

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. MND068170150 — Manifest Document No. 43405 — 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: Roseville - Auto Body, 3031 W County Rd C, Roseville, MN 55113

A. State Manifest Document Number: MN 2004340 5 [illegible]

B. State Generator's ID:

4. Generator's Phone: 612 633-7770

5. Transporter 1 Company Name: ABC SERVICES, INC. — 6. US EPA ID Number: WID076159839

C. State Transporter's ID:

D. Transporter's Phone: 414-857-6222

7. Transporter 2 Company Name — 8. US EPA ID Number

E. State Transporter's ID:

F. Transporter's Phone:

9. Designated Facility Name and Site Address: AMERICAN CHEMICAL SERVICE, 420 SOUTH COLFAX, GRIFFITH, IN 46319 — 10. U.S EPA ID Number: IND016360265

G. State Facility's ID:

H. Facility's Phone: 219-924-4170

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 LIQUID NOS UN1993	X	1	DM	55	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: William D. Emery — Signature: William D. Emery — Date: Month 9 Day 5 Year 86

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Kip Nelson — Signature: Kip Nelson — Date: Month 9 Day 5 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: G. McCoy — Signature — Date: Month 9 Day 10 Year 86

GENERATOR

In case of spill or emergency, immediately call the Minnesota Pollution Control Agency at 612/296-7373; the Minnesota Division of Emergency Services at 612/778-0600; the National Response Center at 800/424-8802. Outside Minnesota, call the National Response Center and appropriate state agency.

Minnesota Form PQ-00371-01(10 84)

COPY 4: TSDF RETAIN

125 K763

012003

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. | Manifest Document No. 43404 | 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: Roseville—Chrys-Plym, 2805 Hy 35, Roseville, MN 55113

A. State Manifest Document Number: MN 0043404

B. State Generator's ID

4. Generator's Phone: (612) 633-3500

5. Transporter 1 Company Name: ABC SERVICES, INC.

6. US EPA ID Number: WID076159839

C. State Transporter's ID

D. Transporter's Phone: 414-657-6222

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address: AMERICAN CHEMICAL SERVICE, 420 SOUTH COLFAX, GRIFFITH, IN 46319

10. U.S EPA ID Number: IND016360265

G. State Facility's ID

H. Facility's Phone: 219-924-4370

GENERATOR

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) HM		12. Containers No	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a.	X	FLAMMABLE LIQUID NOS UN1993	3	DM	165	G	D001
b.							
c.							
d.							

J. Additional Descriptions for Materials Listed Above: A—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: DAN Morrison | Signature | Date: Month Day Year

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: R.P. Nelson | Signature | Date: Month 9 Day 5 Year 86

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Date: Month 9 Day 5 Year 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: C. Murphy | Signature | Date: Month 09 Day 08 Year 86

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 PO-00371-01(10 84)

COPY 4: TSDF RETAIN

042002

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.
IND000826545	00002		

GENERATOR

3. Generator's Name and Mailing Address
ROSPATCH LABEL COMPANY
3100 Walkent Dr. N.W.
Grand Rapids MI 49504

A. State Manifest Document Number: INA 0159157

4. Generator's Phone (616) 784-1000

B. State Generator's ID

5. Transporter 1 Company Name: Valley City Refuse Disposal Inc.

6. US EPA ID Number: MID981956063

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 INC.
420 S. Colfax P.O. Box 190
Griffith IN 46319-0190

10. US EPA ID Number: IND016360265

G. State Facility's ID

H. Facility's Phone (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	Waste No.
a. WASTE METHYL ETHYL KETONE (MEK) Flammable Liquid UN 1193	800	DM	00440	G	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
ADDED AREAS IS REQUIRED BY INDIANA STATE LAW

K. Handling Codes for Wastes Listed Above
C= Gallons

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name	Signature	Month	Day	Year
Harold F. Rohrer		11	12	87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Arnold Dykstra		11	13	87

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.

Printed/Typed Name	Signature	Month	Day	Year
HAROLD F. Rohrer		11	12	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 0159157

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865 8-123R T-63 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

012459

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.
IND 000826545	000		

3. Generator's Name and Mailing Address
ROSPATCH LABEL COMPANY
3100 Walkent Drive N.W.
Grand Rapids, MI 49504
4. Generator's Phone 616-784-1000

A. State Manifest Document Number: INA 0159156
B. State Generator's ID:
C. State Transporter's ID:
D. Transporter's Phone: 616 2361500
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: MID 981 956 063
7. Transporter 2 Company Name:
8. Use EPA ID Number:
9. Designated Facility Name and Site Address: AMERICAN CHEMICAL SERVICE, INC. 420 S. Colfax, P.O. Box 190 Griffith, IN 46319-0190
10. Use EPA ID Number: IN D 016360265

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 METHYL ETHYL KETONE (MEK) Flammable Liquid UN 1193	000	M D	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.

GENERATOR

Printed/Typed Name	Signature	Month	Day	Year
Herbert Rogers	Herbert Rogers	04	14	87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Jim Grunwell		04	24	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		04	24	87

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

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 0159156

012458

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.: MID005826545 / 990135

2. Page 1 of: 1

Information in the shaded areas is not required by Federal law

3. Generator's Name
ROSPATCH LABEL COMPANY
3100 Walkent Drive, NW, Grand Rapids, MI 49504
4. Generator's Phone (616) 784-1000

A. State Manifest Document Number: IN 099013
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 SERVICE, INC.
420 S. Colfax, P.O. Box 190
Griffith, IN 46319-0190
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 METHYL ETHYL KETONE (F005) Flammable Liquid UN1193	001	DM	00165	G	F005
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above: G = Gallons

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

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: Herbert B. Rogers
Signature: Herbert B. Rogers
Month / Day / Year: 05 14 87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: T. Jon Wentz
Signature:
Month / Day / Year: 05 14 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: MILT PUPA
Signature: Milt Pupa
Month / Day / Year: 05 14 87

EPA Form 8700-22A (Rev. 11-85) UHWM 2/LP2

T.S.D. DETACH AND RETAIN THIS COPY MRL 7-12 GR T63B

IN 099013

012457

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. MID000526545 — 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
Rospatch label Company
3100 Walkent Dr. N.W.
Grand Rapids, Mi. 49504
4. Generator's Phone (616) 784-1600

A. State Manifest Document Number: INA 0159158
B. State Generator's ID:
C. State Transporter's ID:
D. Transporter's Phone: (616) 735-1500
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 Fuel Disposal Inc
6. Use EPA ID Number: MID984954063
7. Transporter 2 Company Name:
8. Use EPA ID Number:
9. Designated Facility Name and Site Address: American chemical service INC. 420 E. Colfax P.O. Box 190 Griffith, IN. 46319-0190
10. Use EPA ID Number: IND016360215

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 methyl Ethyl Ketone Flammable liquid UN1193	001	DM	000055	G	F005
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above: G = Gallons

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR — Printed/Typed Name: Herbert B. Rogers — Signature: Herbert B. Rogers — Date: Month 03 Day 11 Year 88

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials — Printed/Typed Name: Roger Norton — Signature: Roger Norton — Date: Month 03 Day 11 Year 88
18. Transporter 2 Acknowledgement of Receipt of Materials — Printed/Typed Name: — Signature: — Date: Month Day Year

FACILITY
19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19
Printed/Typed Name: Harold F Schmidt — Signature: Harold F Schmidt — Date: Month 03 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 0159158

EPA Form 8700-22 (Rev. 9-86) Previous editions are obsolete.
State Form 11865 | 0-123 R T-63 2/19/73
1-2078 T-50 2/19/73

DISTRIBUTION:
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PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

0015283

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. M I D 0 0 0 8 2 6 5 4 5 — Manifest Document No. 8 9 4 6 9
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
ROSPATCH LABEL COMPANY
3100 WALKENT DRIVE, N.W. GRAND RAPIDS, MI. 49504

A. State Manifest Document Number: INA 0189469

4. Generator's Phone (616) 784-1000

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
420 S. Colfax, P.O. Box 190
Griffith, IN 46319-0190
10. US EPA ID Number: I N D 0 1 6 3 6 0 2 6 5
G. State Facility's ID
H. Facility's Phone: (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE METHYL ETHYL KETONE (FOO5) FLAMMABLE LIQUID UN1193	8	D.M	440	G	FOO5
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
Herbert Rogers	Herbert Rogers	04	14	88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Roger Norton	Roger Norton	04	14	88

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in 19.

Printed/Typed Name	Signature	Month	Day	Year
HAROLD F Schmidt	Harold F Schmidt	04	15	88

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INAT 0189469

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

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PAGE 8 (white) TRANSPORTER 2 COPY

123RT63 4/20M

00152S4

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.
H I D 0 0 0 8 2 6 5 4 5			

3. Generator's Name and Mailing Address
ROSPATCH LABEL COMPANY
3100 WALKENT DRIVE, N.W. GRAND RAPIDS, MI. 49504

4. Generator's Phone 616 784-1000

A. State Manifest Document Number INA 0235371

B. State Generator's ID

5. Transporter 1 Company Name VALLEY CITY REFUSE DISPOSAL, INC.

6. Use EPA ID Number H I D 9 8 1 9 5 6 0 6 3

C. State Transporter's ID (616) 235-1500

D. Transporter's Phone

7. Transporter 2 Company Name

8. Use EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
420 S. Colfax, (P.O. Box 190
Griffith, IN 46319-0190

10. Use EPA ID Number I N D 0 1 6 3 6 0 2 6 5

G. State Facility's ID

H. Facility's Phone (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE PAINT RELATED MATERIAL FLAMMABLE LIQUID UN1993	2	DM	1375	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	Signature	Month	Day	Year
Herbert Rogers	Herbert Rogers	11	2	88

17. Transporter Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Roger Morton	Roger Morton	11	2	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	Signature	Month	Day	Year
John S. Mrada	John S. Mrada	11	2	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 0235371

EPA Form 8700-22 (Rev. 9-86) Previous editions are obsolete.
State Form 11865

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PAGE 8 (white) TRANSPORTER 2 COPY

24-123TC T63 6/30
1-284TC T50 6/30

0015285

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

13.

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CONDITIONALLY EXEMPT.
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
Ross Auto Body Inc.
786 Dayton Street, Aurora, CO 80010
4. Generator's Phone (303) 364-6334

A. State Manifest Document Number: INA 0159792
B. State Generator's ID:

5. Transporter 1 Company Name: Strand Trucking
6. Use EPA ID Number: I L D 0 0 0 6 4 6 8 1 0
C. State Transporter's ID: 0311
D. Transporter's Phone: 312-385-8440

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Service
420 S. Colfax Avenue
Griffith, IN 46319
10. Use EPA ID Number: I N D 0 1 6 3 6 0 2 6 5
G. State Facility's ID:
H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. RQ WASTE PAINT RELATED MATERIAL (F003) FLAMMABLE LIQUID NA1263	01	D-M	055	G	F003
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name	Signature	Month	Day	Year

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
LINDA LAMBERT	Linda Lambert	7	25	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
FRANK PRICE	Frank Price	7	25	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 0159792

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

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1160KCT63726

0015282

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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.: MID981799760
Manifest Document No.: 000001
2. Page 1 of 6
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Rossco, Inc. dba Maaco
25454 Five Mile Road Redford Township, MI 48239
4. Generator's Phone (313-535-8666

A. State Manifest Document Number: 8
B. State Generator's ID:

5. Transporter 1 Company Name: A & B Industrial Service
6. US EPA ID Number: MID017167222
C. State Transporter's ID:
D. Transporter's Phone: 616-375-9595

7. Transporter 2 Company Name:
8. US EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Service
420 S. Colfax Avenue
Griffith, IN 46319
10. US EPA ID Number: IND016360265
G. State Facility's ID:
H. Facility's Phone: 219-924-4370

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	X	WASTE PAINT RELATED MATERIAL FLAMMABLE LIQUID NA1263	002	DM	00110	G	F003
b.							
c.			4				
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: Paul Ross
Signature: Paul Ross
Month Day Year: 10 9 87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Lonzy Brown
Signature: Lonzy Brown
Month Day Year: 10 09 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: Harold J. Chmielewski
Signature: Harold J. Chmielewski
Month Day Year: 10 12 87

Style F15REV-6 Labelmaster, Div. of American Labelmark Co. Inc. 60646

EPA Form 8700-22 (Rev. 9/86) Previous editions are obsolete.

2-123R-T-63 10/12/87jm

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012978

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. IND981799760 | Manifest Document No. 7120 | 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
Maaco
25454 Five Mile road Redford, Township, MI 48239

A. State Manifest Document Number: INA 0117120

B. State Generator's ID

4. Generator's Phone (313) -535-8666

5. Transporter 1 Company Name: A&B Industrial Services | 6. Use EPA ID Number: MID017167222 | 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: IND016360265 | G. State Facility's ID | H. Facility's Phone (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I Waste No.
a. Waste Paint Related Material Flammable Liquid NA 1263	004	DM	00440	G	F003
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR — Printed/Typed Name: Alex Cruz Jr | Signature | Date Month Day Year: 4 4 87

TRANSPORTER — 17. Transporter 1 Acknowledgement of Receipt of Materials — Printed/Typed Name: DAVID Simpson | Signature | Date Month Day Year: 04 04 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: GP MURPHY | Signature | Date Month Day Year: 04 05 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 0117120

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
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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. MID981799760 | Manifest Document No.

2. Page 1 of 6 | Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Maaco
25454 Five Mile Rd. Redford Twp., MI 48239
4. Generator's Phone (313) 535-8666

A. State Manifest Document Number 1696I-A
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone 616-375-9595
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: A&B Industrial Services, Inc.
6. US EPA ID Number: MID017167222
7. Transporter 2 Company Name
8. US EPA ID Number

9. Designated Facility Name and Site Address
American Chemical Service
420 S. Colfax Griffith, IN 46319
20 S
10. US EPA ID Number: IND 016360265

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. Flammable Liquid NA1263 Waste Paint Related Material	X	12	DM	0010	1	D001
b.						
c.						
d.						

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above
1 - gallon
12 drums
66

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and ac... proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper c... according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxici... economically practicable and that I have selected the practicable method of treatment, storage, or disposa... future threat to human health and the environment; OR, if I am a small quantity generator, I have made a g... the best waste management method that is available to me and that I can afford.

...e degree I have determined to be ...e which minimizes the present and ...nize my waste generation and select

Printed/Typed Name	Signature	Month	Day	Year
Paul Ross		6	5	87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Rodney Brown		6	05	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		6	21	87

Style F15REV-6 Labelmaster, Div. of American Labelmark Co. Inc. 60646

EPA Form 8700-22 (Rev. 9/86) Previous editions are obsolete.

12-126K 763 B 7

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012977

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.: MID981799760 00000 1

2. Page 1 of: 7

Information in the shaded areas is not required by Federal law

3. Generator's Name
Masco
25454 Five Mile Road Redford Township, MI 48239

A. State Manifest Document Number: IN 034193

B. State Generator's ID:

4. Generator's Phone ( ) 313 535-8666

5. Transporter 1 Company Name: A & B Industrial Service, Inc.

6. US EPA ID Number: MID017167222

C. State Transporter's ID:

D. Transporter's Phone: 616-375-9595

7. Transporter 2 Company Name:

8. US EPA ID Number:

E. State Transporter's ID:

F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Service
420 S. Colfax Avenue
Griffith, IN 46319

10. US EPA ID Number: IND016360265

G. State Facility's ID:

H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
GENERATOR a. WASTE PAINT RELATED MATERIAL FLAMMABLE LIQUID NA1263	01	DM	110	G	F003
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

Printed/Typed Name	Signature	Month	Day	Year

TRANSPORTER	Printed/Typed Name	Signature	Month	Day	Year
17. Transporter 1 Acknowledgement of Receipt of Materials					Date
	RAYMOND BRAGG		12	14	87
18. Transporter 2 Acknowledgement of Receipt of Materials					Date
	Kenny Eckar		12	14	87

FACILITY	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.					
	HARRELD E. PLUMLEE		12	14	87

IN 034193

EPA Form 8700-22A (Rev. 11-85) UHWM 2/LP2

2-126 T-63 12/14/87 T.S.D. DETACH AND RETAIN THIS COPY

012979

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 9 8 J 7 9 9 7 6 0	0001	8	

GENERATOR

3. Generator's Name and Mailing Address
HAACO
25454 Five Mile Road, Redford Township, MI 48239
4. Generator's Phone (313) 535-8666

A. State Manifest Document Number: INA 0159946
B. State Generator's ID:

5. Transporter 1 Company Name: A&R Industrial Service, Inc.
6. US EPA ID Number: M I D 0 1 7 1 6 7 2 2 2
C. State Transporter's ID:
D. Transporter's Phone: 616-375-9595

7. Transporter 2 Company Name:
8. US EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
420 S. Colfax Avenue
Griffith, IN 46319
10. US EPA ID Number: 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.	State Waste No.
a. RQ WASTE PAINT RELATED MATERIAL (F003) FLAMMABLE LIQUID NA1263	003	DM	055	G	F003
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
LABEL 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
Paul Ross		10	1	88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Michael Emmitt		10	1	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
HAROLD F SCHMIDT				

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 0159946

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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

126TCT63 4/M

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·9·8·1·7·9·9·7·6·0
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
Haaco
25454 5 Mile Road, Redford Township, MI 48239
4. Generator's Phone (313) 535-8666

A. State Manifest Document Number INA 0159743
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone 616-375-9595
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: A & B Industrial Services, Inc.
6. US EPA ID Number: M·T·D·0·1·7·1·6·7·2·2·2
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: 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. RQ, WASTE PAINT RELATED MATERIAL (F003), FLAMMABLE LIQUID, NA1263	005	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.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good 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: Paul Ross
Signature
Date: Month / Day / Year

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Date: Month / Day / Year
18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Date: Month / Day / Year

FACILITY
19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: Arvin Whitaker
Signature
Date: Month 7 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 0159743

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

126TC163 7/14M

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. MID981799760 — Manifest Document No.

2. Page 1 of — Information in the shaded areas is not required by Federal law

3. Generator's Name
Maaco
25454 5 Mile Road Redford Township, MI 48239

4. Generator's Phone (313) 535-8666

A. State Manifest Document Number IN 034291

B. State Generator's ID

5. Transporter 1 Company Name
Garand Trucking

6. US EPA ID Number

C. State Transporter's ID 0801

D. Transporter's Phone 313-385-8440

7. Transporter 2 Company Name
Adcom Express

8. US EPA ID Number ILD047267354

E. State Transporter's ID 0367

F. Transporter's Phone 312-429-3013

9. Designated Facility Name and Site Address
American Chemical Service
420 S. Colfax Avenue
Griffith, IN 46319

10. US EPA ID Number IND016360265

G. State Facility's ID

H. Facility's Phone 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
GENERATOR a. RQ WASTE PAINT RELATED MATERIAL (F003) FLAMMABLE LIQUID NA1263	001	DM	1200	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: PAUL W ROSS — Signature — Month 12 Day 16 Year 86

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Donald Hines Jr — Signature — Date: Month 12 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 Item 19.

Printed/Typed Name: Alvin Whitaker — Signature — Month 12 Day 16 Year 86

IN 034291

EPA Form 8700-22A (Rev. 11-85) UHWM 2/LP2

123C763 E/D

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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.: MID 981 799 760
Manifest Document No.: 11078F
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Maaco
25454 Five Mile Road, Redford Township, MI. 48239
4. Generator's Phone (313) 535-8666

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID: 0367
D. Transporter's Phone: 312-429-1660
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone: 219-924-4370

5. Transporter 1 Company Name: ADCOM EXPRESS, INC.
6. US EPA ID Number: ILD 047 267 364
7. Transporter 2 Company Name
8. US EPA ID Number
9. Designated Facility Name and Site Address: American Chemical Service, 420 South Colfax Ave., Griffith, IN. 46319
10. US EPA ID Number: IND 016 360 265

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	HM	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	15. Waste No.
a. RQ WASTE PAINT RELATED MATERIAL F003 FLAMMABLE LIQUID NA 1263		4	dm	200	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] Kots
Signature:
Month Day Year:

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: LAWRENCE A. GODBOLD
Signature:
Month: 11 Day: 07 Year: 88

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Month Day Year:

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: FRANK PRICE
Signature: Frank Price
Month: 11 Day: 15 Year: 88

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: MID 981 799 760
Manifest Document No.: 071189L
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Maaco
25454 5 Mile Road, Redford Township, MI 48239
4. Generator's Phone (313) 535-8666

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: ADCO Express
6. US EPA ID Number: ILD 047 267 364
C. State Transporter's ID: 0367
D. Transporter's Phone: 312-429-1660

7. Transporter 2 Company Name
8. US EPA ID Number
E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Service
420 S. Colfax Avenue
Griffith, IN 46319
10. US EPA ID Number: IND 016 360 265
G. State Facility's ID
H. Facility's Phone: 219-924-4370

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	HM	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. RQ WASTE PAINT RELATED MATERIAL (F003) FLAMMABLE LIQUID NA1263	X	3	DM	152	G	F003
b.						
c.						
d.						

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above
G - GALLON

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION**: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name | Signature | Month Day Year

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name | Signature | Month Day Year

Style F15REV-6 Labelmaster, Div. of American Labelmark Co Inc 60646

EPA Form 8700-22 (Rev. 9/86) Previous editions are obsolete.

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. / Manifest Document No.: MID981797606 92588 G

2. Page 1 of 6

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Maaco
25454 5 Mile Road, Redford Township, MI 48239
4. Generator's Phone (313) 535-8666

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: ADCOM EXPRESS
6. US EPA ID Number: ILD046267364
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

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.	X HM EQ WASTE PAINT RELATED MATERIAL (F003) FLAMMABLE LIQUID NA 1263	002	dm	00200	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.

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Printed/Typed Name: [illegible] | Signature: [signature] | Month Day Year: 11 17

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Whitaker A | Signature: [signature] | Month Day Year: 11 19 88

Style F15REV-6 LABELMASTER, Div. of AMERICAN LABELMARK CO., CHICAGO, IL 60646

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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. / Manifest Document No.: A I D 9 8 1 7 9 9 7 6 0 | 1 2 4 9 H

2. Page 1 of 1

Information in the shaded areas is not required by Federal law.

GENERATOR

3. Generator's Name and Mailing Address
Maaco
25454 5 Mile Road, Redford Township, MI 48239

4. Generator's Phone (313) 535-8666

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name
ADCOM EXPRESS

6. US EPA ID Number
I L D 0 4 7 2 6 7 3 6 4

C. State Transporter's ID 0367

D. Transporter's Phone 708-429-1660

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Serviced
420 S. Colfax Avenue
Griffith, IN 46319

10. US EPA ID Number
I N D 0 1 6 3 6 0 2 6 5

G. State Facility's ID

H. Facility's Phone 219-924-4370

	11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	HM	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	RQ WASTE PAINT RELATED MATERIAL (F003) FLAMMABLE LIQUID NA 1263	X	002	DM	00100	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
Ronald Pezzano	[signature]	1 2 0 1 9

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month Day Year
[illegible]	[signature]	1 2 1 3 9

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	[signature]	1 2 1 7 9

Style F15REV-6 LABELMASTER, Div of AMERICAN LABELMARK CO., CHICAGO, IL 60646

EPA Form 8700-22 (Rev. 9-88) Previous editions are obsolete

123FCT03 1/3

TSDF COPY

0017146

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: MID 981 799 760
Manifest Document No.: 50183L
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

GENERATOR

3. Generator's Name and Mailing Address
Maaco
25454 5 Mile Road, Redford Township, MI 48239
4. Generator's Phone (313) 535-8666

A. State Manifest Document Number:
B. State Generator's ID:
C. State Transporter's ID: 0367
D. Transporter's Phone: 312-429-1660
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID:
H. Facility's Phone: 219-924-4370

5. Transporter 1 Company Name: ADCO Express
6. US EPA ID Number: ILD 047 267 364
7. Transporter 2 Company Name:
8. US EPA ID Number:
9. Designated Facility Name and Site Address: American Chemcial Service, 420 South Colfax Avenue, Griffith, IN 46319
10. US EPA ID Number: IND 016 360 265

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a. RQ WASTE PAINT RELATED MATERIAL (F003) FLAMMABLE LIQUID NA 1263	X	7	dm	365	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.

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Printed/Typed Name | Signature | Month 12 | Day 2 | Year 87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month 12 | Day 2 | 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 in Item 19.
Printed/Typed Name | Signature | Month 12 | Day 14 | Year 87

Style F15REV-6 Labelmaster, Div. of American Labelmark Co. Inc. 60646

EPA Form 8700-22 (Rev. 9/86) Previous editions are obsolete.

1YBTCT63 5/8

TSDF COPY

0017143

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.
MIDO225715 73	0000		

A. State Manifest Document Number: INA 0111196

3. Generator's Name and Mailing Address: RON RILEY, P.O. BOX 1173, BIG RAPIDS, MI 49307

B. State Generator's ID:

4. Generator's Phone: (616) 796-6700

5. Transporter 1 Company Name: HAVILAND

6. US EPA ID Number: MID006028492

C. State Transporter's ID:

D. Transporter's Phone:

7. Transporter 2 Company Name: (UNKNOWN)

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. CULLEN, GRIFFITH, IN 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. WASTE TRICHLOROETHYLENE ORM-A UN1710	01	DM	55	GAL	D040 1H
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: LADEN AREAS IS REQUIRED BY INDIANA STATE LAW

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR

Printed/Typed Name	Signature	Month	Day	Year

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
GERALD VANDYKE				

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
		4	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.

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

MAIL

1-11812 FG3 18

INA 0111196

012528

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0293641

992454

Authorization Number ~~123456~~

ILD 064419575

Rotogravure Packaging (Company Name) | 45 Church Street (Address)

Addison (City) | Illinois (State) | 60101 (Zip)

04 300 5 000 1 G
Generator Number

WASTE HAULER(S)

Mr. Frank Inc. (Hauler Name) | 201 W. 155th Street (Hauler Address)
South Holland, IL 60473

S.W.H. Registration Number 00790 03

ILD 069506160

(Hauler Name) | (Hauler Address)

S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | P. O. Box 190 (Address)

91808902
Site Number

Griffith (City) | Indiana (State) | 46319 (Zip)

IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Ink solvents

WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:
Solvent NOS	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: 3,000

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.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 12-11-80 F003 Edward J. Rushatt
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) _____ (Authorized Signature) DATE: 12/11/80

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) DATE: 12/11/80

COMMENTS OR SPECIAL INSTRUCTIONS: To 112R 12/11/80 gpm T-43

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

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

025

Authorization Number 947454

TO BE COMPLETED BY WASTE GENERATOR

Rotogravure Packaging (Company Name) | 45 Church Street (Address)

Addison (City) | Illinois (State) | 60101 (Zip)

0 4 3 0 0 5 0 0 0 1 G
Generator Number

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) | 201 W. 155th Street (Hauler Address) | S.W.H. Registration Number 0079004

PHONE # 596-3377 | South Holland, Il. 60473 | ILD 069506 160

Hauler Name | Hauler Address | S.W.H. Registration Number

PHONE # 768-3400

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | P.O. Box 190 (Address) | 918089 02 Site Number

Griffith (City) | Indiana (State) | 46319 (Zip) | IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Ink solvents | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	WEIGHT FOR D.O.T. USE
WASTE Solvent	Flammable	LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 003000

(1 GALLONS / 2 CU. YDS.) (Circle One) 1

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 3/13/81 | (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: 03/13/81

(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: 03/13/81

MENTS OR SPECIAL INSTRUCTIONS: TO EAST ACIT T-50 3/13/81 Jim Mungaly

NOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-8802

LUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

000568

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

0557267

Authorization Number 998454

ROTOGRAVURE PACKAGING (Company Name) | 45 CHURCH STREET (Address) | (Phone Number) | 0430050001 (Generator Number)

ADDISON (City) | ILLINOIS (State) | 60101 (Zip) | ILD064419575 (EPA Number)

WASTE HAULER(S)

MR. FRANK, INC. (Hauler Name) | 201 W. 155th STREET, SOUTH HOLLAND, ILL. 60473 (Hauler Address) | 596-3377 (Phone Number) | S.W.H. Registration Number | ILD [illegible] (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) | P.O. BOX 190 (Address) | 9180902 (Site Number)

GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | 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: 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 | UN 1993 (UN or NA Number) | F003 (EPA HW Number)

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 003000 | 1 GALLONS (Circle One) 2 CU. YDS.

METHOD OF SHIPMENT (Circle One) (DRUMS_____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE 11-9-81

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 11/09/81

(2) _____ (Authorized Signature) DATE ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

[signature] (Authorized Signature) DATE 11/9/81

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 To 210K GRH T-SO 11/9/81

0020570

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

0557268

Authorization Number 9 98454

ROTOGRAVURE PACKAGING (Company Name) | 45 CHURCH STREET (Address) | 312-628-8700 (Phone Number) | 0430050001 (Generator Number)

ADDISON (City) | ILLINOIS (State) | 60101 (Zip) | ILD064419575 (EPA Number)

WASTE HAULER(S)

MR. FRANK, INC. (Hauler Name) | 201 W. 155th STREET (Hauler Address) | S.W.H. Registration Number 007400

SOUTH HOLLAND, IL. 60473 | 596-3377 (Phone Number) | EPA Number

Hauler Name | Hauler Address | S.W.H. Registration Number

596-3377 (Phone Number) | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | P.O. BOX 190 (Address) | 91808902 (Site Number)

GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | 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: 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 | 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: 003000 | 0 GALLONS (Circle One) / CU. YDS.

METHOD OF SHIPMENT (Circle One) (DRUMS_____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION T. E. Stillings (Authorized Signature) DATE 1-15-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) G. Robertson (Authorized Signature) DATE 01/15/82

(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 1/15/82

COMMENTS OR SPECIAL INSTRUCTIONS _____

IN ILLINOIS, 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV # 3

SITE COPY - PART 3

To 204K T-50 ERM 1/15/82

002424

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.) See Instructions on back of form.

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of	Information in shaded area not required by Federal law. Minnesota rules require items H. and I.
MND 066901000			

3. Generator's Name and Mailing Address: ROHLSON MOTORS, 14782 NO 60TH ST Box 19, STILL WATER, MN. 55082

A. State Manifest Document Number: MN 0016165

B. State Generator's ID:

4. Generator's Phone: (612) 430-2500

5. Transporter 1 Company Name: AUTO BODY SUPPLY INC

6. US EPA ID Number: MND 023023377

C. State Transporter's ID:

D. Transporter's Phone: 612-788-9616

7. Transporter 2 Company Name: ~~STRAND TRUCKING~~ ABC SERVICES

8. US EPA ID Number: ~~FL 0220064510~~ 4010 0878 4357

E. State Transporter's ID:

F. Transporter's Phone: ~~312-385-0400~~

9. Designated Facility Name and Site Address: AMERICAN CHEM. SERV. 420 S. COLFAX GRIFFITH INDIANA 46319

US EPA ID Number: IND 016360265

G. State Facility's ID: ~~ILL-232-0022~~ ILL 9180895003

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	2	DM	110	80	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)
Jerry D. Vecrendall	Jerry D. Vecrendall	06 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 KLEES	Frank Klees	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)
MURPHY		06 23 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

012000

MINNESOTA POLLUTION CONTROL AGENCY
DIVISION OF SOLID AND HAZARDOUS WASTE
1935 WEST COUNTY ROAD B-2
ROSEVILLE, MN 55113-2785
ATTN: HWIMS

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) Instructions on back of form.

For MPCA use only

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MND066201000 | Manifest Document No. 42198 | 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 ROUTSON-MTRS
14702 Hy 36 & 60 Stillwater 55082

A. State Manifest Document Number MN 0042198

B. State Generator's ID

4. Generator's Phone (612) 430-2900

5. Transporter 1 Company Name ABC SERVICES, INC.

6. US EPA ID Number WID076159839

C. State Transporter's ID

D. Transporter's Phone 414-657-6222

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
420 SOUTH COLFAX
GRIFFITH, IN 46319

10. U.S EPA ID Number IND016360265

G. State Facility's ID

H. Facility's Phone 219-924-4370

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) HM		12. Containers No	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	X	FLAMMABLE LIQUID, NOS, UN1993	1	DM	55	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	Signature	Date (Month Day Year)
X James J. Ehret	James J. Ehret	9 5 86

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)
R.P. Nilson	R.P. Nilson	9 5 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)
G. MURPHY		09 10 86

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

125463
012001

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. H·I·G·0·0·0·0·0·3·5·0·9 | Manifest Document No. 1·4·1·0·5 | 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
Rowen & Blair
2513 Burdick Kalamazoo, MI 49007

4. Generator's Phone (616) 381 3050

A. State Manifest Document Number: INA 0172240
B. State Generator's ID:

5. Transporter 1 Company Name: Terra Environmental
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
420 S. Colfax Ave.
Griffith, IN 46319-0190
10. Use EPA ID Number: I.N.D.0.1.6.3.6.0.2.6.5
G. State Facility's ID:
H. Facility's Phone: (219) 924 5298

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 1,1,1 Trichlorethane ORM-A UN2831	02	D.M	00.1.10	G	F.0.0.1.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 government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good 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: DONALD DERHAMMER | Signature: Donald Derhammer | Date: Month 05 Day 26 Year 88

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Roger Chamberlain | Signature: Roger Chamberlain | Date: Month 05 Day 27 Year 88
18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: | Signature: | Date: Month . Day . Year .

FACILITY
19. Discrepancy Indication Space
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Harold F. Schmidt | Signature: Harold F. Schmidt | Date: Month 05 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 0172240

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

204 FCT 5 8/5m

0015290

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 982426996	Manifest Document No. 07262	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
RTK R & D Center
N25 W23131cPaul Rd. Pewaukee, WI 53072

A. State Manifest Document Number: INA 0237262

4. Generator's Phone (414) 548-6176

B. State Generator's ID

5. Transporter 1 Company Name: ~~R & K Hazardous Waste Services~~

6. Use EPA ID Number: ~~WID 9 882 4 4 9 5 2 9~~

C. State Transporter's ID: ~~IN 13608~~

D. Transporter's Phone: ~~414-458-6836~~

7. Transporter 2 Company Name: CBC Transport

8. Use EPA ID Number: WID047259288

E. State Transporter's ID: 11536

F. Transporter's Phone: (414) 764-5005

9. Designated Facility Name and Site Address
American Chemical
420 Colfax P.O. Box 190
Griffith, IN 46319

10. Use EPA ID Number: IND016360265

G. State Facility's ID

H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. ~~Scrap Solvent~~, RQ, Waste Flammable Liquid,n.o.s., flammable liquid,UN1993,(F003,F005,EPA Ignitable)	004	DM	00220	G	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
1a - (Scrap 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	Signature	Month	Day	Year
ARTHUR W. LEMM	Arthur W. Lemm	05	04	88

GENERATOR

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
BRUCE BENOIT		05	04	88

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name	Signature	Month	Day	Year
HARROLD F. Schmidt		05	04	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 0237262

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

204TCT50 5/11M

0015281

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0109864

WASTE GENERATOR

Authorization Number 991252

RUST-OLEUM CORP. (Company Name) 2301 OAKTON ST. (Address)

EVANSTON (City) ILL. (State) 60204 (Zip)

0310810006 G (Generator Number)

FED. EPA # ILD-094748571

WASTE HAULER(S)

(1) MR. FRANK, INK. (Hauler Name) SOUTH HOLLAND (Hauler Address)

S.W.H. Registration Number 0029018

FED. EPA # ILD-069506160

(2) _____ (Hauler Name) _____ (Hauler Address)

S.W.H. Registration Number _____

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEM (Facility Name) 420 S. COLFAX (Address)

91808902 (Site Number)

GRIFFITH (City) IND. (State) _____ (Zip)

FED. EPA No IND 016360265

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: TANK TRUCK

HAZARD CLASS: ~~COMBUSTIBLE~~ 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: 1/6/81 (Authorized Signature) EPA HAZARDOUS WASTE #K078

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: 01 06 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:

BOB MAUK (Authorized Signature) DATE: 01 06 81

COMMENTS OR SPECIAL INSTRUCTIONS: TO DSF T-45 1/6/81 Jim Mauk

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

0000551

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0287021

Authorization Number 991252

TO BE COMPLETED BY WASTE GENERATOR

Rust-Oleum Corp. (Company Name) | 2301 Oakton St. (Address)
Evanston (City) | Ill. (State) | 60204 (Zip)
0310810006 (Generator Number) G
Fed. EPA # ILD-094748571

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) | 201 W 155th Pl. South Holland, Ill. (Hauler Address)
S.W.H. Registration Number [illegible]
Fed. EPA #ILD-069506160

(Hauler Name) | (Hauler Address)
S.W.H. Registration Number 0079018

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Services (Facility Name) | 420 South Colfax (Address)
91808902 (Site Number)
Griffith (City) | Ind. (State) | (Zip)
Fed. EPA # IND-016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Organic Solvent
WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	WEIGHT FOR D.O.T. USE
Tank Truck	Flammable	LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 004840 (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. + EPA

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 1/14/81 F003 [signature] (Authorized Signature) EPA Hazardous Waste #K078

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 14 81

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

[signature] (Authorized Signature) DATE: 01 14 81

COMMENTS OR SPECIAL INSTRUCTIONS: Pumped to 123E 1/14/81 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

000552

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

0303944 (1–7)

Authorization Number 991252 (8–13)

Rust-Oleum Corp. (Company Name) | 2301 Oakton St. (Address)
Evanston, (City) | Ill. (State) | 60204 (Zip)
0310810006 (Generator Number, 14–24) G
Fed. EPA # ILD-094748571

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) | 201 W 155th Pl. (Hauler Address)
South Holland, Ill. 60473
S.W.H. Registration Number 0079021 (25–31)
Fed. EPA #ILD-069506160

(Hauler Name) | (Hauler Address)
S.W.H. Registration Number (32–38)

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Services (Facility Name) | 420 South Colfax (Address)
Griffith (City) | Ind. (State) | 46319 (Zip)
918089902 (Site Number, 39–46)
Fed. EPA #IND-016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Organic Solvent 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: Tank Truck
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: 004500 (47–52)
1 GALLONS (Circle One) 2 CU. YDS. 1 (53)

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 4/20/81
(Authorized Signature)
EPA Hazardous Waste #K078

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) _____ (Authorized Signature) DATE: 04-29-81 (54–59)

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

_____ (Authorized Signature) DATE: 4-30 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO #1 STILL T-63 4/20/81 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

0000555

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

0303946 (1–7)

991252 (8–13) Authorization Number

Rust-Oleum Corp. (Company Name) | 2301 Oakton St. (Address) | Evanston, (City) | Ill. (State) | 60204 (Zip)

0310810006 (14–24) Generator Number G

Fed. EPA # ILD-054748571

WASTE HAULER(S)

Mr. Frank Inc. (Hauler Name) | 201 W 155th Pl. (Hauler Address) | , South Holland, Ill. 60473

S.W.H. Registration Number 0079019 (25–31)

Fed. EPA #ILD-069506160

Hauler Name | Hauler Address

S.W.H. Registration Number (32–38)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Services (Facility Name) | 420 South Colfax (Address) | Griffith (City) | Ind. (State) | 46319 (Zip)

91808902 (39–46) Site Number

Fed. EPA # IND-016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Organic 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: Tank Truck

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: 004500 (47–52) GALLONS (Circle One) 2 CU. YDS. 1 (53)

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 5/11/81

Charles Tellson (Authorized Signature)

EPA Hazardous Waste #K078

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) Mike Martin (Authorized Signature) DATE: 05 11 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 11 81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO # 2 STILL 5/11/81 T-63 JDM

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

000554

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

0303948

Authorization Number 991252

Rust-Oleum Corp. (Company Name) | 2301 Oakton St. (Address)
Evanston, (City) | Ill. (State) | 60204 (Zip)
03108100006 G (Generator Number)
FED. EPA #ILD-094748571

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) | 201 W. 155th St. (Hauler Address) | South Holland, Ill. 60473
S.W.H. Registration Number 0079019
FED.EPA #ILD-069506160

(Hauler Name) | (Hauler Address)
S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Services (Facility Name) | 420 South Colfax (Address)
Griffith (City) | Ind. (State) | 46319 (Zip)
91808902 (Site Number)
FED. EPA #IND-016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Organic Solvent
WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: K078

SHIPPING DESCRIPTION: Tank Truck
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: 004500
1 GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 5/27/81 (Authorized Signature) EPA Hazardous Waste #Ko78

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 27 81

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) DATE: 5/27/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO WEST AGIT T-50 5/27/81 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

0000553

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

0303949

Authorization Number 991252

Rust-Oleum Corp. (Company Name) | 2301 Oakton St. (Address)
Evanston, (City) | Ill. (State) | 60204 (Zip)
0310810006 (Generator Number) G
FED. EPA # ILD-094748571

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) | 201 W. 155th St. (Hauler Address)
So. Holland, Ill. 60473
S.W.H. Registration Number 0079019
FED. EPA #ILD-069506160

(Hauler Name) | (Hauler Address)
S.W.H. Registration Number

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Services (Facility Name) | 420 South Colfax (Address)
Griffith, (City) | Ind. (State) | 46319 (Zip)
91808902 (Site Number)
FED.EPA #IND-016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Organic Solvent
WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	WEIGHT FOR D.O.T. USE
Tank Truck	Flammable	LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 004500

(1) GALLONS (Circle One) (2) CU. YDS. 1

METHOD OF SHIPMENT (Circle One) DRUMS (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: 6/5/81 (Authorized Signature) EPA Hazardous Waste #K078

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: 06/05/81

(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: 6/5/81

COMMENTS OR SPECIAL INSTRUCTIONS: To 125Tk 6/5/81 T-6390M

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

000356

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

0303950

Authorization Number 991252

Rust-Oleum Corp. (Company Name) | 2301 Oakton St. (Address) | Evanston, (City) | Ill. (State) | 60204 (Zip)

0310810006 (Generator Number) G

FED. EPA. No. ILD-094748571

WASTE HAULER(S)

Mr. Frank Inc. (Hauler Name) | 201 W. 155th St. (Hauler Address) | So. Holland, Ill. 60473

S.W.H. Registration Number 0079019C

FED.EPA No. ILD-069506160

Hauler Name | Hauler Address

S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Services (Facility Name) | 420 South Colfax (Address) | Griffith, (City) | Ind. (State) | 46319 (Zip)

91808902 (Site Number)

FED. EPA No. IND-016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Organic Solvent K073 | 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: Tank Truck | 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: 003000 | 1 GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 6/12/81 | (Authorized Signature) | EPA Hazardous Waste #K078

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) Donald F/Burt (Authorized Signature) DATE: 06 12 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: 6 12 81

COMMENTS OR SPECIAL INSTRUCTIONS: TO EAST AGIT T-50 6/12/81 JRM

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

000037

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0303951

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 991252

Rust-Oleum Corp. (Company Name) | 2301 Oakton St. (Address)
Evanston, (City) | Ill. (State) | 60204 (Zip)

0310810006 G (Generator Number)
FED. EPA. No. ILD-094748571

WASTE HAULER(S)

Mr. Frank Inc. (Hauler Name) | 201 W. 155th St. (Hauler Address)
So. Holland, Ill.
S.W.H. Registration Number 0079 019
FED.EPA No. ILD-069506160

(Hauler Name) | (Hauler Address)
S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Services (Facility Name) | 420 South Colfax (Address)
Griffith (City) | Ind. (State) | 46319 (Zip)
91808902 Site Number
FED. EPA No. IND-016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Organic Solvent
WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: K078

SHIPPING DESCRIPTION: Tank Truck
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: 004500
(1) GALLONS (Circle One) (2) CU. YDS. 1

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 6-17-81 James W Clifton (Authorized Signature) EPA Hazardous Waste #K078

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Robert Perkins (Authorized Signature) DATE 06/17/81

(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:

F D Wheeler (Authorized Signature) DATE: 6/17/81

COMMENTS OR SPECIAL INSTRUCTIONS: To 126R T-63 6/17/81 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

000556

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

0303953

Authorization Number 991252

Rust-Oleum Corp. (Company Name) | 2301 Oakton St. (Address)
Evanston, (City) | Ill. (State) | 60204 (Zip)
0310810006 (Generator Number) | FED. EPA. No. ILD-094748571

WASTE HAULER(S)

Mr. Frank Inc. (Hauler Name) | 201 W. 155th St. (Hauler Address)
So. Holland, Ill. 60473
S.W.H. Registration Number 0079009 | FED. EPA No. ILD.-069506160

(Hauler Name) | (Hauler Address)
S.W.H. Registration Number

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Services (Facility Name) | 420 South Colfax (Address)
Griffith, (City) | Ind. (State) | 46319 (Zip)
91808902 (Site Number) | FED. EPA. No. IND-016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Organic Solvent
WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

K073

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Tank Truck
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: 7/2/81 (Authorized Signature)

EPA Hazardous Waste #K078

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: 07 02 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: 7/2/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO EAST ACRES T-50 7/2/81 JM

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802

DISIRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART - 6 GENERATOR

SITE COPY - PART 3

0030550

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0303954

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 991252

Rust-Oleum Corp. (Company Name) | 2301 Oakton St. (Address)
Evanston (City) | Ill. (State) | 60204 (Zip)
0310810006 G (Generator Number)
FED.EPA No. ILD-094748571

WASTE HAULER(S)

Mr. Frank Inc. (Hauler Name) | 201 W. 155th St. (Hauler Address)
So. Holland, Ill. 60473
S.W.H. Registration Number 0079029
FED.EPA No. ILR-069506160

(Hauler Name) | (Hauler Address)
S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Services (Facility Name) | 420 South Colfax (Address)
Griffith (City) | Ind. (State) | 46319 (Zip)
91808902 Site Number
FED.EPA No. IND-016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Organic 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: Tank Truck
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
(1) GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) ..... DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 7/16/81 (Authorized Signature)

7/16/81

EPA Hazardous Waste #K078

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) Donald H Burt (Authorized Signature) DATE: 07/16/81

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 7/16/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO WEST 99TH T-50 7/16/81 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

00..0551

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0303955

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number 991252

Rust-Oleum Corp. (Company Name) | 2301 Oakton St. (Address)
Evanston, (City) | Ill. (State) | 60204 (Zip)
0310810006 (Generator Number)
FED. EPA No. ILD-094748571

WASTE HAULER(S)

Mr. Frank Inc. (Hauler Name) | 201 W. 155th St. (Hauler Address)
So. Holland, Ill. 60473
S.W.H. Registration Number 0079009
FED. EPA No. ILD 069506160

Hauler Name | Hauler Address
S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Services (Facility Name) | 420 South Colfax (Address)
Griffith (City) | Ind. (State) | 46319 (Zip)
91808902 (Site Number)
FED. EPA No. IND-~~016360265~~ 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Organic 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: Tank Truck
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: 05000
1 GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 8/31/81
Charles Stiem (Authorized Signature) EPA Hazardous Waste #K078

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: 08/31/81

(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: 08/31/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 211R T-50 8/31/81 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

0000562

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

0303957

SPECIAL WASTE HAULING MANIFEST

Authorization Number 991252

Rust-Oleum Corporation (Company Name) | 2301 Oakton Street (Address)
Evanston (City) | Illinois (State) | 60204 (Zip)
0310810006 G (Generator Number)
FED.EPA.NO.ILD-094748571

WASTE HAULER(S)

Mr. Frank Inc. (Hauler Name) | 201 W. 155th. Street (Hauler Address) | South Holland, Ill.
0079023 (S.W.H. Registration Number)
FED.EPA.NO. ILD-069506160

Hauler Name | Hauler Address | S.W.H. Registration Number

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Services (Facility Name) | 420 South Colfax (Address)
9180890 2 (Site Number)
Griffith (City) | Ind. (State) | 46319 (Zip)
FED.EPA.NO. IND-016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Organic 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: Tank Truck | HAZARD CLASS: Flammable K078

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000

1 GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 6-19-81 James W. Olsen (Authorized Signature) EPA HAZARDOUS WASTE #K078

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 Morton (Authorized Signature) DATE: 06 19 81

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ (Authorized Signature) DATE: 6/19/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 1262 T-63 6/19/81 JDM

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

000053

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

0303958

Authorization Number 991252

Rust-Oleum Corp. (Company Name) | 2301 Oakton St. (Address) | Evanston, (City) | Ill. (State) | 60204 (Zip)

0310810006 (Generator Number)

FED EPA. No. ILD-094748571

WASTE HAULER(S)

Mr. Frank Inc. (Hauler Name) | 201 W. 155th St. (Hauler Address) | South Holland, Ill.

S.W.H. Registration Number 0079021

FED.EPA. No. ILD-069506160

(Hauler Name) | (Hauler Address)

S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Services (Facility Name) | 420 South Colfax (Address) | Griffith (City) | Ind. (State) | 46319 (Zip)

91808902 (Site Number)

FED. EPA No. IND-016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Organic 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: Tank Truck

HAZARD CLASS: Flammable

WEIGHT FOR D.O.T. USE 40,000 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000

(1) GALLONS (Circle One) (2) CU. YDS. 1

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 9/21/81

(Authorized Signature)

FDS

EPA Hazardous Waste No. K078

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) Robert Parkins (Authorized Signature) DATE 09 21 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: 9/21/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 122R J-63 9/22/81 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

060583

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

0303961
1 7

991252
Authorization Number 8 13

Rust- Oleum Corp. (Company Name) | 2301 Oakton St. (Address)
Evanston, (City) | Ill. (State) | 60204 (Zip)

0310810006
14 Generator Number G 24

FED. EPA No. ILD 094748571

WASTE HAULER(S)

Mr. Frank Inc. (Hauler Name) | 201 W. 155th St. (Hauler Address)
So. Holland, Ill. 60473

S.W.H. Registration Number 0079025
25 31

FED. EPA. No. ILD 069506160

Hauler Name | Hauler Address

S.W.H. Registration Number 32 38

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Services (Facility Name) | 420 South Colfax (Address)
Griffith (City) | Ind, (State) | 46319 (Zip)

91808902
39 Site Number 46

FED. EPA No. IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Organic 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: Tank Truck

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. 1
53

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 10/28/81

Charles Schuer (Authorized Signature)

*EPA Hazardous Waste #K078

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) Donald W Burt (Authorized Signature) DATE: 10 28 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: 10/28/81
60 65

COMMENTS OR SPECIAL INSTRUCTIONS: TO 211R T-50 - 10/28/81 - gfm

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

0000564

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

0303962
1 7

Authorization Number 991252
8 13

Rust-Oleum Corp. (Company Name) | 2301 Oakton St. (Address)
Evanston, (City) | Ill. (State) | 60204 (Zip)

0310810006 (Generator Number) 14 G 24
FED.EPA No ILD 994748571

WASTE HAULER(S)

Mr. Frank Inc. (Hauler Name) | 201 155th St. (Hauler Address)
So. Holland, Ill. (City, State)

S.W.H. Registration Number 0079019
25 31
FED. EPA.No. ILD.069506160

(Hauler Name) | (Hauler Address)

S.W.H. Registration Number 32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Services (Facility Name) | 420 South Colfax (Address)
Griffith (City) | Ind. (State) | 46319 (Zip)

9 1 8 0 8 9 0 2
39 Site Number 46

FED. EPA No. IND.016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Organic Solvent

WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	WEIGHT FOR D.O.T. USE
TAnk Truck	Flammable	_____ LBS / TONS (circle one)

*WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 004500 (47 52)

(1) GALLONS (2) CU. YDS. (Circle One) — 1 (53)

METHOD OF SHIPMENT (Circle One) DRUMS 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: 10/30/81

Charles Slevin (Authorized Signature)

EPA Hazardous Wasste No. K078

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) D Burt (Authorized Signature) DATE: 10 30 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 10 30 81 (60 65)

COMMENTS OR SPECIAL INSTRUCTIONS: To 211R T-50 10/30/81 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

000565

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

0303963

Authorization Number 991252

Rust-Oleum Corp. (Company Name) | 2301 Oakton St. (Address)
Evanston, (City) | Ill. (State) | 60204 (Zip)
0310810006 (Generator Number) | FED. EPA. No. ILD 994748571

WASTE HAULER(S)

Mr. Frank Inc. (Hauler Name) | 201 155th St. (Hauler Address)
So. Holland, Ill.
S.W.H. Registration Number 0079009
FED. EPA No. ILD.069506160

Hauler Name | Hauler Address
S.W.H. Registration Number

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Services (Facility Name) | 420 South Colfax (Address)
Griffith (City) | Ind. (State) | 46319 (Zip)
9 1 8 0 8 9 0 2 (Site Number)
FED.EPA.No. IND.016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Organic 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: Tank Truck
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: 0 0 5 0 0 0
(1) GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER (Specify) ____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 11/16/81 (Authorized Signature) EPA Hazardous Waste No. K078

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) Daniel H Bull (Authorized Signature) DATE: 11/16/81

(2) ____ (Authorized Signature) DATE: ____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

____ (Authorized Signature) DATE: 11/16/81

COMMENTS OR SPECIAL INSTRUCTIONS: ____

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

To 210 R T-50 6PM 11/16/81

SITE COPY - PART 3

0003963

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

0303965

Authorization Number 991252

Rust-Oleum Corp. (Company Name) | 2301 Oakton St. (Address)
Evanston, (City) | Ill. (State) | 60204 (Zip)
0310810006 (Generator Number) G
FED. EPA. No. ILD094748571

WASTE HAULER(S)

Mr. Frank Inc. (Hauler Name) | 201 155th St. (Hauler Address)
So. Holland, Ill.
S.W.H. Registration Number 0079009
FED.EPA. No. ILD 069506160

(Hauler Name) | (Hauler Address)
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)
91808902 (Site Number)
FED.EPA.No. IND.016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Organic 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: Tank Truck
HAZARD CLASS: Flammable
WEIGHT FOR D.O.T. USE 40,000 LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.
QUANTITY OF WASTE DELIVERED: 005000
1 GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 11/30/81 (Authorized Signature) EPA Hazardous Waste No. K078

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) Daniel H Belt (Authorized Signature) DATE: 11 39 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:

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 123 K T-63 GRM 11/30/81 SITE COPY - PART 3

000387

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

0303966

Authorization Number 991252

Rust-Oleum Corp. (Company Name) | 2301 Oakton St. (Address) | Evanston (City) | Ill. (State) | 60204 (Zip)

0310810006 (Generator Number)

FED. EPA.No. ILD-094748571

WASTE HAULER(S)

Mr. Frank Inc. (Hauler Name) | 201 W. 155th St. (Hauler Address) | So. Holland, Ill.

S.W.H. Registration Number 0079009

FED. EPA. No. ILD-069506160

(Hauler Name) | (Hauler Address)

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)

918089O2 (Site Number)

FED. EPA. No. IND. 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Organic 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: Tank Truck

HAZARD CLASS: Flammable

WEIGHT FOR D.O.T. USE 40,000 LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000

1 GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) DRUMS (TANK TRUCK) OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 12/9/81

(Authorized Signature)

EPA Hazardous Waste No. K078

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Tom Berry (Authorized Signature) DATE: 12 09 81

(2) (Authorized Signature) DATE:

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 12 9 81

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

To 210 R T-50 61204 12/9/81

SITE COPY - PART 3

00.0566

HAZARDOUS WASTE MANIFEST

0501446
MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

Landgrebe
NAME OF CARRIER (SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/SHIPPER	State 0316000858	Rycoline Products, Inc. 5540 Northwest Hwy. Chicago, Illinois 60630 (312) 775-6755	9-24-81
TRANSPORTER # 1	IND009842824	Landgrebe Box 32 Hwy 130 W. Valparaiso In 46383 (219) 462-4181	
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chem Serv. 420 S. Colfax Griffith In. 46319 (219) 924-4370	9/24/81
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
26Drums	X	D001	Waste Compound Cleaning Liquid NOS. Flammable Liquid	1993				11,180 Lbs.		

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. $ Prepaid

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

Edward D. Chapman 9 25 81
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

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0501446

Authorization Number 990463

TO BE COMPLETED BY WASTE GENERATOR

Rycoline Products (Company Name) | 5540 Northwest Hwy Address | 312-7756755 Phone Number | 0316000858 (14) Generator Number (24) | G

Chicago City | IL State | 60630 Zip | EPA Number

WASTE HAULER(S)

Landgrebe Hauler Name | Box 32 Hwy. 130 West Hauler Address | S.W.H. Registration Number MC2980 (25–31)

Valparaiso IN. 46383 | 219-4624181 Phone Number | IND009842824 EPA Number

Hauler Name | Hauler Address | S.W.H. Registration Number (32–38)

Phone Number | EPA Number

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

American Chem. Service (Facility Name) | 420 S. Colfax Ave. Address | 91808902 (39–46) Site Number

Griffith City | IN State | 46319 Zip | 219-9244370 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:	HAZARD CLASS.	UN or NA Number	EPA HW Number
Flammable Liquid	Flammable	UN#1993	D001

WEIGHT FOR D.O.T. USE: 11,180 (LBS / TONS (circle one))

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 001430 (47–52)

1 GALLONS (Circle One) 2 CU. YDS. 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS 26 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 E. David McGoulas (Authorized Signature) DATE: 9-25-81

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.

X (1) E Schlundt (Authorized Signature) DATE 9/24/81 (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

J Dunker (Authorized Signature) DATE 9/25/81 (61–65)

COMMENTS OR SPECIAL INSTRUCTIONS: UNLOADED AT DOCK 9/25/81 T-50

14 TO 20# K T-50 9/29/81 gpm 12 TO 20# K T-50 9/30/81 gpm

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

0000550

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

0501449

Authorization Number 990463

Rycoline Products (Company Name) | 5540 Northwest Hwy (Address) | 312-775-6755 (Phone Number) | 0316000858 (Generator Number)

Chicago (City) | Il (State) | 60630 (Zip) | EPA Number

WASTE HAULER(S)

Landgrebe (Hauler Name) | Box 32 Hwy 130 West (Hauler Address) | S.W.H. Registration Number MC2980

Valparaiso, In. 46383 (Hauler Address) | 219-462-4181 (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 S. Colfax Ave (Address) | 91808902 (Site Number)

Griffith (City) | In (State) | 46319 (Zip) | 219-9244370 (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 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	Flammable	UN#1993	D001

WEIGHT FOR D.O.T. USE: 9450 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 001150

(1) GALLONS (2) CU. YDS. (Circle One): 1

METHOD OF SHIPMENT (Circle One) (DRUMS 21 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 J. Liapoulos (Authorized Signature) DATE: 1-6-82

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) Mitch Martin Lic (Authorized Signature) DATE 1/7/82

(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 ___/___/___

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 204RT-50 61mm 1/7/82

002441

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0501450

Authorization Number

TO BE COMPLETED BY WASTE GENERATOR

5540 Northwest Hwy. 312-775-6755 0316000858 G
Address Phone Number Generator Number

Rycoline
(Company Name)

IL 60630
State Zip

Chicago
EPA Number

WASTE HAULER(S)

Box 32 Hwy. 130 West
Hauler Address

S.W.H. Registration Number MC2980

Landa
Name

Valparaiso, IN 46383 219-462-4181 IND009842824
Hauler Address Phone Number EPA Number

S.W.H. Registration Number

Hauler Address

Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service 420 S. Colfax Ave. 91808902
(Facility Name) Address Site Number

Griffith IN 46319 219-924-4370 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 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 Liquid Flammable UN#1993 UN or NA Number D001 EPA HW Number

WEIGHT FOR D.O.T. USE 3,846 (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 495 (1 GALLONS (Circle One) 2 CU. YDS) 1

METHOD OF SHIPMENT (Circle One) (DRUMS 26 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] DATE: 10-19-82
(Authorized Signature)

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] 10-19-82 DATE 10/19/82
(Authorized Signature)

(2) DATE / /
(Authorized Signature)

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] DATE 10/20/82
(Authorized Signature)

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

REV. # 3

SITE COPY - PART 3 TO 204 K T-50 GRM 10.20.82

HAZARDOUS WASTE MANIFEST

0501450
MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

Landgrebe
NAME OF CARRIER (SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER STATE	0316000858	Rycoline Products, Inc. 5540 Northwest Hwy. Chicago, IL 60630 (312) 775-6755	10/19/8
TRANSPORTER # 1	IND009842824	Landgrebe Box 32 Hwy. 130 W. Valparaiso IN 46383 (219) 462-4181	
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chem. Service 420 A. Colfax Griffith IN 46319 (219) 924-4370	10/20/8
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
9 26 Drums	X	D001	WASTE Compound Cleaning Liquid 1993 N.O.S. Flammable Liquid					3,846		

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: $ Prepaid

FREIGHT CHARGES
FREIGHT PREPAID except when box at right is checked ☐ Check box if charges are to be collect

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

GENERATOR'S SIGNATURE — DATE

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

TSDF SIGNATURE — DATE

5

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TSDF COPY

002442

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0501450

Authorization Number

TO BE COMPLETED BY WASTE GENERATOR

Rycoline Product (Company Name) | 5540 Northwest Hwy. (Address) | 312-775-6755 (Phone Number) | 0316000858 (Generator Number)

Chicago, IL (City) | IL (State) | 60630 (Zip) | (EPA Number)

WASTE HAULER(S)

Landgrebe (Hauler Name) | Box 32 Hwy. 130 West (Hauler Address) | S.W.H. Registration Number MC2980

Valparaiso, IN 46383 | 219-462-4181 (Phone Number) | IND009842824 (EPA Number)

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | 420 S. Colfax Ave. (Address) | 9180902 (Site Number)

Griffith (City) | IN (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 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	Flammable	UN#1993	D001

WEIGHT FOR D.O.T USE: 3,846 (LBS / TONS (circle one))

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 495 (1 GALLONS / 2 CU. YDS. (Circle One)) 1

METHOD OF SHIPMENT (Circle One) (DRUMS 9 R.K 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: 10-19-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Landgrebe-Bunch 10-19-82 (Authorized Signature) DATE 10/19/82

(2) (Authorized Signature) DATE

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

Frank Price (Authorized Signature) DATE 10/20/82

COMMENTS OR SPECIAL INSTRUCTIONS

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV # 3

SITE COPY - PART 3 To 204 K T-50 GRM 10.20.82

002443

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0501451

Authorization Number

TO BE COMPLETED BY WASTE GENERATOR

Rycoline Products, Inc. (Company Name) | 5540 Northwest Hwy. (Address) | (312) 775-6755 (Phone Number) | 0316000858 (Generator Number)

Chicago, IL (City) | IL (State) | 60630 (Zip) | (EPA Number)

WASTE HAULER(S)

Landgrebe (Hauler Name) | PO Box 32 Hwy. 130 West (Hauler Address) | S.W.H. Registration Number MC 2980

Valparaiso, IN | (219) 462-4181 (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 Chemical Service (Facility Name) | 420 S. Colfax Ave. (Address) | 91808902 (Site Number)

Griffith (City) | IN (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 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	FLAMMABLE	UN#1993	D001

WEIGHT FOR D.O.T. USE 3762 LBS / TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 495 | 1 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 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) _____ (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 WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

[signature] Frank Price (Authorized Signature) DATE 3/16/83

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 204 KT-506 RM 3-15-83

006117

HAZARDOUS WASTE MANIFEST

0501451
MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

Landgrebe
NAME OF CARRIER (SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER STATE	0316000858	Rycoline Products, Inc. 5540 Northwest Hwy. Chicago, IL 60630 (312)775-6755	
TRANSPORTER # 1	IND 009842824	Landgrebe Box 32 Hwy 130 West Valparaiso, IN 46383 (219)462-4131	
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chem. Service 420 Colfax Griffith, IN 46319 (219)924-4370	
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 Drums X		D001	WASTE Compound Cleaning Liquid N.O.S. FLAMMABLE Liquid 1993			66C		5553		

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 ☐X 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: $ Prepaid

FREIGHT CHARGES FREIGHT PREPAID except when box at right is checked ☐ Check box if charges are to be collect

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE TRANSPORTER #2 SIGNATURE & DATE (If required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

TSDF SIGNATURE DATE

5

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TSDF COPY

006140

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

0501452
1 7

Authorization Number ____ 8 13

Rycoline Products, Inc. (Company Name) | 5540 Northwest Hwy. Address | (312) 775-6755 Phone Number | 0316000858 14 Generator Number | G 24

Chicago, City | IL State | 60630 Zip | EPA Number

WASTE HAULER(S)

Landgrebe Hauler Name | POBox 32 Hwy. 130 West Hauler Address | S.W.H. Registration Number MC 2980 25 31

Valparaiso, IN | (219) 462-4181 Phone Number | IND016360265 EPA Number

Hauler Name | Hauler Address | S.W.H. Registration Number 32 38

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | 420 S. Colfax Ave. Address | 91808902 39 Site Number 40

Griffith City | IN State | 46319 Zip | (219) 924-4370 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: 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: FLAMMABLE | UN #1993 UN or NA Number | D001 EPA HW Number

WEIGHT FOR D.O.T. USE 5553 LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 47 660 52 | 1 GALLONS (Circle One) 2 CU. YDS. 53

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 Edward J. Cunningham (Authorized Signature) DATE: 9.2.83

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) Walter Brady (12) (Authorized Signature) DATE 9/2/83 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.

T. Mark Thill (Authorized Signature) DATE 9/6/83 60 65

COMMENTS OR SPECIAL INSTRUCTIONS ____

IN ILLINOIS 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV # 3

SITE COPY - PART 3

To 204 RT-50 GRM 9-6-83

006138

METROPOLITAN SANITARY DISTRICT OF GREATER CHICAGO
100 EAST ERIE STREET • CHICAGO, IL 60611
INDUSTRIAL WASTE DIVISION (312) 751-5697

NO. 114231

INDUSTRIAL WASTE/SLUDGE GENERATION, SHIPMENT AND DISPOSAL RECORD

TYPE OF WASTE ▶ [X] LIQUID [ ] SLUDGE [ ] SOLID
TYPE OF CONTAINER ▶ [ ] BULK (TANK TRUCK) [X] DRUMS [ ] OTHER (SPECIFY)
VOLUME 495 GALS / CU. YDS. / 3762 LBS.

WASTE CONTAINS:

[ ] FATS, OILS OR GREASE [ ] ACID [ ] ALKALI
[ ] CYANIDE [ ] ZINC [ ] CADMIUM
[ ] COPPER [ ] CHROME [ ] IRON
[ ] NICKEL [ ] LEAD [ ] SELENIUM
[ ] MERCURY [X] SOLVENTS [ ] PAINT RESIDUE
[ ] OTHER (SPECIFY)

DISPOSAL METHOD ▶ [ ] LANDFILL [ ] DESTRUCTION (SPECIFY) [X] OTHER (SPECIFY) Incinerated

NAME OF COMPANY: Rycoline Products, Inc
FEDERAL TAX I. D. NUMBER: 3 | 6 | 3 | 1 | 0 | 2 | 2 | 8 | 8
LOCATION: 5540 Northwest Hwy. Chicago, IL 60630
FEDERAL GENERATOR I. D. NUMBER: 0316000858
TYPE OF INDUSTRY: Solvent & Chemical
DATE REMOVED: 3-7-83
TIME REMOVED:

I certify that the described waste, in the designated volume, was removed from this location by the contractor named below for legal disposal.

SIGNATURE OF AUTHORIZED AGENT AND TITLE: [signature] Plant Manager
PHONE: (312) 775-6755

NAME: Landgrebe
FEDERAL TAX I. D. NUMBER:
ADDRESS: PO Box 32 Hwy. 130 West, Valparaiso
DATE RECEIVED:
TIME RECEIVED:
FEDERAL HAULER I. D. NUMBER: IND 009842824
STATE: IN
TRUCK LICENSE NO.:

I certify that the described waste, in the designated volume, was removed from the above location and delivered to the disposal site designated below.

SIGNATURE OF CONTRACTOR'S AGENT AND TITLE: [signature]
PHONE: (219) 462-4181

DISPOSAL SITE

NAME: American Chemical Service
FEDERAL TAX I. D. NUMBER:
ADDRESS: 420 S. Colfax, Griffith, IN
FEDERAL DISPOSAL SITE I.D. NUMBER: 91808902
DATE RECEIVED:
TIME RECEIVED:

I certify that the above named contractor delivered the described waste, in the designated volume to this facility and same was received for lawful disposition as designated.

SIGNATURE OF OPERATOR AND TITLE:
PERMIT NO.:
PHONE: (219) 924-4370

DISPOSAL SITE'S COPY

006116

METROPOLITAN SANITARY DISTRICT OF GREATER CHICAGO
100 EAST ERIE STREET • CHICAGO, IL 60611
INDUSTRIAL WASTE DIVISION (312) 751-5697

NO. 114232

INDUSTRIAL WASTE/SLUDGE GENERATION, SHIPMENT AND DISPOSAL RECORD

GENERATOR

TYPE OF WASTE: [X] LIQUID [ ] SLUDGE [ ] SOLID — TYPE OF CONTAINER: [ ] BULK (TANK TRUCK) [X] DRUMS [ ] OTHER (SPECIFY)

VOLUME: 660 GALS / CU. YDS. / 5552 LBS.

WASTE CONTAINS:

[X] FATS, OILS OR GREASE [ ] ACID [ ] ALKALI [ ] CYANIDE [ ] ZINC [ ] CADMIUM [ ] COPPER [ ] CHROME [ ] IRON [ ] NICKEL [ ] LEAD [ ] SELENIUM [ ] MERCURY [X] SOLVENTS [ ] PAINT RESIDUE [X] OTHER (SPECIFY)

DISPOSAL METHOD: [ ] LANDFILL [ ] DESTRUCTION (SPECIFY) [X] OTHER (SPECIFY): Incinerated

NAME OF COMPANY: Xycoline Products, Inc.

LOCATION: 5540 Northwest Hwy. Chicago, IL 60630

FEDERAL TAX I. D. NUMBER: 3 6 3 1 0 2 2 3 6

TYPE OF INDUSTRY: Solvent & Chemical

FEDERAL GENERATOR I. D. NUMBER: 0316000868

I certify that the described waste, in the designated volume, was removed from this location by the contractor named below for legal disposal.

DATE REMOVED: 9-1-93 TIME REMOVED:

SIGNATURE OF AUTHORIZED AGENT AND TITLE: Dave Landgrebe Dist. Mgr.

PHONE: 775-6755

HAULER

NAME: Landgrebe

ADDRESS: PO Box 32 Hwy 130 East Valparaiso

FEDERAL TAX I. D. NUMBER:

FEDERAL HAULER I. D. NUMBER: IND 003842824

STATE: IN

DATE RECEIVED: 9-2-93 TIME RECEIVED:

TRUCK LICENSE NO.:

I certify that the described waste in the designated volume, was removed from the above location and delivered to the disposal site designated below.

SIGNATURE OF CONTRACTOR'S AGENT AND TITLE: Larry Landgrebe (12) 9-2-93

PHONE:

DISPOSAL SITE

NAME: American Chemical Service

ADDRESS: 420 S. Colfax, Griffith, IN

FEDERAL TAX I. D. NUMBER: 3 5 0 9 8 1 7 2 3

FEDERAL DISPOSAL SITE I.D. NUMBER: IND 016360765

DATE RECEIVED: 9-2-93 TIME RECEIVED:

I certify that the above named contractor delivered the described waste, in the designated volume to this facility and same was received for lawful disposition as designated.

SIGNATURE OF OPERATOR AND TITLE: Frank Pate

PERMIT NO.:

PHONE: (219) 924-4370

DISPOSAL SITE'S COPY

HAZARDOUS WASTE MANIFEST

0501446
MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

Landgrebe
NAME OF CARRIER (SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	State 0316000858	Rycoline Products, Inc. 5540 Northwest Hwy. Chicago, Illinois 60630 (312) 775-6755	1-7-82
TRANSPORTER # 1	IND009842824	Landgrebe Box 32 Hwy 130 W. Valparaiso In 46383 (219) 462-4181	
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chem Serv. 420 S. Colfax Griffith In. 46319 (219) 924-4370	1-8-82
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
21 Drums X		D001	Waste Compound Cleaning Liquid N.O.S. Flammable Liquid	1993				9450 Lbs.		

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: $ Prepaid

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.

Ronald A Cipolla 1-6-82
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 204TR T-50 GLM 1/7/82 TSDF COPY

002440

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

E COMPLETED BY
ASTE GENERATOR

0501453

Authorization Number

Rycoline Products, Inc. (Company Name) | 5540 Northwest Hwy. (Address) | (312) 775-6755 (Phone Number) | 0316000858 (Generator Number) G

Chicago, IL (City) | IL (State) | 60630 (Zip) | EPA Number

WASTE HAULER(S)

Landgrebe (Hauler Name) | PO Box 32 Hwy. 130 West (Hauler Address) | S.W.H Registration Number MC 2980

(219) 462-4181 (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 Service (Facility Name) | 420 S. Clofax Ave. (Address) | 91806902 (Site Number)

Griffith (City) | IN (State) | 46319 (Zip) | (219) 924-4370 (Phone Number) | IND 016360265 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Solvents | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
Flammable Liquid	FLAMMABLE	UN #1993	D001

WEIGHT FOR D.O.T. USE 6361 LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 880 (1) GALLONS (Circle One) / (2) CU. YDS.

METHOD OF SHIPMENT (Circle One) (DRUMS 16 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 J. Ingram (Authorized Signature) DATE 2-13-84

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: 16 Drums

(1) LMT 2-16-84 (Authorized Signature) Ind. 009-842-824 Icc-2980 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

COMMENTS OR SPECIAL INSTRUCTIONS:

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS 217 / 782-3637 OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV # 3

SITE COPY - PART 3

To 204K T-60 6KM 2.14.84

UJ7206

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

050145 (1–7)

Authorization Number (8–13)

Rycoline Products, Inc. (Company Name) | 5540 Northwest Hwy. (Address) | (312) 775-6755 (Phone Number) | 0316000858 (14) Generator Number G (24)

Chcago, IL (City) | IL (State) | 60630 (Zip) | EPA Number

WASTE HAULER(S)

Landgrebe (Hauler Name) | PO Box 32 Hwy. 130 West (Hauler Address) | S.W.H. Registration Number MC 2980 (25–31)

Valparaiso, IN | (219) 462-4181 (Phone Number) | IND 016360265 (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 Services (Facility Name) | 420 S. Colfax Ave. (Address) | 91808902 (39) Site Number (46)

Griffith (City) | IN (State) | 46319 (Zip) | (219) 924-4370 (Phone Number) | IND 016360265 (EPA Number)

Alternate (Facility Name) | Address | (39) Site Number (46)

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Solvents | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Flammable Liquid | HAZARD CLASS: FLAMMABLE | UN #1993 (UN or NA Number) | D 001 (EPA HW Number)

WEIGHT FOR D.O.T. USE 2961 LBS / TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 385 (47–52) 1 GALLONS (Circle One) 2 CU. YDS. (53)

METHOD OF SHIPMENT (Circle One) (DRUMS 7 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: 6/15/84

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: 6/15/84 (54–59)

(2) [signature] (Authorized Signature) DATE: 6/18/84

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ____

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

[signature] (Authorized Signature) DATE: 6/18/84 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637 | OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR | PART - 2 IEPA | PART - 3 SITE | PART - 4 HAULER | PART - 5 IEPA | PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

204 R T-50

UJ720T

STATE OF ILLINOIS ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0610

LPC 62 8/81

Please print, or type. (Form designed for use on elite (12-pitch) typewriter) **EPA Form 8700-22 (3-84)** Form Approved. OMB No 2000-0404. Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. / Manifest Document No.

2. Page 1 of 1

Information in the shaded areas is not required by Federal law, but is required by Illinois law.

GENERATOR

3. Generator's Name and Mailing Address
Rycoline Products, Inc.
5540 Northwest Hwy., Chicago IL. 60630

4. Generator's Phone (312) 775-6755

A. Illinois Manifest Document Number: IL 1123752

B. Illinois Generator's ID: 0 3 1 6 0 0 5 8 5 8

5. Transporter 1 Company Name: Landgrebe

6. US EPA ID Number: IND 0 0 9 8 4 2 8 2 4

C. Illinois Tranporter's ID: 1 1 8 7 5

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 Services
420 S. Colfax
Griffith, IN 46319

10. US EPA ID Number: IND 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 (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. Spent Solvents - WASTE Compound Cleaning Liquid N.O.S. Flammable Liquid NA 1993	X	002	DM	0 0 1 1 0	1	EPA HW Number: D 0 0 1
b.				5 7 0		EPA HW Number:
c.						EPA HW Number:
d.						EPA HW Number:

Authorization Number

J. Additional Descriptions for Materials Listed Above
Solvents collected from hose cleaning

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
If waste listed in Item a, is undeliverable for any reason - return to generator.

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, and Illinois regulations.

Printed/Typed Name: EDWARD TOLIOPOULOS — Signature: Edward Toliopoulos — Date: Month 1 Day 09 Year 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: DAN RITCHIE — Signature: Dan Ritchie — Date: Month 1 Day 2 Year 25

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 3 Year 85

IN ILLINOIS: 217 / 782-3637 ***24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*** OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV.# 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½ Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

2047-501

CJ8020

STATE OF ILLINOIS ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0610
LPC 62 8/81

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) **EPA Form 8700-22 (3-84)** Form Approved OMB No. 2000-0404 Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. | Manifest Document No.

2. Page 1 of

Information in the shaded areas is not required by Federal law, but is required by Illinois law.

3. Generator's Name and Mailing Address
RYCOLINE PRODUCTS INC
5540 NORTHWEST HWY CHICAGO IL. 60630

4. Generator's Phone (312) 775-6755

A. Illinois Manifest Document Number: IL 1270044

B. Illinois Generator's ID: 0 3 1 6 0 0 5 8 5 8

5. Transporter 1 Company Name: LANDCRBE

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. (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 SERVICES
420 S. COLFAX
GRIFFITH, IN 46319

10. US EPA ID Number: I L 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: (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. SPENT SOLVENT COMPOUND CLEANING LIQUID N.O.S. FLAMMABLE LIQUID - NA 1993	X	002	DM	001.1.0	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
SOLVENTS COLLECTED FROM HOSE CLEANING

K. Handling Codes for Wastes Listed Above
In Item #14: 1 = Gallons 2 = Cubic Yards

15. Special Handling Instructions and Additional Information
IF WAST LISTED IN ITEM A. IS UNDELIVERABLE FOR ANY REASON - RETURN TO GENERATOR

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, and Illinois regulations.

Printed/Typed Name	Signature	Date (Month Day Year)
EDWARD TOLIOPOULOS	Edward Toliopoulos	2 12 85

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)
JIM MARRS	Jim Marrs	2 13 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 MURPHY		12 14 85

IN ILLINOIS: 217 / 782-3637 "24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS" OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV. 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½ Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

204KT-50

CJ8027

STATE OF ILLINOIS ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

8532-0610

IPC 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. ILD005111893 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 RYCOLINE PRODUCTS INC
5540 NORTHWEST HWY, CHICAGO IL. 60630

4. Generator's Phone (312) 775-6755

A. Illinois Manifest Document Number IL 1270042

B. Illinois Generator's ID 0316005858

5. Transporter 1 Company Name LANDGREBE

6. US EPA ID Number IND009842824

C. Illinois Tranporter's ID 1185

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
GRIFFITH IN. 46319

10. US EPA ID Number IND016360265

G. Illinois Facility's ID 9180890002

H. Facility's Phone (219) 924-4370

GENERATOR

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a.	SPENT SOLVENT COMPOUND CLEANING LIQUID N.O.S. FLAMMABLE LIQUID -NA 1993	X	013	DM	00715	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
SOLVENTS COLLECTED FROM HOSE CLEANING

K. Handling Codes for Wastes Listed Above
In Item #14: 1 = Gallons
2 = Cubic Yards

15. Special Handling Instructions and Additional Information
IF WASTE LISTED IN ITEM A. IS UNDELIVERABLE FOR ANY REASON - RETURN TO GENERATOR.

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, and Illinois regulations.

Printed/Typed Name	Signature	Date (Month Day Year)
EDWARD TOLIOPOULOS	Edward Toliopoulos	03 11 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)
F. Schlundt	F Schlundt	3 11 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)
J&R MURPHY		3 12 85

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV. # 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½ Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

204 E T-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.: ILD005111893 Manifest Document No.: 00002

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
RYCOLINE PRODUCTS
5540 NORTHWEST HWY, CHICAGO IL 60630

4. Generator's Phone (312) 775-6755

A. Illinois Manifest Document Number: IL 112375

B. Illinois Generator's ID: ID3160005858

5. Transporter 1 Company Name: LANDCARE

6. US EPA ID Number: IND000984824

C. Illinois Tranporter's ID: 118715

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
GRIFFITH IN. 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.
a. SPENT SOLVENT COMPOUND CLEANING LIQUID NOS, FLAMMABLE LIQUID N/A 1993	X	009	DM	00495	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
SOLVENTS COLLECTED FROM HOSE CLEANING

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
If waste listed in item a. is undeliverable for any reason - Return to generator.

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, and Illinois regulations.

Printed/Typed Name	Signature	Date (Month Day Year)
EDWARD TOLIOPOULOS	Edward Toliopoulos	04 30 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)
JIM MARRS	Jim Marrs	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

204 R T-50

UJ8031

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. 1 L D 0 0 5 1 1 1 8 9 3 — Manifest Document No. 0 0 0 0 3

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
RYCOLINE PRODUCTS
5540 NORTHWEST HWY, CHICAGO IL. 60630

4. Generator's Phone ( )

A. Illinois Manifest Document Number IL 1270046

B. Illinois Generator's ID 0 3 1 6 0 0 5 8 5 8

5. Transporter 1 Company Name: LANDGREBE

6. US EPA ID Number: I N D 0 0 9 8 4 2 8 2 4

C. Illinois Tranporter's ID 1 1 8 7 5

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
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 8 0 8 9 0 0 0 2

H. Facility's Phone (219) 924-4370

GENERATOR

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	SPENT SOLVENT COMPOUND CLEANING LIQUID N.O.S. FLAMMABLE LIQUID NA. 1993	X	023	DM	1265	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
SOLVENTS COLLECTED FROM HOSE CLEANING
~~9720~~

K. Handling Codes for Wastes Listed Above
In Item #14: 1 = Gallons, 2 = Cubic Yards

15. Special Handling Instructions and Additional Information
IF Waste Listed in Item a. is undeliverable for any reason - Return to Generator.

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, and Illinois regulations.

Printed/Typed Name: EDWARD TOLIOPOULOS — Signature — Date: Month 07 Day 26 Year 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Landgrebe Motor — Signature: Philip L Lyons — Date: Month 08 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: [illegible] — 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

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FACILITY COPY - PART 3

204 Tx T-50 14100 T.C.

UJ8032

E OF ILLINOIS ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0610

LPC 62 8/81

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. ILD005111893 Manifest Document No. 00084

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
RYCOLINE PRODUCTS INC.
5540 NORTHWEST HWY CHICAGO IL. 60630

4. Generator's Phone (312) 775-6755

A. Illinois Manifest Document Number IL 1270047

B. Illinois Generator's ID 1031600585 8

5. Transporter 1 Company Name: LANDGREBE — 6. US EPA ID Number: IND009842824

C. Illinois Tranporter's ID 11875

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
GRIFFITH IN. 46319

10. US EPA ID Number: IND016360265

G. Illinois Facility's ID 9180890002

H. Facility's Phone (219) 924-4370

GENERATOR

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a.	X SPENT SOLVENT COMPOUND CLEANING LIQUID NOS, FLAMMABLE LIQUID NA. # 1993	006	DM	00330	1	EPA HW Number D001 / Authorization Number
b.				161		EPA HW Number / Authorization Number
c.						EPA HW Number / Authorization Number
d.						EPA HW Number / Authorization Number

J. Additional Descriptions for Materials Listed Above
SOLVENTS COLLECTED FROM HOSE CLEANING

K. Handling Codes for Wastes Listed Above
In Item #14: 1 = Gallons 2 = Cubic Yards
161 1

15. Special Handling Instructions and Additional Information
If waste listed in item a. is undeliverable for any reason - Return to Generator. 11

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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: EDWARD TOLIOPOULOS — Signature: Edward Toliopoulos — Date: Month 11 Day 19 Year 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: MICHAEL YURECHKO — Signature: Michael Yurechko — Date: Month 11 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: STEVE KULAVICK — Signature: Steve Kulavick — Date: Month 11 Day 20 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

204 R T-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. ILD005111893 Manifest Document No. 00005

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
RYCWLINE PRODUCTS, INC.
5540 NORTHWEST HWY CHICAGO IL 60630

4. Generator's Phone (312) 775-6755

A. Illinois Manifest Document Number IL 9 1270049

B. Illinois Generator's ID 0316005858

5. Transporter 1 Company Name: LANDGREBE
6. US EPA ID Number: ILD009842824
C. Illinois Tranporter's ID 1875
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 SERV.
420 S. COLFAX
GRIFFITH IN. 46319
10. US EPA ID Number: ILD016360265
G. Illinois Facility's ID 9118089000 2
H. Facility's Phone (219) 924-4370

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a. SPENT SOLVENT COMPOUND CLEANING LIQUID NOS. FLAMMABLE LIQUID NA 1993	X	01	DM	00550	P	EPA HW Number D001 / Authorization Number
b.				2115		EPA HW Number / Authorization Number
c.						EPA HW Number / Authorization Number
d.						EPA HW Number / Authorization Number

J. Additional Descriptions for Materials Listed Above: SOLVENTS COLLECTED FROM HOSE CLEANING

K. Handling Codes for Wastes Listed Above: In Item #14: 1 = Gallons, 2 = Cubic Yards

15. Special Handling Instructions and Additional Information
If waste listed in item a. is undeliverable for any reason Return to Generator.

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, and Illinois regulations.

Printed/Typed Name: EDWARD TOLIOPOULOS — Signature: Edward Tolioupoulos — Date: Month Day Year 10 22 86

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Jim MARRS — Signature: Jim Marrs — Date: Month Day Year 10 22 86

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name — Signature — Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: ALVIN WHITAKER — Signature: Alvin Whitaker — Date: Month Day Year 11 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.# 5

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FACILITY COPY - PART 3

204 RT-50

011912

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. ILD005111893 Manifest Document No. 10005

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
RYCOLINE PRODUCTS INC.
5540 NORTHWEST HWY. CHICAGO IL. 60630

4. Generator's Phone (312) 775-6755

A. Illinois Manifest Document Number IL 1270050

B. Illinois Generator's ID 0311600585

C. Illinois Tranporter's ID 118715

D. (219) 462-4181 Transporter's Phone

E. Illinois Transporter's ID

F. Transporter's Phone

5. Transporter 1 Company Name: LANDGREBE
6. US EPA ID Number: IND009842824

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

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	Waste No.
a.	X	SPENT SOLVENTS COMPOUND, CLEANING LIQUID, FLAMMABLE LIQUID NA 1993	012	DM	00660	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
SOLVENTS COLLECTED FROM HOSE CLEANING

K. Handling Codes for Wastes Listed Above
In Item #14: 1 = Gallons 2 = Cubic Yards

15. Special Handling Instructions and Additional Information
If waste listed in Item a. is undeliverable for any reason - Return to Generator

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, and Illinois regulations.

Printed/Typed Name	Signature	Date (Month Day Year)
EDWARD TOLIOPOULOS		04 07 86

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)
RICHARD G. LAFF		4 7 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)
STEVE KULAVICK		4 8 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

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FACILITY COPY - PART 3

204 R 750

011913

Division of Land Pollution Control - Manifest
Indiana State Board of Health
P.O. Box 7035
Indianapolis, IN 46207-7035

DO NOT WRITE IN THIS SPACE

Please print or type. (Form designed for use on elite (12-pitch) typewriter)

Form Approved OMB No. 2000 0404 Expires 7 31 86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. | Manifest Document No. | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law

3. Generator's Name: RYERSON TULL INC
SEND N.W. HWY
CHICAGO IL 60630

4. Generator's Phone: (312) 775 6755

A. State Manifest Document Number: IN037570

B. State Generator's ID: 031600582

5. Transporter 1 Company Name: LANDMARK

6. US EPA ID Number: INDOOP1242424

C. State Transporter's ID: 11625

D. Transporter's Phone: 219 462-41

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address: AMERICAN CHEMICAL SERV.
420 S. COLFAX
GRIFFITH IN 46319

10. US EPA ID Number: INDD1162DRDS

G. State Facility's ID: IL8089000025

H. Facility's Phone: (219) 924-2370

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. SPENT SOLVENTS (CONTAINS CLEANING LIQUID FLAMMABLE LIQUID NA 1993)	001	DM	00001	1	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: SOLVENTS COLLECTED FROM HOSE AND TANK CLEANING

K. Handling Codes for Wastes Listed Above: GALLONS

15. Special Handling Instructions and Additional Information
If waste listed in Item # 11 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.

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: LANDS TRANSPORT | Signature | Month 10 Day 22 Year 86

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials | Printed/Typed Name | Signature | Date: Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials | Printed/Typed Name | Signature | Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.

Printed/Typed Name: HAROLD T SCHMIDT | Signature | Month 10 Day 22 Year 86

IN037570

EPA Form 8700-22A (Rev. 11-85) UHWM 2/LP2

T.S.D. DETACH AND RETAIN THIS COPY 204ET50

011914

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.: ILDDDDIIIB93DDDDA | 2. Page 1 of: 1 | Information in the shaded areas is not required by Federal law

3. Generator's Name: RYCOLINE PRODUCTS
5540 N.W. HWY. CHICAGO IL. 60630

A. State Manifest Document Number: IN 037571

4. Generator's Phone (312) 775-6755

B. State Generator's ID: (IL) 0316005858

5. Transporter 1 Company Name: STRAND TANKING | 6. US EPA ID Number: ILDDDDKW6B1D | C. State Transporter's ID | D. Transporter's Phone: (312) 785-8440

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 SERV.
420 S. COLFAX
GRIFFITH IN. 46319 | 10. US EPA ID Number: INDDD163603F65 | G. State Facility's ID: 918089000 2 | 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, J, K Waste No.
a. SPENT SOLVENTS COMPOUND CLEANING LIQUID FLAMMABLE LIQUID NA 1993	DP17	DM	02130	1	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: SOLVENT COLLECTED FROM HOUSEHOLD TANK CLEANING

K. Handling Codes for Wastes Listed Above: CALLONS

15. Special Handling Instructions and Additional Information
IF UNDELIVERABLE 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.

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: EDWARD TOLIOPOULOS | Signature | Month Day Year: 12 08 86

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: JAMES BATTEN | Signature | Date: 12 08 86

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: HOWARD FISHMAN | Signature | Month Day Year: 12 10 86

IN 037571

EPA Form 8700-22A (Rev. 11-85) UHWM 2/LP2

T.S.D. DETACH AND RETAIN THIS COPY MRL 57-20YR TSD

011915

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. ILD005111893 — Manifest Document No. 00012
2. Page 1 of 1
Information in the shaded areas is not required by Federal law

3. Generator's Name: RYCOLINE PRODUCTS
5540 NORTHWEST HWY, CHICAGO
4. Generator's Phone (312) 775-6755 IL, 60630

A. State Manifest Document Number: IN037574
B. State Generator's ID: (IL) 0316005858

5. Transporter 1 Company Name: MR. FRANK INC — 6. US EPA ID Number: ILD069506160
C. State Transporter's ID: 0079
D. Transporter's Phone: 312 586 3377
7. Transporter 2 Company Name — 8. US EPA ID Number
E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address: AMERICAN CHEMICAL SERVICE
420 S. COLFAX
GRIFFITH IN 46219 — 10. US EPA ID Number: INP016360265
G. State Facility's ID: 918018900 2
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	15. Waste No.
a. [redacted] FLAMMABLE LIQUID, WASTE N.O.S. UN1993	001	TT	02640	1	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: SOLVENTS COLLECTED FROM HOSE AND TANK CLEANING

K. Handling Codes for Wastes Listed Above: 1 = GALLONS

15. Special Handling Instructions and Additional Information: If waste listed in item a. 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.

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: EDWARD TSIOPOULOS — Signature: Edward Tsiopoulos — Month 11 Day 25 Year 87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials — Printed/Typed Name: MICHAEL A. PFEIFER — Signature: Michael A. Pfeifer — Month 11 Day 25 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 in item 19 — Printed/Typed Name: EDUNFEE — Signature: Edunfee — Month 11 Day 25 Year 87

EPA Form 8700-22A (Rev. 11-85) UHWM 2/LP2

K TSOM

T.S.D. DETACH AND RETAIN THIS COPY

IN037574

012453

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. ILDOO5111893 — Manifest Document No. 000111

2. Page 1 of 1

Information in the shaded areas is not required by Federal law

3. Generator's Name: RYCOLINE PRODUCTS INC
5540 NORTHWEST HWY
CHICAGO IL. 60630

4. Generator's Phone (312) 775-6755

A. State Manifest Document Number: IN 037573

B. State Generator's ID: (14) 031600555

5. Transporter 1 Company Name: STRAND TRUCKING

6. US EPA ID Number: ILD000646181

C. State Transporter's ID:

D. Transporter's Phone: 219-365-8440

7. Transporter 2 Company Name:

8. US EPA ID Number:

E. State Transporter's ID: 20024

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: IND016361265

G. State Facility's ID: 918089002

H. Facility's Phone: (219) 838-8220

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a. SPENT SOLVENTS COMPOUND CLEANING LIQUID FLAMMABLE LIQUID WASTE N.O.S. 1993	001	DM	030	25	1	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
SOLVENT COLLECTED FROM
USE AND TANK CLEANING

K. Handling Codes for Wastes Listed Above
GALLONS

15. Special Handling Instructions and Additional Information
[illegible] 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.

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: ESTAS TOLIOPOULOS — Signature: [signature] — Month 07 Day 16 Year 87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: STAY C. THIRD — Signature: [signature] — Date: Month 07 Day 17 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: [signature] — Month 07 Day 17 Year 87

IN 037573

EPA Form 8700-22A (Rev. 11-85) UHWM 2/LP2

T.S.D. DETACH AND RETAIN THIS COPY

55 204B TSD B

012452

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. ILD005111893 — Manifest Document No. 1UP IN

2. Page 1 of 1

Information in the shaded areas is not required by Federal law

3. Generator's Name: RYCOLINE PRODUCTS INC.
5510 NORTHWEST HWY
CHICAGO IL 60630

4. Generator's Phone: (312) 775-6755

A. State Manifest Document Number: IN037572

B. State Generator's ID: IN0316005858

5. Transporter 1 Company Name: STRAUB TRUCKING

6. US EPA ID Number: ILD000614612

C. State Transporter's ID:

D. Transporter's Phone: (31) 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. CULEAX
GRIFFITH IN. 46319

10. US EPA ID Number: IND010636266

G. State Facility's ID: IN8000990002

H. Facility's Phone: (219) 924-4520

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. SPENT SOLVENTS CONTAINING CHLORINATED HYDROCARBONS & FLAMMABLE LIQUIDS, NA 1993	036	DM	01180	1	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: SOLVENT COLLECTED FROM DEGREASING TANK CLEANING

K. Handling Codes for Wastes Listed Above: CALLOUS

15. Special Handling Instructions and Additional Information: [illegible] 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.

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
EDWARD PAPADOPOULOS	[signature]	11	11	87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date: Month	Day	Year
JAMES WHITLEY	[signature]	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 FEINDT	[signature]	11	11	87

IN 037572

EPA Form 8700-22A (Rev. 11-85) UHWM 2/LP2

T.S.D. DETACH AND RETAIN THIS COPY

MAC 36-20YR TSD 12

012451

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. ILD005111893 Manifest Document No. 00013
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
RYCOLINE PRODUCTS
5510 NORTHWEST HWY CHICAGO IL 60630

A. State Manifest Document Number INA 0162737

4. Generator's Phone (312) 775 6755

B. State Generator's ID IL-031 60058 58

5. Transporter 1 Company Name: MR. FRANK
6. Use EPA ID Number: ILD069506160
C. State Transporter's ID 0079
D. Transporter's Phone (219) 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 COLEAX AV.
GRIFFITH IN 46319
10. Use EPA ID Number: IND010636026
G. State Facility's ID 918089 002
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 WASTE NOS. UN 1993	001	T	04455	1	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
SOLVENTS COLLECTED FROM HOSE AND TANK CLEANING

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: EDWARD TOLIOPOULOS — Signature — Date: Month 05 Day 27 Year 88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: WALTER KLAUBO — Signature — Date: Month 05 Day 27 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: T DUNLEE — Signature — Date: Month 05 Day 27 Year 88

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

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 CO
PAGE 8 (white) TRANSPORTER 2 CO

2117 T50 5/27

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. ILD005119893 Manifest Document No. 000114
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
RYCOLINE PRODUCTS INC.
5510 NORTHWEST HWY CHICAGO IL 60630

A. State Manifest Document Number: INA 0160079

4. Generator's Phone (312) 775-6755

B. State Generator's ID: 031600 5858

5. Transporter 1 Company Name: MR. FRANK, INC.
6. Use EPA ID Number: ILD.069.536.16.0
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: 0079
F. Transporter's Phone

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERV.
420 COLFAX AV.
GRIFFITH IN 46319
10. Use EPA ID Number: IND.016.360.265
G. State Facility's ID: 918089-002
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, WASTE NOS. UN 1993	001	T.T	04500	1	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
SOLVENTS COLLECTED FROM HOSE AND TANK CLEANING

K. Handling Codes for Wastes Listed Above
1 - 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.

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GENERATOR — Printed/Typed Name: EDWARD TOLIOPOULOS — Signature — Month 01 Day 24 Year 89

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials — Printed/Typed Name: Robert PERKINS — Signature — Month 01 Day 24 Year 89
18. Transporter 2 Acknowledgement of Receipt of Materials — Printed/Typed Name — Signature — Month Day Year

FACILITY
19. Discrepancy Indication Space
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. — Printed/Typed Name: F DUNFEE — Signature — Month 01 Day 24 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 0160079

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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INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I.L.D.0.0.5.1.1.1.8.9.3 | Manifest Document No. 0001.5
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.

GENERATOR

3. Generator's Name and Mailing Address
RYCOLINE PRODUCTS INC
5540 NORTHWEST HWY. CHICAGO IL. 60630

A. State Manifest Document Number: INA 0317925

4. Generator's Phone (312) 775-6755

B. State Generator's ID: IL 0316005858

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 SERV.
420 COLFAX AV.
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: 418089-002

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, WASTE N.O.S. UN 1993	0.0.1	T.T	03250	1	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
SOLVENTS COLLECTED FROM HOSE & TANK CLEANING

K. Handling Codes for Wastes Listed Above
1 = 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.

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Printed/Typed Name: EDWARD TOLIOPOULOS | Signature | Date: Month 06 Day 26 Year 89

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Walter C. Klaubo | Signature | Date: Month 06 Day 26 Year 89

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted item 19.
Printed/Typed Name: F DUNFEE | 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.

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY

210CT50 6/26

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. ILD005111893 Manifest Document No. 05016
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.

3. Generator's Name and Mailing Address
RYCOLINE PRODUCTS INC
5540 NW HWY CHICAGO IL 60630

A. State Manifest Document Number
INA 0317924

B. State Generator's ID
IL 0316005858

4. Generator's Phone (312) 775-6755

5. Transporter 1 Company Name
MR FRANK INC

6. Use EPA ID Number
ILD089506160

C. State Transporter's ID 0079

D. Transporter's Phone (312) 582-3377

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 CHEM. SERV.
420 S. COLFAX
GRIFFITH IN. 46319

10. Use EPA ID Number
IND016360265

G. State Facility's ID
918089-002

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, WASTE N.O.S. UN 1993	001	TT	026000	1	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
SOLVENT COLLECTED FROM HOSE CLEANING

K. Handling Codes for Wastes Listed Above
1 = DALLON

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good 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: EDWARD TULIOPOULOS
Signature: [signature]
Date: Month 09 Day 22 Year 89

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: SCOTT KOSTELYK
Signature: [signature]
Date: Month 09 Day 22 Year 89

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: FDUNFEE
Signature: FDunfee
Date: Month 09 Day 22 Year 89

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY

2 TSD 9/27

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.

INA0317924

00167-46

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I.L.D.0.0.5.1.1.1.8.9.3 | Manifest Document No. 8.0.0.1.7 | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
RYCOLINE PRODUCTS
5540 N.W. HWY. CHICAGO IL. 60630

4. Generator's Phone (312) 775-6755

A. State Manifest Document Number: INA 0345083

B. State Generator's ID: I.L.0.3.1.6.0.0.5.8.5.8

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) 720-0100

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 CHEM. 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: (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	L Waste No.
a. WASTE FLAMMABLE LIQUID N. FLAMMABLE LIQUID, UN-1993	001	T.T	13600	1	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: SOLVENT COLLECTED FROM HOSE AND TANK CLEANING
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good 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: EDWARD TOLIOPOULOS | Signature | Date: Month 03 Day 13 Year 90

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: RICH WITZ | Signature | 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 in Item 19.
Printed/Typed Name: F DUNFEE | Signature | Date: Month 03 Day 14 Year 90

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

211R TSO 3/14/90

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.

INA0345083

0018245

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I.L.D.0.5.1.1.2.9.3 Manifest Document No. 00.0.1.8
2. Page 1 of 1
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
RYCOLINE PRODUCTS
5540 N.W. CHICAGO IL 60630
4. Generator's Phone (312) 775-6755

A. State Manifest Document Number INA 0345079
B. State Generator's ID IL0316005858
C. State Transporter's ID 0079
D. Transporter's Phone 708 20-0100
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID 918 0810002
H. Facility's Phone (219) 924-4370

5. Transporter 1 Company Name MR FRANK IN
6. Use EPA ID Number I.L.D.7.2.4.7.7.5.0.4.9
7. Transporter 2 Company Name
8. Use EPA ID Number
9. Designated Facility Name and Site Address AMERICAN CHEM. SERVICE 420 S. COLFAX GRIFFITH IN. 46319
10. Use EPA ID Number I.N.D.0.1.6.3.6.0.2.6.5

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE FLAMMABLE LIQUID N.O.S. FLAMMABLE LIQUID UN-1993 (ACETONE, METHYLENE CHLORIDE, TOLUENE, XYLENE)	0.0.1	T.T	0.2.2.0.0	1	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: SOLVENT COLLECTED FROM HOSE AND TANK CLEANING

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good 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: EDWARD TOLIOPOULOS Signature: [signature] Month: 08 Day: 01 Year: 90

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: CARL T JUNGER Signature: [signature] Month: 08 Day: 01 Year: 90

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: EDUNFEE Signature: [signature] Month: 08 Day: 01 Year: 90

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA0345079

0018246

COMPLETED BY
STE 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

0634316
Authorization Number [illegible]

RYDER TRUCK RENTAL (Company Name) | 5875 N ROGERS (Address) | AV | 3122868269 (Phone Number) | 03 | 1600099 8 (Generator Number) | G

CHICAGO (City) | IL. (State) | 60646 (Zip) | EPA Number

WASTE HAULER(S)

LANDGREBE MOTOR TRANSIT (Hauler Name) | VALPARAISO IN. (Hauler Address) | S.W.H. Registration Number | 3128423121 (Phone Number) | 320 IND009842824 (EPA Number) ILC 348

Hauler Name | Hauler Address | S.W.H. Registration Number 26694 | Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | 420 S. COLFAX AVE (Address) | 91808902 (Site Number)

GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | 2199244370 (Phone Number) | IND016360265 (EPA Number)

Alternate (Facility Name) | Address | 91808902 (Site Number)

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: FLAMMABLE LIQUID N.O.S. | WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
WASTE SOLVENTS	IGNITABLE	UN1993	D001

WEIGHT FOR D.O.T. USE 8320 LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS OR GAL.

QUANTITY OF WASTE DELIVERED: 1045 (1) GALLONS (Circle One) / (2) CU. YDS. 1

METHOD OF SHIPMENT (Circle One) (DRUMS 19 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 12/10/82

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 12/10/82

(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] Frank Fino (Authorized Signature) DATE 12/13/82

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

On dock 12-13-82
To 204 T-50 62M 12/5-8802444

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

0654533
Authorization Number 9216698

Ryder Truck Rental (Company Name) | 5875 N Rogers ave Address | 3122868269 Phone Number | 0316000998 Generator Number

Chicago City | ILL State | 60646 Zip | EPA Number

WASTE HAULER(S)

LANDGREBE MOTOR TRANSIT Hauler Name | VALPARAISO IND Hauler Address | S.W.H. Registration Number

3128423121 Phone Number | IND000984824 EPA Number | ILL2980

Hauler Name | Hauler Address | S.W.H. Registration Number

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | 420 S. Colfax AVE Address | 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: FLAMMABLE LIQUID N.O.S. WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: WASTE SOLVENTS IGNITABLE

HAZARD CLASS: UN1993 (UN or NA Number) | D001 (EPA HW Number)

WEIGHT FOR D.O.T. USE 8800 LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 1100 GALLONS (Circle One) 2 CU. YDS.

METHOD OF SHIPMENT (Circle One) (DRUMS 20 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 C Thurman (Authorized Signature) DATE 11-28-83

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED

(1) Tim F Schmidt (20) (Authorized Signature) DATE 11/28/83

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

(Authorized Signature) DATE: 11/30/83

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

T0204 R T-50 GRM 11.30.83

006137

STATE OF ILLINOIS ENVIRONMENTAL PROTECTION AGENCY · DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217)782-6761

IL532-0610

LPC 62 8/81

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) **EPA Form 8700-22 (3-84)** Form Approved. OMB No. 2000-0404. Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. | Manifest Document No.

2. Page 1 of | Information in the shaded areas is not required by Federal law, but is required by Illinois law.

GENERATOR

3. Generator's Name and Mailing Address
Ryder Truck Rental
5875 North Rogers Ave, Chicago, Illinois 60646
4. Generator's Phone (312) 286-8268

A. Illinois Manifest Document Number: IL 1114957

B. Illinois Generator's ID: 0 3 1 6 0 0 5 9 9 8

5. Transporter 1 Company Name: Landgrebe Motor Transport
6. US EPA ID Number: IND009842824

C. Illinois Tranporter's ID: ICC 2 98 0

D. (312) 842-3121 Transporter's Phone

7. Transporter 2 Company Name
8. US EPA ID Number

E. Illinois Transporter's ID: 1875

F. ( ) Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Service 420 S. Colfax Ave. Griffith, 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: (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.	Ignitable Solvents UN1993 Hazardous waste Liquid nos.	x	21	DM	1155	1	EPA HW Number D 0 0 1 Authorization Number 9 2 1 6 9 8
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: KENNETH UNVERZAGT | Signature: K Unverzagt | Date: Month 5 Day 28 Year 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: D. PURSLEY | Signature: D. Pursley | Date: Month 5 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 5 Day 29 Year 85

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV. # 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½ Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

123 F T-63

U38020

STATE OF ILLINOIS ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0610

LPC 62 8/81

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) **EPA Form 8700-22 (3-84)** Form Approved. OMB No. 2000-0404. Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. | Manifest Document No.

2. Page 1 of

Information in the shaded areas is not required by Federal law, but is required by Illinois law.

GENERATOR

3. Generator's Name and Mailing Address
RYDER TRUCK RENTAL
5875 N. Rogers Ave.
Chicago, Illinois 60646

4. Generator's Phone (312) 286-8268

A. Illinois Manifest Document Number: IL 1114959

B. Illinois Generator's ID: 0 3 1 6 0 0 5 9 9 8

5. Transporter 1 Company Name: Landgrebe Motor Transport

6. US EPA ID Number: IND009842824

C. Illinois Tranporter's ID: 1 C C 2 9 8 0

D. Transporter's Phone: 312-842-3121

7. Transporter 2 Company Name

8. US EPA ID Number

E. Illinois Transporter's ID: 1 8 7 5

F. Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical
Service 420 S. Colfax Ave.
Griffith, Ind. 46319

10. US EPA ID Number: IND016360265

G. Illinois Facility's ID: 9 1 8 0 8 9 0 0 2

H. Facility's Phone: (219) 924-4370

	HM	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a.	x	Ignitable Solvents UN1993 Hazardous waste liquid nos.	11	DM	605 Gal	G	EPA/Other: D001
							Authorization Number: 2 2 6 9 8
b.							EPA HW Number
							Authorization Number
c.		RYDER TRUCK RENTAL 1050 W PERSHING RD CHICAGO IL 60609 PHONE 523-5555					EPA HW Number
							Authorization Number
d.		PO 134083					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

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Printed/Typed Name: KENNETH V. UNVERZAGT | Signature: Kenneth V Unverzagt | Date: Month 12 Day 12 Year 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: MICHAEL YURECHKO | Signature: Michael Yurechko | Date: Month 12 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: MOE PHY | Signature | Date: Month 12 Day 13 Year 85

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV.# 5

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FACILITY COPY - PART 3

204 FT-50

UJ8621