US EPA RECORDS CENTER REGION 5

460617

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: ILD112403845 | 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
V & J Patel Auto Services, Inc. dba Maaco
590 Lincoln Hwy, Chicago Heights, Ill. 60411

4. Generator's Phone (312) 747-7080

A. State Manifest Document Number:

B. State Generator's ID: 0310455048

5. Transporter 1 Company Name: Super Cartage

6. US EPA ID Number: ILD052631496

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 Ave.
Griffith, IN 46319

10. US EPA ID Number: IND016360265

G. State Facility's ID:

H. Facility's Phone: 21-924-4370

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 NA1263 WASTE PAINT RELATED MATERIAL	10		0550	1	D001
b.							
c.							
d.							

J. Additional Descriptions for Materials Listed Above: 10 [illegible]

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.

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

Printed/Typed Name | Signature | Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

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

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: MAACO AUTO PAINTING | Signature: [illegible] | Month Day Year: 7 23 87

GENERATOR / TRANSPORTER / FACILITY

Style F15REV-6 Labelmaster, Div. of American Labelmark Co. Inc. 60646 EPA Form 8700-22 (Rev. 9/86) Previous editions are obsolete.

[illegible]

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011192

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

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. ILD112403845 — 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: MAACO (CHICAGO HTS) 590 LINCOLN HIGHWAY CHICAGO HTS, ILL. 60411

4. Generator's Phone (312) 747-7080

A. Illinois Manifest Document Number: IL 1764576

B. Illinois Generator's ID: 0210455048

5. Transporter 1 Company Name: SUPER CARTAGE — 6. US EPA ID Number: ILD 052631496

C. Illinois Tranporter's ID: 1908

D. Transporter's Phone: (312) 243-1110

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: IND 016360265

G. Illinois Facility's ID: 1943058900102

H. Facility's Phone: (219) 924-4320

	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 IGNITABLE UN 1993	X	5	DM	275	1	EPA HW Number: XXD001
b.							EPA HW Number: XX
c.							EPA HW Number: XX
d.							EPA HW Number: XX

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above: In Item #14 1 = Gallons 2 = Cubic Yards

15. Special Handling Instructions and Additional Information

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

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

Printed/Typed Name: JOHN SEREIK — Signature: John Sereik — Date: Month 10 Day 22 Year 86

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: MIKE SUESS — Signature: Mike Suess — Date: Month 10 Day 22 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: HAROLD F. SCHMIDT — 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. #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

125FT 911193

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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 112 403 845
Manifest Document No.: 3689A
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
590 Lincoln Highway, Chicago Heights, IL 60411
4. Generator's Phone (312) 747-7080

A. State Manifest Document Number:
B. State Generator's ID: 0310 455 048
C. State Transporter's ID: 0311
D. Transporter's Phone: 312-385-8440
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID:
H. Facility's Phone: 219-924-4370

5. Transporter 1 Company Name: Strand Trucking
6. US EPA ID Number: ILD 000 646 810
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: IND 016 360 265

	11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	HM	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	RQ WASTE PAINT RELATED MATERIAL (F003) FLAMMABLE LIQUID NA 1263		04	DM	0220	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: PATEL JAY
Signature: [signature]
Month 05 Day 06 Year 87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Leonard III Strand
Signature: [signature]
Month 05 Day 06 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: Whitaker A
Signature: [signature]
Month 5 Day 19 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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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I L D 1 1 2 4 0 3 8 4 5 — 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
590 Lincoln Highway, Chicago Heights, Il 60411

4. Generator's Phone (312) 747-7080

A. State Manifest Document Number

B. State Generator's ID 0310 455 048

5. Transporter 1 Company Name: ADCOM EXPRESS, INC.

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 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 219-429-1660

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	005	DM	1270	G	F003
b.						
c.						
d.						

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above: G GALLON

15. Special Handling Instructions and Additional Information

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

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

Printed/Typed Name: Terry McGee — Signature: [signature] — Month Day Year: [illegible]

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: VINCENT E. AGUILAR — Signature: [signature] — Month Day Year: 9 30 98

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: HARROLD F. Schmidt — Signature: [signature] — Month Day Year: 07 20 98

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: ILD112403845
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
Phone; 312-747-7080
V & J Patel Auto Services, Inc. DBA Maaco
590 Lincoln Highway; Chicago Heights, IL 60411

4. Generator's Phone

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID 1008
D. Transporter's Phone 312-243-1110
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID 9180890002
H. Facility's Phone 219-924-4370

5. Transporter 1 Company Name: Super Cartage
6. US EPA ID Number: ILD052631496

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

9. Designated Facility Name and Site Address
American Chemical Serice
420 S. Colfax; Griffith, IN 46319
10. US EPA ID Number: IND052631496

	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	1	DM	55	1	D001
b.	FLAMMABLE LIQUID NA1263 WASTE PAINT RELATED MATERIAL	X	3	DM	165	1	D001
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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Printed/Typed Name | Signature | Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: LOUIE REED
Signature: Louie Reed
Month Day Year: 2 3 88

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

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: MAACO Auto Painting & Bodywork
Signature: Thomas Murphy
Month Day Year: 2 3 88

1a
3b
126K
T-63
2/8/88

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

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

0015103

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 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 1 1 2 4 0 3 8 4 5
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
Maaco
590 Lincoln Highway, Chicago Heights, IL 60411

A. State Manifest Document Number: INA 0159719

4. Generator's Phone (312) 747-7080

B. State Generator's ID: 0310455048

5. Transporter 1 Company Name: ABC Service
6. Use EPA ID Number: W I D 0 7 6 1 5 9 8 3 9

C. State Transporter's ID: IN9908-0050-11
D. Transporter's Phone: 414-657-6222

7. Transporter 2 Company 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: [illegible]

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt./Vol.	Waste No.
a. RQ WASTE PAINT RELATED MATERIAL (F003) FLAMMABLE LIQUID NA1263	003	D	00130	G	[illegible]
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

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

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

Printed/Typed Name: Patel [illegible] | Signature: [illegible] | Month 05 Day 04 Year 83

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Kip Nelson | Signature: Kip Nelson | Month 05 Day 04 Year 83

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

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: Harold F Schmidt | Signature: [illegible] | Month 05 Day 13 Year 83

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 0159719

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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0015735

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 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 1 1 2 4 0 3 8 45 | 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
MAACO
590 Lincoln Highway, Chicago Heights, IL 60411

A. State Manifest Document Number: INA 0159732

4. Generator's Phone (312) 747-7080

B. State Generator's ID: 0 3 1 0 4 5 0 4 8

5. Transporter 1 Company Name: ABC Service | 6. US EPA ID Number: I L D 0 0 7 6 1 5 9 8 3 9 | C. State Transporter's ID: IN9908-0050-11 | D. Transporter's Phone: 414-657-6222

7. Transporter 2 Company Name | 8. US EPA ID Number (UNNA) for each waste as identified in 49 CFR | 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: 219-924-1370

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.
GENERATOR a. RQ WASTE PAINT RELATED MATERIAL, (FOO3) FLAMMABLE LIQUID, NA1263	0.03	D N	55	G	
b.					
c.					
d.					

(TC=Tank cars, DT=Dump truck, VT=Vacuum trucks, DM=Metal boxes (drums), BA=Bags, CY=Cylinders, DW=Wooden boxes, TP=Tanks portable)
(Table II = Units of Measure)
P = Pounds, K = Kilograms, L = Liters (liquids only), G = Gallons (liquids only), T = Tons (2,000 lbs.), M = Metric tons (1,000 kg.)

J. Additional Descriptions for Materials Listed Above
HADED AREAS IS REQUIRED BY INDIANA STATE LAW
porter
ansporter (if applicable)

K. Handling Codes for Wastes Listed Above
E FOLLOWING INFORMATION IN THE S
D) Enter the phone number of first tran
(F) Enter the phone number of second

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, 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: X Herman Jackson Pgr | Signature: Herman Jackson Jr | Month: 06 | Day: 17 | Year: 88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Kip Nelson | Signature: Kip Nelson | Month: 06 | Day: 17 | 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: John S. Mezza | Signature: John S. Mezza | Month: 06 | Day: 17 | Year: 88

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

INA 0159732

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

126 R T03

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

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 112 403 845
Manifest Document No.: 0015
2. Page 1 of
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Maaco
590 Lincoln Highway - Chicago Heights, IL. 60411
4. Generator's Phone (312) 747-7080

A. State Manifest Document Number
B. State Generator's ID: 0310 455 048
C. State Transporter's ID: 0311
D. Transporter's Phone: 312-385-8440
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone: 219-924-4370

5. Transporter 1 Company Name: Strand Trucking
6. US EPA ID Number: ILD 000 646 810
7. Transporter 2 Company Name
8. US EPA ID Number

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

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a. RQ WASTE PAINT RELATED MATERIAL (F003) FLAMMABLE LIQUID NA 1263		04	dm	226 G	6	[illegible]
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: JOE MARCISZ
Signature: [signature]
Month Day Year: 10 10 08

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Leonard M Strand
Signature: Leonard M Strand
Month Day Year: 10 10 08

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

GENERATOR / TRANSPORTER / FACILITY

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

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

124TC T63 10/12

TSDF COPY

0015735

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0115904

WASTE GENERATOR

Authorization Number 997012

V. J. DOLAN & COMPANY, INC (Company Name) — 1830 NORTH LARAMIE AVENUE (Address)

CHICAGO (City) — ILLINOIS (State) — 60639 (Zip)

0316000285 (Generator Number)

WASTE HAULER(S)

(1) American Chemical Serv (Hauler Name) — 420 So Colfax (Hauler Address) — S.W.H. Registration Number 0024/001

Griffith, Indiana

(2) _____ (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)

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 WASTE (PAINT)

HAZARD CLASS: CLASS 55

FLAMMABLE LIQUID

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 2/19/80 — Anne Frank (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 39 Dis (52) — 1 GALLONS (Circle One) 2 CU. YDS. 2145 (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) Michael E. Burgie (Authorized Signature) DATE: 2/19/80 (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. Burgie (Authorized Signature) DATE: 2/19/80 (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

0000344

BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0115905

Authorization Number 991012

V. J. DOLAN & COMPANY, INC (Company Name) | 1830 NORTH LARAMIE AVENUE (Address)

CHICAGO (City) | ILLINOIS (State) | 60639 (Zip)

0 3 1 6 0 0 0 2 8 5 (Generator Number)

WASTE HAULER(S)

(1) American Chemical | P. O. Box 190 | S.W.H. Registration Number 0 0 2 4 0 0 1
Hauler Name | Hauler Address

(2) 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) | 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)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: PAINT SOLVENT WASTE

HAZARD CLASS: CLASS 55 FLAMMABLE LIQUID

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 5-16-80 | Stephen J. D... (Authorized Signature)

WASTE HAULER*

43 QUANTITY OF WASTE RECEIVED: 0 0 2 3 6 5 | 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) John Hazelwood (Authorized Signature) DATE 05/16/80

(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. Elias (Authorized Signature) DATE: 5/16/80

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

0000345

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

0323594

Authorization Number 9 9 7 0 1 2

V. J. DOLAN & COMPANY (Company Name) | 1830 NORTH LARAMIE AVENUE (Address)
CHICAGO (City) | ILLINOIS (State) | 60639 (Zip)

0 3 1 6 0 0 0 2 8 5 Generator Number

WASTE HAULER(S)

AMERICAN CHEMICAL SERVICE (Hauler Name) | P.O. BOX 190 (Hauler Address)
S.W.H. Registration Number 0 0 2 9 0 0 1

GRIFFITH (Hauler Name) | INDIANA 46319 (Hauler Address)
S.W.H. Registration Number

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | P.O. BOX 190 (Address)
ILD 1 8 0 8 9 0 2 Site Number
GRIFFITH (City) | INDIANA 46319 (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 WASTE (PAINT)
HAZARD CLASS: CLASS 55 FLAMMABLE LIQUID
WEIGHT FOR D.O.T. USE 13,900 LBS (LBS / TONS (circle one))

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.
QUANTITY OF WASTE DELIVERED: 1 8 1 5
(1 GALLONS / 2. CU. YDS. (Circle One))

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 10/1/80 (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: 10/1/80

(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: 10/1/80

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

000312

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0115907

Authorization Number 997012

V.J. DOLAN & COMPANY, INC. (Company Name) | 1830 NORTH LARAMIE AVENUE (Address)

CHICAGO (City) | ILLINOIS (State) | 60639 (Zip)

0316000285 G (Generator Number)

WASTE HAULER(S)

(1) AMERICAN CHEMICAL SERVICE (Hauler Name) | P.O. BOX 190 GRIFFITH, IND. (Hauler Address) | S.W.H. Registration Number 0024001

(2) STROUD TRUCKING (Hauler Name) | CRESTWOOD (Hauler Address) | S.W.H. Registration Number ILT0006468 10

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) | IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT & 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:
PAINT	CLASS 55 FLAMMABLE LIQUID
PAINT SOLVENT	CLASS 55 FLAMMABLE LIQUID

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 11/20/85 F005 (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 002255 (47–52) (1) GALLONS 2 CU. YDS. (Circle One) (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) William J. Dykstra (Authorized Signature) DATE: 11/20/85 (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:

Richard E. Lewis (Authorized Signature) DATE: 11/21/85 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: Unloaded on Dock 11-21 Dumped to 124TK 11-24-85

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

003645

TO BE COMPLETED BY WASTE GENERATOR

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

0[illegible]5907

WASTE GENERATOR

Authorization Number 997012

V.J. DOLAN & COMPANY, INC. (Company Name) — 1830 NORTH LARAMIE AVENUE (Address)

0316000285 (Generator Number)

CHICAGO (City) — ILLINOIS (State) — 60639 (Zip)

WASTE HAULER(S)

(1) AMERICAN CHEMICAL SERVICE (Hauler Name) — P.O. BOX 190 GRIFFITH, IND. (Hauler Address) — S.W.H. Registration Number 0[illegible]

(2) [illegible] (Hauler Name) — [illegible] (Hauler Address) — S.W.H. Registration Number IND 0163600[illegible]

DESTINATION - DISPOSAL, STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) — P.O. BOX 190 (Address) — [illegible] (Site Number)

GRIFFITH (City) — INDIANA (State) — 46319 (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT & 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
PAINT	CLASS 55 FLAMMABLE LIQUID
PAINT SOLVENT	CLASS 55 FLAMMABLE LIQUID

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 11/20/80 — [signature] (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 002255 (47–52) — 1 GALLONS 2 CU. YDS. (Circle One) (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) William J. Sylvester (Authorized Signature) — DATE: 11/20/80 (54–59)

(2) _____ (Authorized Signature) — DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

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

[signature] (Authorized Signature) — DATE: 11/21/80 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: HOLD ON DOCK TO 125R 11/25/80 GJM 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

HAULER COPY - PART 4

0000341

'PLETED BY
WASTE GENERATOR

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

0115908
1 7

Authorization Number 997012
8 13

V. J. DOLAN & COMPANY, INC (Company Name) | 1830 NORTH LARAMIE AVENUE (Address) | CHICAGO, ILLINOIS

CHICAGO (City) | ILLINOIS (State) | 60639 (Zip)

0316000285 (Generator Number) 14 24 G

FED I.D.# ILD005098629

WASTE HAULER(S)

(1) AMERICAN CHEMICAL SERVICE (Hauler Name) | P.O.BOX 190 GRIFFITH, INDIANA (Hauler Address) | S.W.H. Registration Number 0024001 25 31

(2) STRAND TRUCKING CRESTWOOD, IL. (Hauler Name) | (Hauler Address) | S.W.H. Registration Number ILT0006468 10 32 38

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | P.O. BOX 190 (Address) | 9180390 (Site Number) 39 46

GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | IND016360765

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE-PAINT: FLAMMABLE LIQUID

WASTE 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;FLAMMABLE LIQUID

F005

HAZARD CLASS: UN1263/F005

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: 3/12/81

(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 003300 (1 GALLONS, 2 CU. YDS.) (Circle One) 47 52 53

60

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) William J. Sylvester (Authorized Signature) DATE: 03/12/81 54 59

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

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

Michael O'Brien (Authorized Signature) DATE: 3/12/81 60 65

COMMENTS OR SPECIAL INSTRUCTIONS: TRAILER SPOTTED 3/12/81 PUMPED TO 125K 3/12/81
T-63 Jim Murphy

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

SITE COPY - PART 3

003646

TO BE COMPLETED BY WASTE GENERATOR

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

0115909

Authorization Number 997012

WASTE GENERATOR

V. J. DOLAN & COMPANY (Company Name) | 1830 NORTH LARAMIE AVENUE (Address)
CHICAGO (City) | ILLINOIS (State) | 60639 (Zip)
0316000285 Generator Number | FED I.D.# ILD005098629

WASTE HAULER(S)

(1) STRAND TRUCKING (Hauler Name) | 12643 S. KENTON (Hauler Address)
CRESTWOOD, IL
S.W.H. Registration Number 0024002
ILT 000646810

(2) (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)
GRIFFITH (City) | INDIANA (State) | 46319 (Zip)
91808902 Site Number
IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE-PAINT: FLAMMABLE LIQUID
WASTE 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, FLAMMABLE LIQUID F005
HAZARD CLASS: UN1263/F005

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: 5/18/81 (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 003200 (47–52) (1) GALLONS (2) CU. YDS. (Circle One) (53)

METHOD OF SHIPMENT (Circle One) (DRUMS) TANK TRUCK OPEN TRUCK (OTHER) VAC (Specify)

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

(1) (Authorized Signature) DATE: 05 19 81 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

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

Michael E. Bugg (Authorized Signature) DATE: 5/15/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: UNLOADED AT DOCK 5/18/81
TO 125 X T-63 5/19/81 9AM

IN ILLINOIS: 217 / 782-3637 | 24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS | OUTSIDE ILLINOIS: 800 / 424 88C

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

SITE COPY - PART 3

003647

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0115910

Authorization Number 997012

WASTE GENERATOR

V. J. DOLAN & COMPANY, INC (Company Name) — 1830 NORTH LARAMIE AVENUE (Address)

CHICAGO, ¼ (City) — ILLINOIS (State) — 60639 (Zip)

0316000285 G (Generator Number)

ILD005098629

WASTE HAULER(S)

(1) STRAND TRUCKING (Hauler Name) — 13647 KEATON CLEVELAND (Hauler Address) — S.W.H. Registration Number 0311003 ILT000646516

(2) (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) — ILD016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE-PAINT; FLAMMABLE LIQUID

WASTE 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; FLAMMABLE LIQUID F005

HAZARD CLASS: F005--UN1263

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: 8/19/81 — (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 53 drums ~~2915~~ — 1 GALLONS 2 CU. YDS. (Circle One)

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER VAN (Specify)

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

(1) (Authorized Signature) — DATE 8/19/81

(2) (Authorized Signature) — DATE / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

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

Michael O. Bug (Authorized Signature) — DATE 8/20/81

COMMENTS OR SPECIAL INSTRUCTIONS: To 124X 8/19/81 T-63 gm

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

SITE COPY - PART 3

003648

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0115911

Authorization Number 997012

V. J. DOLAN & COMPANY, INC (Company Name) 1830 NORTH LARAMIE AVENUE (Address)

CHICAGO, ILLINOIS (City) (State) 60639 (Zip)

0316000285 (Generator Number)

WASTE HAULER(S)

ILD005098629

ILT000646810

(1) STRAND TRUCKING (Hauler Name) 13642 KENTON CRESTWOOD, ILL (Hauler Address) S.W.H. Registration Number [illegible]

(2) AMERICAN CHEM. (Hauler Name) GRIFFITH, IN. (Hauler Address) S.W.H. Registration Number 0024001

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) ILD0163360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE-PAINT; FLAMMABLE LIQUID

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:
WASTE-PAINT, FLAMMABLE LIQUID F005	F005 UN1263

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: 10/25/81 (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 002090 (1 GALLONS / 2 CU. YDS.) (Circle One)

METHOD OF SHIPMENT (Circle One) 30 DRUMS TANK TRUCK OPEN TRUCK OTHER VAN (Specify)

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

(1) [signature] (Authorized Signature) DATE: 10/28/81

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

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

[signature] (Authorized Signature) DATE: 10-29-81

COMMENTS OR SPECIAL INSTRUCTIONS: TRAILER SPOTTED 10/28/81
TO 125 R T-63 EWM 11/3/81

IN ILLINOIS: 217 / 782-3637 24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424 8802

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

SITE COPY - PART 3

C03649

) BE COMPLETED BY
WASTE GENERATOR

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

0115912

Authorization Number 997012

WASTE GENERATOR

V. J. DOLAN& COMPANY, INC — 1830 NORTH LARAMIE AVENUE
(Company Name) — Address

CHICAGO — ILLINOIS — 60639
City — State — Zip

0316000285 G
Generator Number
ILD 005098629

WASTE HAULER(S)

ILT000646810

(1) STRAND TRUCKING — 13642 KENTON
Hauler Name — Hauler Address — S.W.H. Registration Number

(2) AMERICAN CHEMICAL — GRIFFITH IND — S.W.H. Registration Number 0024002
Hauler Name — Hauler Address

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE — P.O. BOX 190 — 91808902
(Facility Name) — Address — Site Number

GRIFFITH — INDIANA — 46319
City — State — Zip

IND016360765

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: WASTE-PAINT; FLAMMABLE LIQUID

WASTE 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; FLAMMABLE LIQUID F005

HAZARD CLASS: UN1263/F005

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: 1/6/82 — Jim Dolan (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 2090 — 1 GALLONS (Circle One) 2 CU. YDS. 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 (Authorized Signature) — 38 DIA — DATE: 01/06/82

(2) _____ (Authorized Signature) — DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

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

Michael O'Brien (Authorized Signature) — DATE: 1/6/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 — 24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-880

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

SITE COPY - PART 3

On Dock 1/6/82 GRM
To 125 K T-63 GRM 1/6/82

003840

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0115913

WASTE GENERATOR

Authorization Number 997012

V. J. DOLAN & COMPANY, INC (Company Name) | 1830 NORTH LARAMIE AVENUE (Address)

CHICAGO (City) | ILLINOIS (State) | 60639 (Zip)

03160000285 G (Generator Number)

ILD 005098629

WASTE HAULER(S)

(1) STRAND TRUCKING (Hauler Name) | 13642 KENTON (Hauler Address)

ILT000646810

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) | P.O. BOX 190 (Address)

GRIFFITH (City) | INDIANA (State) | 46319 (Zip)

91808902 (Site Number)

IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ~~WASTE~~ PAINT, FLAMMABLE LIQUID

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:
WASTE-PAINT; FLAMMABLE LIQUID	UN1263/F005
F-005	

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: 3-18-82

x Robert Dolan (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 2000

1 (GALLONS) 2 ~~CU. YDS.~~ (Circle One)

METHOD OF SHIPMENT (Circle One) 40 (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 Strong (Authorized Signature) DATE 03/18/82

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

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

Michael A Burns (Authorized Signature) DATE: 3/18/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 — 24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802

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

SITE COPY - PART 3

To 125R T-63 6PM 3/18/82

003642

COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0115914

Authorization Number 997012

V. J. DOLAN & CO (Company Name) | 1830 NORTH LARAMIE AVENUE (Address)

CHICAGO (City) | ILLINOIS (State) | 60639 (Zip)

0316000285 G (Generator Number)

ILD 005098629

WASTE HAULER(S)

(1) STRAND TRUCKING (Hauler Name) | 1364 W. KENTON CROSTWOOD, IL. (Hauler Address)

ILT000646810
S.W.H. Registration Number 9024901

(2) (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)

GRIFFITH (City) | INDIANA (State) | 46319 (Zip)

91808902 (Site Number)

IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE-PAINT; FLAMMABLE LIQUID

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:
WASTE-PAINT; FLAMMABLE LIQUID	UN1263/F005
F005	

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: 5/18/82 (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 55 DRUMS 1870 (1 GALLONS / 2 CU. YDS.) (Circle One)

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

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

(1) (Authorized Signature) DATE: 5/18/82

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

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

(Authorized Signature) DATE: 5/19/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 — 24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802

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

SITE COPY - PART 3

On dock 5-18-82 GRM
To 126R T-63 GRM 5-19-82

003541

TO BE COMPLETED BY
WASTE GENERATOR

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

0115915

Authorization Number ~~997012~~

WASTE GENERATOR

V. J. DOLAN & CO (Company Name) — 1830 N LARAMIE AVENUE (Address)
CHICAGO (City) — ILLINOIS (State) — 60639 (Zip)

0316000285 G (Generator Number)
ILD 005098629

WASTE HAULER(S)

312-385-8440 ILT000646810

(1) STRAND TRUCKING (Hauler Name) — 13640 S KENTON CRESTWOOD, ILL (Hauler Address) — S.W.H. Registration Number 0024002

(2) ~~XXXXXXXXXXXXXXXXXXXX~~ (Hauler Name) — ~~XXXXXXXXXXXX~~ (Hauler Address) — S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

312-768-3400

AMERICAN CHEM SERVICE (Facility Name) — P.O. BOX 190 (Address) — 9 1 8 0 8 9 0 2 (Site Number)
GRIFFITH (City) — INDIANA (State) — 46319 (Zip)

IND016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: WASTE, PAINT FLAMMABLE LIQUID

WASTE 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; FLAMMABLE LIQUID F005

HAZARD CLASS: UN1263/F005

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: 8-26-82 — (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 003465 — 1 GALLONS (Circle One) 2 CU. YDS.

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: 8/26/82

(2) (Authorized Signature) — DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

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

(Authorized Signature) — DATE: 8-26-82

COMMENTS OR SPECIAL INSTRUCTIONS.

IN ILLINOIS: 217 / 782-3637 — 24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-880

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

SITE COPY - PART 3

To 126 KT-63 GRM 8-26-82

003843

TO BE COMPLETED BY WASTE GENERATOR

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

0115916

Authorization Number

V. J. DOLAN & COMPANY, INC (Company Name) | 1830 N LARAMIE AVENUE (Address)

CHICAGO (City) | ILLINOIS (State) | 60639 (Zip)

0 3 1 6 0 0 0 2 8 5 G — Generator Number

ILD005098629

WASTE HAULER(S)

(1) STRAND TRUCKING (Hauler Name) | 13640 S KENTON CRESTWOOD, ILL (Hauler Address)

S.W.H. Registration Number 0024002

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

IND 016360265

S.W.H. Registration Number 00064691C

I&T

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | P.O. BOX 190 (Address)

GRIFFITH (City) | INDIANA (State) | 46319 (Zip)

Site Number 9180890 2

IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE, PAINT FLAMMABLE LIQUID

WASTE 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, FLAMMABLE LIQUID, F005

HAZARD CLASS: UN1263/F005

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: 11-9-82

Jim Dolan (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 2035 (47–52) GALLONS / 2 CU. YDS. (Circle One) 1 (53)

METHOD OF SHIPMENT (Circle One) 37 DRUMS | TANK TRUCK | OPEN TRUCK | OTHER UPF (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) Jim Batt (Authorized Signature) DATE: 11/9/82

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

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

_____ (Authorized Signature) DATE 11/9/82

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS: 217 / 782-3637 — 24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS — OUTSIDE ILLINOIS 800 / 424-8802

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

SITE COPY - PART 3

To 125R T-63 ERM 11-9-82

003644

METROPOLITAN SANITARY DISTRICT OF GREATER CHICAGO
100 EAST ERIE STREET • CHICAGO, IL 60611
INDUSTRIAL WASTE DIVISION (312) 751-5697

NO. 075881

INDUSTRIAL WASTE/SLUDGE GENERATION, SHIPMENT AND DISPOSAL RECORD

TYPE OF WASTE ▶ [ ] LIQUID [ ] SLUDGE [ ] SOLID | TYPE OF CONTAINER ▶ [ ] BULK (TANK TRUCK) [XX] DRUMS [ ] OTHER (SPECIFY) | VOLUME 1815 GALS / CU. YDS. / LBS.

WASTE CONTAINS:

[ ] FATS, OILS OR GREASE [ ] CYANIDE [ ] COPPER [ ] NICKEL [ ] MERCURY
[ ] ACID [ ] ZINC [ ] CHROME [ ] LEAD [XX] OTHER (SPECIFY) WATER, PAINT, FLAMABLE LIQUI
[ ] ALKALI [ ] CADMIUM [ ] IRON [ ] SELENIUM

DISPOSAL METHOD ▶ [ ] LANDFILL [ ] DESTRUCTION (SPECIFY) [XX] OTHER (SPECIFY) RECLAMATION

NAME OF COMPANY: V. J. DOLAN & COMPANY, INC | FEDERAL TAX I. D. NUMBER: 36-1002310

LOCATION: 1830 NORTH LARAMIE AVENUE CHICAGO, ILLINOIS 60639

TYPE OF INDUSTRY: PAINT MANUFACTURER | DATE REMOVED | 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] | PHONE: (312) 237-0100

JIM DOLAN—SHIPPING & RECEIVING

NAME: STRAND TRUCKING | FEDERAL TAX I. D. NUMBER

ADDRESS: 13600 SOUTH KENTON CRESTWOOD, ILLINOIS | DATE RECEIVED | TIME RECEIVED

WASTE HAULER'S REGISTRATION NO. | STATE | 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

DISPOSAL SITE

NAME: American Chemical Service Inc | FEDERAL TAX I. D. NUMBER: 36-0960173

ADDRESS: 2117 W. 115th Dr | DATE RECEIVED: 1-7-93 | 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 C. Burg | PERMIT NO. | PHONE: 708/458-2370

DISPOSAL SITE'S COPY

004720

COMPLETED BY
WASTE GENERATOR

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

0115917
1 7

Authorization Number ____ 8 13

V. J. DOLAN & COMPANY, INC (Company Name) | 1830 NORTH LARAMIE AVENUE (Address)

CHICAGO (City) | ILLINOIS (State) | 60639 (Zip)

0 3 1 6 0 0 0 8 8 5 (Generator Number) G 24

ILD005098629

WASTE HAULER(S)

(1) STRAND TRUCKING (Hauler Name) | 13640 S KENTON CRESTWOOD, ILL (Hauler Address) | S.W.H. Registration Number 0 0 2 4 0 0 2 25 31

(2) ____ (Hauler Name) | (317-385-8440 (Hauler Address) | ILT 0006 4 6 8 10 S.W.H. Registration Number 32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | P.O. BOX 190 (Address) | 312-768-3400 | 9 1 8 0 8 9 0 2 39 46 Site Number

GRIFFITH (City) | INDIANA (State) | 46319 (Zip)

IND016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: WASTE, PAINT; FLAMMABLE LIQUID

WASTE 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; FLAMMABLE LIQUID, FOO5

HAZARD CLASS: UN1263/FOO5

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: 1-7-83

(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 0 0 1 8 1 5 47 52 (1 GALLONS / 2 CU. YDS.) (Circle One) 1 53

METHOD OF SHIPMENT (Circle One) 33 DRUMS TANK TRUCK OPEN TRUCK OTHER UA (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 1/7/83 54 59

(2) ____ (Authorized Signature) DATE ____/____/____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

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

____ (Authorized Signature) DATE: 1/7/83 60 65

COMMENTS OR SPECIAL INSTRUCTIONS: ____

IN ILLINOIS: 217 / 782-3637 | 24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-8802

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

SITE COPY - PART 3

TO 125RT-63 GEM 1.7.83

004721

METROPOLITAN SANITARY DISTRICT OF GREATER CHICAGO
100 EAST ERIE STREET • CHICAGO, IL 60611
INDUSTRIAL WASTE DIVISION (312) 751-5697

NO. 075882

INDUSTRIAL WASTE/SLUDGE GENERATION, SHIPMENT AND DISPOSAL RECORD

TYPE OF WASTE ▶ [XX] LIQUID [ ] SLUDGE [ ] SOLID

TYPE OF CONTAINER ▶ [ ] BULK (TANK TRUCK) [XX] DRUMS [ ] OTHER (SPECIFY)

VOLUME GALS / CU. YDS. / LBS.

WASTE CONTAINS:

[ ] FATS, OILS OR GREASE [ ] ACID [ ] ALKALI [ ] CYANIDE [ ] ZINC [ ] CADMIUM [ ] COPPER [ ] CHROME [ ] IRON [ ] NICKEL [ ] LEAD [ ] SELENIUM [ ] MERCURY [XX] OTHER (SPECIFY) WASTE, PAINT; FLAMMABLE LIQUID

DISPOSAL METHOD ▶ [ ] LANDFILL [ ] DESTRUCTION (SPECIFY) [XX] OTHER (SPECIFY) RECLAMATION

NAME OF COMPANY: V. J. DOLAN & COMPANY, INC

FEDERAL TAX I. D. NUMBER: 36-1002310

LOCATION: 1830 NORTH LARAMIE AVENUE CHICAGO, ILLINOIS 60639

TYPE OF INDUSTRY: PAINT MANUFACTURER

DATE REMOVED: 3/2/83

TIME REMOVED: 11:00

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]

PHONE: 312-237-0100

NAME: ~~JIM DOLAN—SHIPPING &RECEIVING~~ Standard Truck

FEDERAL TAX I. D. NUMBER:

ADDRESS: 13647 [illegible]

DATE RECEIVED: 3-2-83

TIME RECEIVED:

WASTE HAULER'S REGISTRATION NO.: [illegible]

STATE: ILL

TRUCK LICENSE NO.: [illegible]

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: [illegible]

DISPOSAL SITE

NAME: American Chemical Services Inc

FEDERAL TAX I. D. NUMBER: [illegible]

ADDRESS: [illegible]

DATE RECEIVED: 3-2-83

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: [signature]

PERMIT NO.:

PHONE: 219 924 4370

DISPOSAL SITE'S COPY

004718

MPLETED BY
GENERATOR

STATE OF ILLINOIS

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

0115918

WASTE GENERATOR

Authorization Number

V. J. DOLAN & COMPANY (Company Name) — 1830 NORTH LARAMIE AVENUE (Address) 312-237-0100

CHICAGO (City) — ILLINOIS (State) — 60639 (Zip)

0316000285 G (Generator Number)

ILD005098629

WASTE HAULER(S)

ILT000646810

(1) STRAND TRUCKING (Hauler Name) — 1364p S KENTON CRESTWOOD, ILL (Hauler Address) 312-385-8440 — S.W.H. Registration Number 0024002

(2) (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) 312-768-3400 — 91808902 (Site Number)

GRIFFITH (City) — INDIANA (State) — 46319 (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE, PAINT; FLAMMABLE LIQUID

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid) 1925 gal

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: WASTE-PAINT; FLAMMABLE LIQUID F005 16,000 lbs

HAZARD CLASS: UN1263/F005

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: 3-2-83 — (Authorized Signature)

WASTE HAULER*

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

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

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

(1) (Authorized Signature) DATE: 3/2/83

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

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

(Authorized Signature) DATE: 3/2/83

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 — 24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802

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

SITE COPY - PART 3

To 125 TCT-63 GRM 3.2.83

004719

METROPOLITAN SANITARY DISTRICT OF GREATER CHICAGO
100 EAST ERIE STREET • CHICAGO, IL 60611
INDUSTRIAL WASTE DIVISION (312) 751-5697

NO. 075883

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 ____ GALS ____ CU YDS ____ LBS

WASTE CONTAINS:

[ ] FATS, OILS OR GREASE [ ] ACID [ ] ALKALI [ ] CYANIDE [ ] ZINC [ ] CADMIUM [ ] COPPER [ ] CHROME [ ] IRON [ ] NICKEL [ ] LEAD [ ] SELENIUM [ ] MERCURY [XX] OTHER (SPECIFY) WASTE PAINT; FLAMMABLE LIQUI

DISPOSAL METHOD ▶ [ ] LANDFILL [ ] DESTRUCTION (SPECIFY) [XX] OTHER (SPECIFY) RECLAMATION

NAME OF COMPANY: V. J. DOLAN & COMPANY, INC

FEDERAL TAX I. D. NUMBER: 36-1002310

LOCATION: 1830 NORTH LARAMIE AVENUE CHICAGO, ILLINOIS 60639

TYPE OF INDUSTRY: PAINT MANUFACTURER

DATE REMOVED: ____ 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: ____

PHONE: (312) 237-0100

NAME: JAMES DOLAN—SHIPPING & RECEIVING

STRAND TRUCKING

FEDERAL TAX I. D. NUMBER: ____

ADDRESS: 13640 S KENTON CRESTWOOD, ILLINOIS

DATE RECEIVED: ____ TIME RECEIVED: ____

WASTE HAULER'S REGISTRATION NO.: ____ STATE: ____ 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: ____

PHONE: ____

DISPOSAL SITE

NAME: CWM CHEMICAL SERVICES

FEDERAL TAX I. D. NUMBER: 36 806 1213

ADDRESS: RT 6 LYNDON 61261

DATE RECEIVED: 5/22/92 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 Burke Supervisor

PERMIT NO.: ____

PHONE: 815 942 4350

DISPOSAL SITE'S COPY

004722

PLETED BY
ENERATOR

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

0115919

Authorization Number

W.J. DOLAN & COMPANY, INC (Company Name) 1830 NORTH LARAMIE AVENUE (Address)

CHICAGO (City) ILLINOIS (State) 60639 (Zip)

0 3 1 6 0 0 0 2 8 5 G (Generator Number)

ILD005098629

WASTE HAULER(S)

(1) STRAND TRUCKING (Hauler Name) 13640 S KENTON CRESTWOOD, ILL (Hauler Address) (312) 385-8440 S.W.H. Registration Number

(2) (Hauler Name) (Hauler Address) S.W.H. Registration Number 0024001

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) P.O. BOX 190 (312) 768-3400 (Address) 9 1 8 0 8 9 0 2 (Site Number)

GRIFFITH (City) INDIANA (State) 46319 (Zip) IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE, PAINT; FLAMMABLE LIQUID

WASTE 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; FLAMMABLE LIQUID F005

50 Drums

HAZARD CLASS: UN1263/F005

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: 5-27-83 (Authorized Signature)

WASTE HAULER*

5 Expl
50 drums

QUANTITY OF WASTE RECEIVED: 00 7 750 1 GALLONS 2 CU. YDS. (Circle One)

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

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

(1) Tim Strand (Authorized Signature) 22,500 lbs DATE: 5 27 83

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

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

Michael E Burg (Authorized Signature) DATE: 5 27 83

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802

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

SITE COPY - PART 3

To 126RT-63 Gray 6-3-83

004723

FILLED BY GENERATOR

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

0115920

Authorization Number _____

V. J. DOLAN & COMPANY, INC (Company Name) | 1830 NORTH LARAMIE AVENUE (Address)

CHICAGO (City) | ILLINOIS (State) | 60639 (Zip)

0 3 1 6 0 0 0 2 8 5 G (Generator Number)

ILD005098629

WASTE HAULER(S)

(1) STRAND TRUCKING (Hauler Name) | 13640 S KENTON CRESTWOOD, ILL (Hauler Address) (312) 385-8440

ILD 000646468

S.W.H. Registration Number 0311 NOT US

(2) AMERICAN CHEM. (Hauler Name) | P.O Box 190 - GRIFFITH IND (Hauler Address)

IND 016360086

S.W.H. Registration Number 0004001

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | P.O. BOX 190 (312) 768-3400 (Address)

9180890 2 (Site Number)

GRIFFITH (City) | INDIANA (State) | 46319 (Zip)

IND 091436065

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE, PAINT; FLAMMABLE LIQUID

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:
WASTE, PAINT;	UN1263/F005
FLAMMABLE LIQUID F005	

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: 8-3-83

(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 2 1980 (1 GALLONS / 2 CU. YDS.) (Circle One) 1

36

METHOD OF SHIPMENT (Circle One) (DRUMS) TANK TRUCK OPEN TRUCK (OTHER) VAN (Specify)

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

(1) _____ (Authorized Signature) DATE: 8/3/83

(2) JAMES DOLAN (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

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

Michael Bruce (Authorized Signature) DATE 8/3/83

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS 217 / 782-3637 — 24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS 800 / 424-8802

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

SITE COPY - PART 3

To 125 RT-63 GAM 8-3-83

004726

METROPOLITAN SANITARY DISTRICT OF GREATER CHICAGO
100 EAST ERIE STREET • CHICAGO, IL 60611
INDUSTRIAL WASTE DIVISION (312) 751-5697

NO. 075884

INDUSTRIAL WASTE/SLUDGE GENERATION, SHIPMENT AND DISPOSAL RECORD

TYPE OF WASTE ▶ [XX] LIQUID [ ] SLUDGE [ ] SOLID

TYPE OF CONTAINER [ ] BULK (TANK TRUCK) [X] DRUMS [ ] OTHER (SPECIFY)

VOLUME: 1980 GALS / CU. YDS. / LBS.

WASTE CONTAINS:

[ ] FATS, OILS OR GREASE [ ] ACID [ ] ALKALI [ ] CYANIDE [ ] ZINC [ ] CADMIUM [ ] COPPER [ ] CHROME [ ] IRON [ ] NICKEL [ ] LEAD [ ] SELENIUM [ ] MERCURY [XX] OTHER (SPECIFY) PAINT, FLAMABLE LIQUID WASTE

DISPOSAL METHOD ▶ [ ] LANDFILL [ ] DESTRUCTION (SPECIFY) [XX] OTHER (SPECIFY) RECLAMATION

NAME OF COMPANY: V. J. DOLAN & COMPANY, INC
FEDERAL TAX I. D. NUMBER: 36-1002310

LOCATION: 1830 NORTH LARAMIE AVENUE CHICAGO, ILLINOIS 60639

TYPE OF INDUSTRY: PAINT MANUFACTURER
DATE REMOVED: 5-3-93
TIME REMOVED: 1:30 PM

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: JAMES DOLAN—SHIPPING & RECEIVING
PHONE: (312) 237-0100

NAME: STRAND TRUCKING
FEDERAL TAX I. D. NUMBER:

ADDRESS: 13640 S KENTON CRESTWOOD, ILLINOIS
DATE RECEIVED:
TIME RECEIVED:

WASTE HAULER'S REGISTRATION NO.:
STATE:
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:
PHONE:

DISPOSAL SITE

NAME: AMERICAN CHEMICAL SERVICE INC
FEDERAL TAX I. D. NUMBER: 36-096-1775

ADDRESS:
DATE RECEIVED: 5/3/93
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 E Burg
PERMIT NO.:
PHONE: 3196244370

DISPOSAL SITE'S COPY

004724

METROPOLITAN SANITARY DISTRICT OF GREATER CHICAGO
100 EAST ERIE STREET • CHICAGO, IL 60611
INDUSTRIAL WASTE DIVISION (312) 751-5697

NO. 075885

INDUSTRIAL WASTE/SLUDGE GENERATION, SHIPMENT AND DISPOSAL RECORD

TYPE OF WASTE ▶ [X] LIQUID [ ] SLUDGE [ ] SOLID

TYPE OF CONTAINER ▶ [ ] (BULK TANK TRUCK) [X] DRUMS [XX] OTHER (SPECIFY)

VOLUME: GALS / CU. YDS. / LBS.

WASTE CONTAINS:

[ ] FATS, OILS OR GREASE [ ] ACID [ ] ALKALI [ ] CYANIDE [ ] ZINC [ ] CADMIUM [ ] COPPER [ ] CHROME [ ] IRON [ ] NICKEL [ ] LEAD [ ] SELENIUM [ ] MERCURY [ ] OTHER [XX] (SPECIFY) XXX FLAMMABLE LIQUID

DISPOSAL METHOD ▶ [ ] LANDFILL [ ] DESTRUCTION (SPECIFY) [X] OTHER (SPECIFY) RECLAMATION

NAME OF COMPANY: V. J. DOLAN & COMPANY, INC

FEDERAL TAX I. D. NUMBER: 36-1002310

LOCATION: 1830 N LARAMIE AVENUE--CHICAGO, ILLINOIS 60639

TYPE OF INDUSTRY: PAINT MANUFACTURER

DATE REMOVED: [illegible]

TIME REMOVED: [illegible]

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] JAMES DOLAN

PHONE: (312) 237-0100

NAME: STRAND TRUCKING

FEDERAL TAX I. D. NUMBER:

ADDRESS: 13640 S KENTON CRESTWOOD, ILLINOIS

DATE RECEIVED:

TIME RECEIVED:

WASTE HAULER'S REGISTRATION NO.: 91808902/IND016360265

STATE:

TRUCK LICENSE NO.: [illegible]

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: [illegible]

DISPOSAL SITE

NAME: American Chemical Service

FEDERAL TAX I. D. NUMBER: [illegible]

ADDRESS: [illegible]

DATE RECEIVED: 10/14/82

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.:

PHONE: 219 924 4370

DISPOSAL SITE'S COPY

004725

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0115921

Authorization Number

WASTE GENERATOR

V. J. DOLAN & COMPANY, INC (Company Name) — 1830 NORTH LARAMIE AVENUE (Address)

CHICAGO (City) — ILLINOIS (State) — 60639 (Zip)

0316000285 (Generator Number)

ILD005098629

WASTE HAULER(S)

(1) STRAND TRUCKING (Hauler Name) — 13640 S KENTON CRESTWOOD, ILL (Hauler Address) (312) 385-8440 — S.W.H. Registration Number 91808902

IND016360265

(2) (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) (312) 768-3400

GRIFFITH (City) — INDIANA (State) — 46319 (Zip)

0024-001 (Site Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE-PAINT; FLAMMABLE LIQUID

WASTE 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; FLAMMABLE LIQUID

HAZARD CLASS: UN1263/Foo5

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 10/14/83 — (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 2475 (47–52) — 0 GALLONS 2 CU. YDS. (Circle One) 1 (53) WT. 18,000

METHOD OF SHIPMENT (Circle One) DRUMS 45 — TANK TRUCK — OPEN TRUCK — OTHER Vac (Specify)

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

(1) (Authorized Signature) — DATE 10/17/83

(2) (Authorized Signature) — DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

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

(Authorized Signature) — DATE 10/14/83

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 — 24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802

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

SITE COPY - PART 3

ON DOCK To 125 ET-63 GKul 10-17-83

004727

ILLINOIS ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

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

IL532-0610

LPC 62 8/81

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) **EPA Form 8700-22 (3-84)** Form Approved. OMB No. 2000-0404. Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I L D 0 0 5 0 9 8 6 2 9 — 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
V. J. DOLAN & COMPANY, INC
1830 N LARAMIE AVE CHICAGO, ILLINOIS 60639
4. Generator's Phone ( )

A. Illinois Manifest Document Number: IL 1120156

B. Illinois Generator's ID: 0 3 1 6 1 1 0 0 0 2

5. Transporter 1 Company Name: STRAND TRUCKING — 6. US EPA ID Number: 0 3 1 6 1 1 0 0 0 2

C. Illinois Tranporter's ID

D. ( ) Transporter's Phone

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

E. Illinois Transporter's ID

F. (3 2) 3 3 5 - 8 4 4 0 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

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. XX WASTE-PAINT, FLAMMABLE LIQUID		33	DRS		GAL	EPA HW Number: F 0 0 5 ; Authorization Number
b.						EPA HW Number; Authorization Number
c.						EPA HW Number; Authorization Number
d.						EPA HW Number; Authorization Number

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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: STEPHEN J. DOLAN — Signature — Date: Month Day Year

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: THOMAS PAUL STRAND-DREHER — Signature: Thomas Paul Strand — Date: Month 10 Day 9 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 10 Day 15 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

125R7-63

00100

STATE OF ILLINOIS ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

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

IL532-0610
LPC-62 8/31

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) **EPA Form 8700-22 (3-84)** Form Approved. OMB No. 2000-0404. Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I L D 0 0 5 0 9 8 2 6 9 Manifest Document No. 2 0 1 5 7
2. Page 1 of 1
Information in the shaded areas is not required by Federal law, but is required by Illinois law.

3. Generator's Name and Mailing Address
V. J. DOLAN & COMPANY, INC
1830 N LARAMIE AVENUE CHICAGO, ILL 60639
4. Generator's Phone ( )

A. Illinois Manifest Document Number IL 1120157
B. Illinois Generator's ID 0 3 1 6 1 1 0 0 0 2

5. Transporter 1 Company Name: STRAND TRUCKING
6. US EPA ID Number
C. Illinois Tranporter's ID 01024
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
G. Illinois Facility's ID
H. Facility's Phone ( )

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
GENERATOR a.	XX WASTE, PAINT, FLAMMABLE LIQUID		36	DRS	1,980	GAL	EPA HW Number F 0 0 5 Authorization Number
b.							EPA HW Number Authorization Number
c.							EPA HW Number Authorization Number
d.							EPA HW Number Authorization Number

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

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

Printed/Typed Name: JAMES DOLAN — Signature — Date: Month 11 Day 26 Year 84

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: THOMAS PAUL STRAND — Signature — Date: Month 11 Day 26 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. BIKOS — Signature — Date: Month 11 Day 26 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

126 RT-63

CJ8167

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

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

0115922

WASTE GENERATOR

Authorization Number

V. J. DOLAN & COMPANY, INC — (Company Name)
1830 NORTH LARAMIE AVENUE — Address
CHICAGO, I — City
ILLINOIS — State
60639 — Zip
0 3 1 6 0 0 0 2 8 5 — Generator Number
ILD088098629

WASTE HAULER(S)

(1) STRAND TRUCKING — Hauler Name
13640 S KENTON CRESTWOOD, ILL — Hauler Address (312) 385-8440
S.W.H. Registration Number 0024002 ~~91808902~~ ~~IND016360265~~ ILD 000646810

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE — (Facility Name)
P.O. BOX 190 (312) 76803499 — Address
GRIFFITH — City
INDIANA — State
46319 — Zip
91808902 ~~0024001~~ — Site Number
IND 016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: WASTE-PAINT; FLAMMABLE LIQUID

WASTE 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; FLAMMABLE LIQUID

HAZARD CLASS: UN1263/F005

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: 1-5-84 — (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 003575 — 1 GALLONS 2 CU. YDS. (Circle One) 1

METHOD OF SHIPMENT (Circle One) 65 DRUMS TANK TRUCK OPEN TRUCK OTHER UAN (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) Jim Patton (Authorized Signature) DATE: 1 / 5 / 84

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

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

Michael E. Burge (Authorized Signature) DATE: 1 / 5 / 84

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802

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

SITE COPY - PART 3

To 125 F T-63 EPM 1.5.84

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

0115923
1 7

Authorization Number ____ 8 ____ 13

V. J. DOLAN & COMPANY, INC (Company Name) | 1830 NORTH LARAMIE AVENUE Address

CHICAGO City | ILLINOIS State | 60639 Zip

0 3 1 6 0 0 0 2 8 5 G
14 Generator Number 24

ILD005098629

WASTE HAULER(S)

(1) STRAND TRUCKING Hauler Name | 13640 S KENTON CRESTWOOD, ILL Hauler Address (312) 385-8440

ILD 000646 810
S.W.H. Registration Number NOT USED
25 31

(2) HMO RICAN CHEMICAL 420 S. CALEF
(312) 768-3400 Hauler Name | Hauler Address GRIFFITH

S.W.H. Registration Number 0 0 2 4 0 6 2
IND 32 016 360 265 38

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | P.O. BOX 190 (312) 768-3400 Address

9 1 8 0 8 9 0 2
39 Site Number 46

GRIFFITH City | INDIANA State | 46319 Zip

IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINT; FLAMMABLE LIQUID

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:
WASTE PAINT; FLAMMABLE LIQUID	UN1263/F005

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: 2-16-84 (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 001595 (1 BALLONS / 2 CU. YDS.) (Circle One) 1
47 52 53

METHOD OF SHIPMENT (Circle One) 29 DRUMS TANK TRUCK OPEN TRUCK OTHER Van (Specify)

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

(1) (Authorized Signature) DATE: 2/16/84
54 59

(2) (Authorized Signature) DATE: / /
54 59

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

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

Michael O Bulgs (Authorized Signature) DATE: 2/16/84
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802

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

SITE COPY - PART 3

TO 124 ET-63 6RM 2-16-84

008112

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

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

0115924 (1–7)

Authorization Number ____ (8–13)

V. J. DOLAN & COMPANY, INC (Company Name) | 1830 NORTH LARAMIE AVENUE (Address)

CHICAGO (City) | ILLINOIS (State) | 60639 (Zip)

0 3 1 6 0 0 0 2 8 5 G (14–24) Generator Number

ILD 005098629

WASTE HAULER(S)

(1) STRAND TRUCKING (Hauler Name) | 13640 S KENTON CRESTWOOD, ILL (Hauler Address) (312) 385-8440 | S.W.H. Registration Number 0024002 (23–31)
ILD 000646810

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

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | P.O. BOX 190 420 S COLFAX (Address) (312) 768-3400 | 9 1 8 0 8 9 0 2 (39–46) Site Number

GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE-PAINT; FLAMMABLE LIQUID

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:
WASTE-PAINT;	UN1263/F005
FLAMMABLE LIQUID	

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 5/4/84

(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 003520 (47–52) 1 GALLONS 2 CU. YDS. (Circle One) 1 (53)

METHOD OF SHIPMENT (Circle One) 64 (DRUMS) TANK TRUCK OPEN TRUCK (OTHER) UAN (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: 5/4/84 (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: 5/4/84 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-8802

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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ENERATOR

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

0115925
1 7

Authorization Number ____ 8 13

V. J. DOLAN & COMPANY, INC. (Company Name) | 1830 NORTH LARAMIE AVENUE Address

0 3 1 6 0 0 0 2 8 5 G
14 Generator Number 24

CHICAGO City | ILLINOIS State | 60639 Zip

WASTE HAULER(S)

(1) STRAND TRUCKING Hauler Name | 13640 S KENTON CRESTWOOD, ILL Hauler Address (312) 385-8440 | S.W.H. Registration Number 0024002 25 31

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

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | P.O. BOX 190 420 S COLFAX Address (312) 768-3400

9 1 8 0 8 9 0 2
39 Site Number 46

GRIFFITH City | INDIANA State | 46319 Zip

[redacted]016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE-PAINT; FLAMMABLE LIQUID

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:
WASTE-PAINT; FLAMMABLE LIQUID	UN1263/F005

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: 7-16-84 L Pell (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 3300 47 52 (GALLONS) ~~CU. YDS.~~ (Circle One) 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) X [signature] (Authorized Signature) DATE: 7/16/84 54 59

(2) ____ (Authorized Signature) 60 Drums DATE: ____/____/____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

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

[signature] (Authorized Signature) DATE: 7/16/84 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

51 to 124 RT-63
9 to 204 RT-50

008170

TO BE COMPLETED BY
WASTE GENERATOR

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

0115901
1 7

Authorization Number _____ 8 13

V. J. DOLAN & CO., INC (Company Name) | 1830 N LARAMIE AVENUE Address

CHICAGO, I City | ILLINOIS State | 60639 Zip

0 3 1 6 0 0 0 2 8 5 G
14 Generator Number 24

ILD005098629

WASTE HAULER(S)

(1) STRAND TRUCKING Hauler Name | 13640 S KENTON CRESTWOOD, IL Hauler Address (312) 385-8440

S.W.H. Registration Number 0 0 2 4 0 0 1
25 31

(2) _____ Hauler Name | _____ Hauler Address

S.W.H. Registration Number _____
32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) | P.O. BOX 190 420 S COLFAX Address

9 1 8 0 8 8 9 0 2
39 Site Number 46

GRIFFITH City | INDIANA State | 46319 Zip

IND016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: WASTE-PAINT;

FLAMMABLE LIQUID

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:
WASTE-PAINT;	UN1263/F005
FLAMMABLE LIQUID	

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: _____ (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 35 1925 47 52 (1) GALLONS 2 CU. YDS. (Circle One) 1 53

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

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

(1) Leonard M Strand (Authorized Signature) DATE: 8/21/84 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 Burg (Authorized Signature) DATE 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

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

SITE COPY - PART 3

125RT-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.: ILD005098629 — Manifest Document No.: 20156

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
V. J. DOLAN & COMPANY, INC
1830 N LARAMIE AVENUE CHICAGO, ILLINOIS 60639

4. Generator's Phone ( )

A. Illinois Manifest Document Number: IL 1120158

B. Illinois Generator's ID: 0316110002

5. Transporter 1 Company Name: STRAND TRUCKING

6. US EPA ID Number: ILT000646810

C. Illinois Tranporter's ID: 0022

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

10. US EPA ID Number

G. Illinois 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.	XX	WASTE, PAINT; FLAMMABLE LIQUID	42	DRS	2310	GAL	EPA HW Number: P005 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
JAMES DOLAN	[signature]	02 18 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month Day Year
Leonard M Strand	Leonard M Strand	2 18 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 [illegible]	Michael [illegible]	2 18 85

IN ILLINOIS: 217 / 782-3637 "24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS" OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV.# 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½ Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

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010257

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.: ILD005098629 — Manifest Document No.: 1120159

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
V. J. DOLAN & CO., INC
1830 N LARAMIE AVENUE CHICAGO, ILLINOIS 60639

4. Generator's Phone (312) 237-0100

A. Illinois Manifest Document Number: IL 1120159

B. Illinois Generator's ID: 0316110002

5. Transporter 1 Company Name: STRAND TRUCKING

6. US EPA ID Number: ILD000646810

C. Illinois Tranporter's ID: 0311

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: IND016360026

G. Illinois Facility's ID: 9780890002

H. Facility's Phone: (219) 929-7360

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.	XX	WASTEM PAINT, FLAMMABLE LIQUID	50	DR	02750	GAL	EPA HW Number: F009; 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: JIM DOLAN — Signature: [signature] — Date: Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: JAMES BATTEN — Signature: James Batten — Date: Month Day Year

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name — Signature — Date: 05 21 85 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: Michael D. Bruce — Signature: Michael E. Bruce — Date: Month Day Year 4 1 8

GENERATOR — TRANSPORTER — FACILITY

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV.# 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½ Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

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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. ILD005098629 Manifest Document No. 1120160

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
V. J. DOLAN & CO
1830 N LARAMIE AVENUE CHICAGO, ILL 60639

4. Generator's Phone (312) 858- 0100

5. Transporter 1 Company Name: STRAND TRUCKING — 6. US EPA ID Number

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

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
420 S COLFAX GRIFFITH, INDIANA 46319
— 10. US EPA ID Number: IND016360026

A. Illinois Manifest Document Number: IL 1120160

B. Illinois Generator's ID: 0 3 1 6 1 1 0 0 0 2

C. Illinois Tranporter's ID: 1 0 3 1 1

D. 312 385-8440 Transporter's Phone

E. Illinois Transporter's ID

F. Transporter's Phone

G. Illinois Facility's ID

H. Facility's Phone: 219 924-7360

	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.	XX WASTE, PAINT, FLAMMABLE LIQUID		44	DRS	3420	GAL	EPA HW Number D001 / Authorization Number
b.							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

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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: Jim Dolan — Signature — Date: Month 07 Day 12 Year 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: JAMES BATTEN — Signature — Date: Month 07 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 BURGE — Signature — Date: Month 7 Day 17 Year 85

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV. # 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½ Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

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010259

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 7-31-8

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I L D 0 0 5 0 9 8 6 2 9 — Manifest Document No. 1120161

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
V. J. DOLAN & CO., INC
1830 N LARAMIE AVENUE CHICAGO, ILL 60639

4. Generator's Phone (312) 237-0100

A. Illinois Manifest Document Number IL 1188561

B. Illinois Generator ID 0 3 1 6 1 1 0 0 0 2

5. Transporter 1 Company Name: STRAND TRUCKING — 6. US EPA ID Number

C. Illinois Tranporter's ID

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

G. Illinois Facility's I.D.

H. Facility's Phone (219) 924-7350

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. XX WASTE, PAINT, FLAMMABLE LIQUID		43	DR	2365	GAL	EPA HW Number F003 / Authorization Number
b.						EPA HW Number / Authorization Number
c.						EPA HW Number / Authorization Number
d.						EPA HW Number / Authorization Number

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

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

Printed/Typed Name	Signature	Date (Month Day Year)
Jim Dolan		09 12 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials		
Printed/Typed Name: THOMAS STRAND	Signature: Thomas Strand	Date: 09 12 85
18. Transporter 2 Acknowledgement or 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 (Month Day Year)
MURPHY		9 12 85

IN ILLINOIS: 217 / 782-3637 — 24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS — OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV. # 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½ Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

123 E T-63

01020

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.: ILD005098629 — Manifest Document No.: 1188562

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
V. J. DOLAN & CO., INC
1830 N. LARAMIE AVENUE CHICAGO, ILLINOIS 60629

4. Generator's Phone (312) 237-0100

A. Illinois Manifest Document Number: IL 1188562

B. Illinois Generator's ID: 0316110002

5. Transporter 1 Company Name: STRAND TRUCKING

6. US EPA ID Number: ILD000646810

C. Illinois Tranporter's ID: 0024

D. (12) 285-8440 Transporter's Phone

7. Transporter 2 Company Name: AMERICAN CHEMICAL

8. US EPA ID Number: XHD016360265

E. Illinois Transporter's ID: 0311

F. 219 924-4370 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 01634626

G. Illinois Facility's ID: 0180890002

H. Facility's Phone: 219 924-7360

	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.	XX WASTE, PAINT, FLAMMABLE LIQUID	44	DRS	2420	GAL	EPA HW Number: F003 Authorization Number
b.						EPA HW Number Authorization Number
c.						EPA HW Number Authorization Number
d.						EPA HW Number Authorization Number

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

I CERTIFY THAT I HAVE A PROGRAM IN PLACE TO REDUCE THE VOLUME AND TOXICITY OF WASTE GENERATED TO THE DEGREE I HAVE DETERMINED TO BE ECONOMICALLY PRACTICABLE AND I HAVE SELECTED THE METHOD OF TREATMENT, STORAGE, OR DISPOSAL CURRENTLY AVAILABLE TO ME WHICH MINIMIZES THE PRESENT AND FUTURE THREAT TO HUMAN HEALTH AND THE ENVIRONMENT.

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

Printed/Typed Name: Jim Dolan — Signature: [signature] — Date: Month 12 Day 18 Year 85

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: THOMAS STRAND — Signature: [signature] — Date: Month 12 Day 18 Year 85

18. Transporter 2 Acknowledgement or Receipt of Materials

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

19. Discrepancy Indication Space

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

Printed/Typed Name — Signature — Date: Month 12 Day 18 Year 85

GENERATOR / TRANSPORTER / FACILITY

*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

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FACILITY COPY - PART 3

123 TC T-63

010261

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.: ILD005098629 — Manifest Document No.: 1188565

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: V. J. DOLAN & CO., INC, 1830 N. LARAMIE AVE CHICAGO, ILL 60639

4. Generator's Phone (312) 237-0100

A. Illinois Manifest Document Number: IL 1188565

B. Illinois Generator's ID: 0316110002

5. Transporter 1 Company Name: STRAND TRUCKING

6. US EPA ID Number: VND016780243

C. Illinois Tranporter's ID:

D. (312) 385-8440 Transporter's Phone

7. Transporter 2 Company Name:

8. US EPA ID Number: RCD000646810

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: IND016236026

G. Illinois Facility's ID: 0180000002

H. Facility's Phone: (219) 924-7360

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. XX WASTE, PAINT, FLAMMABLE LIQUID	55	DRS	3025	GAL	EPA HW Number / 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

I CERTIFY THAT I HAVE 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 STREAT TO HUMAN HEALTH AND THE ENVIRONMENT.

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

Printed/Typed Name: Jim Dolan — Signature: [signature] — Date: Month 09 Day 29 Year 86

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: STAN STRAND — Signature: Stan Strand — Date: Month 09 Day 29 Year 86

18. Transporter 2 Acknowledgement or Receipt of Materials

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

19. Discrepancy Indication Space

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

Printed/Typed Name: GR MURPHY — Signature: [signature] — Date: Month 09 Day 29 Year 86

GENERATOR / TRANSPORTER / FACILITY

'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

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FACILITY COPY - PART 3

123E103

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.: ILD005698829 — Manifest Document No.: 1188563

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
V. J. DOLAN & CO., INC
1830 N LARAMIE AVENUE CHICAGO, ILL 60639

4. Generator's Phone (312) 237-0100

A. Illinois Manifest Document Number: IL 1188563

B. Illinois Generator's ID: 0316110002

5. Transporter 1 Company Name: STRAND TRUCKING

6. US EPA ID Number: ILD000646810

C. Illinois Tranporter's ID: 0027

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: IND01636828

G. Illinois Facility's ID: [illegible]

H. Facility's Phone: (219) 924-7350

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.	XX	WASTE, PAINT, FLAMMABLE LIQUID UN 1263	51	BRS	02805	GAL	EPA HW Number: [illegible] 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

I CERTIFY THAT I HAVE A PROGRAM IN PLACE TO REDUCE THE VOLUME AND TOXICITY OF WASTE GENERATED TO THE DEGREE I HAVE DETERMINED TO BE ECONOMICALLY PRACTICABLE AND I HAVE SELECTED THE METHOD OF TREATMENT, STORAGE, OR DISPOSAL CURRENTLY AVAILABLE TO ME WHICH MINIMIZES THE PRESENT AND FUTURE THREAT TO HUMAN HEALTH AND THE ENVIRONMENT.

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

Printed/Typed Name	Signature	Date Month Day Year
JIM DOLAN	[signature]	03 06 86

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month Day Year
JAMES BATTEN	James Batten	03 06 86

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name	Signature	Date Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name	Signature	Date Month Day Year
MICHAEL O. BURGE	Michael O. Burge	03 06 86

GENERATOR

TRANSPORTER

FACILITY

"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

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FACILITY COPY - PART 3

123 KT-63 ✓

010835

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

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Please print or type. (Form designed for use on elite (12-pitch) typewriter) Form Approved OMB No. 2000 0404 Expires 7 31 86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: ILD005098629
Manifest Document No.:
2. Page 1 of 1
Information in the shaded areas is not required by Federal law

3. Generator's Name: V. J. DOLAN & CO., INC
1830 N LARAMIE AVENUE
CHICAGO, ILLINOIS 60639
4. Generator's Phone (312) 237-0100

A. State Manifest Document Number: IN 090944
B. State Generator's ID:
C. State Transporter's ID: 0311
D. Transporter's Phone: 312-385-8440
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID:
H. Facility's Phone: 219-924-7360

5. Transporter 1 Company Name: STRAND TRUCKING
6. US EPA ID Number: ~~IND016780265~~ 000646810
7. Transporter 2 Company Name:
8. US EPA ID Number:
9. Designated Facility Name and Site Address: AMERICAN CHEMICAL SERVICE
420 S COLFAX
GRIFFITH, INDIANA 46319
10. US EPA ID Number: IND016360211

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. ~~NAXX~~ WASTE, PAINT, FLAMMABLE LIQUID	003	DRUMS	3465	GALS	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.

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

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

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

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: Harold F. Schmidt Signature: [illegible] Month Day Year 04 22 87

GENERATOR / TRANSPORTER / FACILITY

IN 090944

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

T.S.D. DETACH AND RETAIN THIS COPY

MRK 60-123R T63 B
3-204R T50 B

013559

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

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Please print or type. (Form designed for use on elite (12-pitch) typewriter) Form Approved OMB No. 2000 0404 Expires 7 31 86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: ILD005098629
Manifest Document No:
2. Page 1 of 1
Information in the shaded areas is not required by Federal law

3. Generator's Name: V. J. DOLAN & CO., INC
1830 N LARAMIE AVENUE CHICAGO, ILLINOIS 60639
4. Generator's Phone (312) 237-0100

A. State Manifest Document Number: IN 090945
B. State Generator's ID:
C. State Transporter's ID: 0311
D. Transporter's Phone:
E. State Transporter's ID: 385-8770
F. Transporter's Phone:
G. State Facility's ID:
H. Facility's Phone: (219) 924-7360

5. Transporter 1 Company Name: STRAND TRUCKING
6. US EPA ID Number: IL0000646810
7. Transporter 2 Company Name:
8. US EPA ID Number:
9. Designated Facility Name and Site Address: AMERICAN CHEMICAL SERVICE
420 S COLFAX
GRIFFITH, INDIANA 46319
10. US EPA ID Number: IND016360024

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, PAINT, FLAMMABLE LIQUID UN1263	072	DRUMS	03960	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.

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

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

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

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

19. Discrepancy Indication Space

20. Facility Owner or Operator. Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: HARRELD F Schmidt Signature: [illegible] Month Day Year: 07 24 87

GENERATOR / TRANSPORTER / FACILITY

IN 090945

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

T.S.D. DETACH AND RETAIN THIS COPY

70-123R 763 E
2-204R 750 E

013560

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.: ILD005098629
Manifest Document No.:
2. Page 1 of 1
Information in the shaded areas is not required by Federal law

3. Generator's Name
V. J. DODAN & CO., INC
1830 N LARAMIE AVE CHICAGO, ILLINOIS 60639

4. Generator's Phone (312) 237-0100

A. State Manifest Document Number: IN 090946
B. State Generator's ID: 0316110002

5. Transporter 1 Company Name: STRAND TRUCKING
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
AMERICAN CHEMICAL SERVICE
420 S COLFAX
GRIFFITH, INDIANA 46319
10. US EPA ID Number: IND016360 24
G. State Facility's ID:
H. Facility's Phone: 219-924-7360

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, PAINT, FLAMMABLE LIQUID UN1263	55	DRUMS	[illegible]	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.

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

Printed/Typed Name | Signature | Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials | Date

Printed/Typed Name | Signature | Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials | Date

Printed/Typed Name | Signature | Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name: HARROLD F Schmidt | Signature: Harold F Schmidt | Month Day Year: 09 21 97

IN 090946

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

55-123R T-63 9/25/87 A.S.D. DETACH AND RETAIN THIS COPY

013561

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: ILD005098629
Manifest Document No.:
2. Page 1 of 1
Information in the shaded areas is not required by Federal law

3. Generator's Name: V. J. DOLAN & CO., INC
1830 N LARAMIE AVENUE
CHICAGO, ILLINOIS 60639
4. Generator's Phone (312) 237-0100

A. State Manifest Document Number: IN 090943
B. State Generator's ID:

5. Transporter 1 Company Name: STRAND TRUCKING
6. US EPA ID Number: IND016780265
C. State Transporter's ID:
D. Transporter's Phone: (312) 385-8440

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

9. Designated Facility Name and Site Address: AMERICAN CHEMICAL SERVICE
420 S COLFAX
GRIFFITHM INDIANA 46319
10. US EPA ID Number: IND016360241
G. State Facility's ID:
H. Facility's Phone: (219) 924-7360

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, FLAMMABLE LIQUID UN1263	61	DRUMS	3355	GALS	XHH 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.

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

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Leonard M Strand
Signature: Leonard M Strand
Date: Month 01 Day 21 Year 87

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

19. Discrepancy Indication Space:

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

GENERATOR / TRANSPORTER / FACILITY

IN 090943

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

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MRK 48-125TR T63 B
13 204TR T50 B

013558

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.: ILD005098629
Manifest Document No.:
2. Page 1 of 1
Information in the shaded areas is not required by Federal law

3. Generator's Name: V.J. DOLAN & CO., INC
1830 N LARAMIE AVENUE CHICAGO, ILLINOIS 60639

A. State Manifest Document Number: IN 090947

4. Generator's Phone (312) 237-0100

B. State Generator's ID: 0316110002

5. Transporter 1 Company Name: STRAND TRUCKING
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: AMERICAN CHEMICAL SERVICE
420 S COLFAX
GRIFFITH, INDIANA 46319
10. US EPA ID Number: IND016360024
G. State Facility's ID:
H. Facility's Phone: 219-924-7360

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, FLAMMABLE LIQUID UN1263	64	DRUMS	3575	GAL	F005
b. DISPOSAL ONLY OH1263	1		55		F005
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

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

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

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

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

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

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: Harold F Schmidt Signature: [illegible] Month Day Year: 12 11 88

GENERATOR / TRANSPORTER / FACILITY

IN 090947

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

55(a) 123TR T-63 12/14/87
6(a) 204TR T-50 12/14/87

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1a - 204TR T50 3/1/88
2a - 204TR T50 6/10/88
1b - 204TR T50 6/10/88

013562

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. ILD005098629 — Manifest Document No.

2. Page 1 of 1

Information in the shaded areas is not required by Federal law

3. Generator's Name
V, J, DOLAN & CO., INC
1830 N LARAMIE AVENUE Chicago, Illinois 60639

4. Generator's Phone (312) 237-0100

A. State Manifest Document Number IN 090948

B. State Generator's ID

5. Transporter 1 Company Name
STRAND TRUCKING

6. US EPA ID Number IKI

C. State Transporter's ID 0211

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, INDIANA 46319

10. US EPA ID Number IND016360124

G. State Facility's ID

H. Facility's Phone 219-924-7360

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.
PAINT, FLAMMABLE LIQUID UN1263 CLASS 1B					
a. WASTEM PAINT, FLAMMABLE LIQUID UN1263	CH4	DRUMS	R14R2	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.

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 D.		11	11	88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Leonard M Strand	Leonard M Strand	12	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 in Item 19.

Printed/Typed Name	Signature	Month	Day	Year
HAROLD F. SCHMIDT	Harold F. Schmidt	12	2	88

IN 090948

A 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. I L D 0 0 5 0 9 8 6 2 9 — Manifest Document No.

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

3. Generator's Name: V. J. DOLAN & CO., INC

A. State Manifest Document Number: IN 090949

4. Generator's Phone: 1830 N LARAMIE CHICAGO, ILL 60639 (312) 237-0100

B. State Generator's ID:

5. Transporter 1 Company Name: STRAND TRUCKING

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: AMERICAN CHEMICAL SERVICE, 420 S COLFAX, GRIFFITH, IND 46319

10. US EPA ID Number: I N D 0 1 6 3 6 0 2 4

G. State Facility's ID:

H. Facility's Phone: (219) 924-7360

11. US DOT 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. PAINT, FLAMMABLE LIQUID UN1263 CLASS 1B WASTE, PAINT, FLAMMABLE LIQUID UN1263	001	DRUMS	00055	GAL	F005
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

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

15. Special Handling Instructions and Additional Information

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

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: 01 12 88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: [illegible] STRAND | Signature | 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 Item 19.

Printed/Typed Name: [illegible] | Signature | Month Day Year: 01 12 88

IN 090949

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

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10-126TL3X8
47-126TL63X8 47-304K130X8

U14934

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.: ILD005098629
Manifest Document No.:
2. Page 1 of
Information in the shaded areas is not required by Federal law

3. Generator's Name
V. J. DOLAN & CO., INC
1830 N LARAMIE AVENUE
CHICAGO, ILLINOIS 60639 (312) 237-0100

A. State Manifest Document Number: IN 090950
B. State Generator's ID:

5. Transporter 1 Company Name: STRAND TRUCKING
6. US EPA ID Number:
C. State Transporter's ID:
D. Transporter's Phone:

7. Transporter 2 Company Name: ~~XXXXXXXXXXXXXXXXXXXXXXXXXXXX~~
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 46219
10. US EPA ID Number: IND016360 24
G. State Facility's ID:
H. Facility's Phone: (219) 924-7360

11. US DOT Description (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, FLAMMABLE LIQUID UN1263	44	DRUMS	2420	BAL	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.

Printed/Typed Name: James Dolan
Signature: [signature]
Month Day Year: 07 [illegible] [illegible]

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

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

19. Discrepancy Indication Space
3-204TK TSO 8/3/88

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19
Printed/Typed Name: FRANK PRICE
Signature: Frank Price
Month Day Year: 8 1 88

GENERATOR / TRANSPORTER / FACILITY

IN 090950

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

41-126TKT63 8/2/88

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014940

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 5 0 9 8 6 8 9 — Manifest Document No.

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

3. Generator's Name
V. J. DOLAN & CO., INC
1830 N LARAMIE AVE CHICAGO, ILL 60639

4. Generator's Phone (312) 237-0100

A. State Manifest Document Number IN 090951

B. State Generator's ID 0316110002

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 0211

7. Transporter 2 Company Name — 8. US EPA ID Number — D. Transporter's Phone 312-385-8440 — E. State Transporter's ID — F. Transporter's Phone

9. Designated Facility Name and Site Address
AMERICAL CHEMICAL SERVICE
420 S COLFAX
GRIFFITH, IND 46219 — 10. US EPA ID Number: I N D 0 1 6 3 6 0 2 4 — G. State Facility's ID — H. Facility's Phone (219) 924-7360

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE, PAINT, FLAMMABLE LIQUID UN1263	15	DRUMS	12360	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.

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Printed/Typed Name: Jim D. [illegible] — Signature — Month Day Year: 10 03 88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: THOMAS STRAND — Signature — Date: Month 10 Day 03 Year 88

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

FACILITY

19 Discrepancy Indication Space
47-12 RT 63 10/6
T-204 RT 50 10/6

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 — Month 10 Day 06 Year 88

IN 090951

EPA Form 8700-22A (Rev. 11-85) — UI/WM 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.: ILD005098629
Manifest Document No.:
2. Page 1 of 1
Information in the shaded areas is not required by Federal law

3. Generator's Name: V. J. DOLAN & CO., INC
1830 N LARAMIE AVENUE CHICAGO, ILLINOIS 60639

4. Generator's Phone (312) 23700100

A. State Manifest Document Number: IN 090952

B. State Generator's ID: 0316110002

5. Transporter 1 Company Name: STRAND TRUCKING
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: AMERICAN CHEMICAL SERVICE
420 S COLFAX
GRIFFITH, IND 46219
10. US EPA ID Number: IND016360024
G. State Facility's ID:
H. Facility's Phone: 219-924-7360

11. US DOT Description (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, FLAMMABLE LIQUID UN1263	55	DRUMS	3030	GAL	F005
b. WASTE OIL	01	DM	55	GAL	
c.					
d.					

J. Additional Descriptions for Materials Listed Above:
K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information:

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

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

Printed/Typed Name: [illegible]
Signature:
Month Day Year: 11 21 [illegible]

11/30

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

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

19. Discrepancy Indication Space:

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: A. Whitaker
Signature: A. Whitaker
Month Day Year: 11 30 [illegible]

IN 090952

EPA Form 8700-22A (Rev. 11-85)

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UHWM 2/LP2

43 PAILS (253 GAL) ASHCROFT 3/1/89 [illegible]

014942

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.: ILD005098629
Manifest Document No.:
2. Page 1 of: 1
Information in the shaded areas is not required by Federal law

3. Generator's Name: V. J. DOLAN & CO., INC
1830 N LARAMIE
CHICAGO, ILLINOIS 60639

4. Generator's Phone:

A. State Manifest Document Number: IN 090953

B. State Generator's ID: 0316110002

5. Transporter 1 Company Name: MR FRANK INC.
6. US EPA ID Number: ILD069506160

C. State Transporter's ID: 0079

D. Transporter's Phone: 1800 416 7549

7. Transporter 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, INDIANA 46219
10. US EPA ID Number: IND016360 24

G. State Facility's ID:

H. Facility's Phone: (219) 924-7360

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, FLAMMABLE LIQUID UN1263	001	TT	2110	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.

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: James Dolan
Signature:
Month Day Year: 01 30 87

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Joaquin Garcia
Signature:
Date: Month Day Year: 01 30 87

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

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: F DUNFEE
Signature: F Dunfee
Month Day Year: 01 30 87

GENERATOR

TRANSPORTER

FACILITY

IN 090953

EPA Form 8700-22A (Rev. 11-85)

UHWM 2/LP2

123 ZT63 /30

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...PARTMENT OF ENVIRONMENTAL MANAGEMENT
...F SOLID AND HAZARDOUS WASTE MANAGEMENT
...ox 7035
...dianapolis, IN 46207-7035

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.
I L D 0 0 5 0 9 8 6 2 9			

3. Generator's Name and Mailing Address
V. J. DOLAN & CO., INC
1830 N LARAMIE AVENUE CHICAGO, ILL 60639

4. Generator's Phone (312) 237-0100

A. State Manifest Document Number INA 0224420

B. State Generator's ID 0316110002

5. Transporter 1 Company Name	6. US EPA ID Number	C. State Transporter's ID	D. Transporter's Phone
MR FRANK	I L D 0 6 9 5 0 6 1 6 0	0079	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	10. US EPA ID Number	G. State Facility's ID	H. Facility's Phone
AMERICAN CHEMICAL 420 S COLFAX GRIFFITH, INDIANA 46319	I N D 0 1 6 3 6 0 2 6 5	9188090002	1-219-768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt./Vol.	I. Waste No.
a. WASTE, PAINT, FLAMMABLE LIQUID UN1263	001	TT	2,000	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 present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good 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
		03	14	89

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
RICK WHITE		03	14	89

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

19. Discrepancy Indication Space

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

Printed/Typed Name	Signature	Month	Day	Year
DUNFEE		03	14	89

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

12RT63/K

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 0224420

0017581

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 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.: ILD005098629
Manifest Document No.:
2. Page 1 of 18
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
V. J. DOLAN & CO., INC
1830 N LARAMIE AVENUE
CHICAGO, ILLINOIS 60639
4. Generator's Phone (312) 237-0100

A. State Manifest Document Number: INA 0347667
B. State Generator's ID:

5. Transporter 1 Company Name: MR FRANK'S, INC.
6. Use EPA ID Number: ILD069506160
C. State Transporter's ID: 0079
D. Transporter's Phone: 596-3377

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

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL
420 S COLFAX
GRIFFITH, INDIANA 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: 1-219-768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE, PAINT, FLAMMABLE LIQUID UN1263	001	TT	02200	G 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 present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good 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: Tim Dolan
Signature: [signature]
Date: Month / Day / Year

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Scott Kostelyk
Signature: [signature]
Date: Month 05 Day 04 Year 89

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

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19
Printed/Typed Name: FDUNFEE
Signature: FDunfee
Date: Month 05 Day 09 Year 89

GENERATOR / TRANSPORTER / FACILITY

INA0347667

Please 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)

12[illegible]

COPY 5. TSD COPY

0017582

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 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 0 9 8 6 2 9 — Manifest Document No. — 2. Page 1 of 1 — Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
V. J. DOLAN & CO., INC
1830 N LARAMIE AVENUE
CHICAGO, ILLINOIS (312) 237-0100

4. Generator's Phone

A. State Manifest Document Number: INA 0347668
B. State Generator's ID: 0316110002

5. Transporter 1 Company Name: MR FRANK'S
6. Use EPA ID Number: I L D 0 6 9 5 0 6 1 6 0
C. State Transporter's ID: 0079
D. Transporter's Phone: 312 720-0700

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

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
820 S COLFAX
GRIFFITH, INDIANA 46319
10. Use EPA ID Number: I N D 0 1 6 3 6 0 2 6 5
G. State Facility's ID: 918089002
H. Facility's Phone: 1-219-768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE, PAINT, FLAMMABLE LIQUID	001	TT	02275	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.

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Printed/Typed Name: [illegible] — Signature: [illegible] — Month: 07 Day: [illegible] Year: [illegible]

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: SCOTT Kostelyk — Signature: [illegible] — Month: 07 Day: 06 Year: 89

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

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: F DUNFEE — Signature: F Dunfee — Month: 07 Day: 06 Year: 89

GENERATOR — TRANSPORTER — FACILITY

INA0347668

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)

123RT63 7/6

COPY 5. TSD COPY

0017563

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 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.: ILD005098629 — Manifest Document No.: 00000
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address:
V. J. DOLAN & CO., INC
1830 N LARAMIE AVENUE
CHICAGO, ILLINOIS

4. Generator's Phone ( ) 312-237-0100

A. State Manifest Document Number: INA 0347669
B. State Generator's ID: 0316110002

5. Transporter 1 Company Name: MR FRANK'S
6. Use EPA ID Number: ILD069506160
C. State Transporter's ID: 0079
D. Transporter's Phone: 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
820 S COLFAX
GRIFFITH, INDIANA 46319
10. Use EPA ID Number: IND016360265
G. State Facility's ID: 918089002
H. Facility's Phone: 219-768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE, PAINT, FLAMMABLE LIQUID	001	TT	02300	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.

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

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: CARL T JUNGER — Signature: [signature] — Date: Month 08 Day 25 Year 89

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

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: FDUNFEE — Signature: FDunfee — Date: Month 08 Day 25 Year 89

GENERATOR / TRANSPORTER / FACILITY

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

INA0347669

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

123R T63 8/25/89

COPY 5. TSD COPY

0017584

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 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·0·0·5·0·9·8·6·2·9 | Manifest Document No.: 0·0·0·0·0 | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
V. J. DOLAN & CO., INC
1830 N LARAMIE AVENUE
CHICAGO, ILLINOIS 60639

4. Generator's Phone (312 237-0100)

A. State Manifest Document Number: INA 0347670

B. State Generator's ID: 0316110002

5. Transporter 1 Company Name: MR FRANK'S INC | 6. Use EPA ID Number: I L D 9 8 4 7 7 5 0 4 9 | C. State Transporter's ID: 0074 | D. Transporter's Phone: 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
820 S COLFAX
GRIFFITH, INDIANA 46319

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

G. State Facility's ID: 918089002

H. Facility's Phone: (219) 768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE, PAINT, FLAMMABLE LIQUID UN 1263 F005	001	TT	02100	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.

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GENERATOR — Printed/Typed Name: Jim Dolan | Signature | Date Month 10 Day 18 Year 89

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: RICH WHITE | Signature | Date Month 10 Day 18 Year 89

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

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.
Printed/Typed Name: FDUNFEE | Signature | Month 10 Day 18 Year 89

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

COPY 5. TSD COPY

123T63 19/5

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

INA0347670

0017585

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 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 8 8 6 2 9 — Manifest Document No. 0 0 0 0 1

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
V. J. DOLAN & CO., INC
1830 N LARAMIE AVENUE
CHICAGO, ILLINOIS 60639

A. State Manifest Document Number: INA 0347671

4. Generator's Phone (312) 237-0100

B. State Generator's ID: 0316110002

5. Transporter 1 Company Name: MR FRANK'S, 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: 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
820 S COLFAX
GRIFFITH, INDIANA 46319

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

G. State Facility's ID: 918089002

H. Facility's Phone: (219) 768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE, PAINT, FLAMMABLE LIQUID UN1263 F005	001	TT	02.665	G	F005
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

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Printed/Typed Name: James M. Dolan — Signature — Date: Month / Day / Year

GENERATOR

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: JACK McCLEVERTY — Signature — Date: Month 12 Day 14 Year 89

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Date: 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: F DUNFEE — Signature — Date: Month 12 Day 14 Year 89

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

COPY 5. TSD COPY 123TC63 12/14

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

INA 0347671

00175R6

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 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.: ILD005098629
Manifest Document No.: 0000.1
2. Page 1 of 1
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
V. J. DOLAN & CO., INC
1830 N LARAMIE AVENUE
CHICAGO, ILLINOIS 60639
4. Generator's Phone (312) 237-0100

A. State Manifest Document Number: INA 0347672
B. State Generator's ID: 0316 11 0002
C. State Transporter's ID: 0079
D. Transporter's Phone: 708-720-0700
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID:
H. Facility's Phone: (312) 768-3460

5. Transporter 1 Company Name: MR ~~XXXX~~ FRANK'S
6. Use EPA ID Number: ILD098477504
7. Transporter 2 Company Name:
8. Use EPA ID Number:
9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
820 S COLFAX
GRIFFITH, INDIANA 46319
10. Use EPA ID Number: IND016360265

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE, PAINT, FLAMMABLE LIQUID UN1263 F005	001	TT	02100	G	F005
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

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Printed/Typed Name: JIM DOLAN
Signature: [signature]
Date: Month 02 Day 14 Year 90

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JON Porter
Signature: [signature]
Date: Month 02 Day 14 Year 90

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

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: F DUNFEE
Signature: F Dunfee
Month 02 Day 14 Year 90

GENERATOR / TRANSPORTER / FACILITY

INA0347672

Please 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

123 FCT 63 2/14

0017657

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 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 0 9 8 6 2 9 | Manifest Document No.: 0 0 0 1
2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address:
T. U. BOLAN & CO., INC
1830 N LARAMIE AVENUE
CHICAGO, ILLINOIS 60639

4. Generator's Phone (312) 237-0100

A. State Manifest Document Number: INA 0347673
B. State Generator's ID: 0316110002

5. Transporter 1 Company Name: MR. FRANK'S INC.
6. Use EPA ID Number: I L D 0 9 8 4 7 7 5 0 4 9
C. State Transporter's ID: 0079
D. Transporter's Phone: 708-720-0700

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

9. Designated Facility Name and Site Address:
AMERICAN CHEMICAL SERVICE
420 S. COLFAX AVE.
GRIFFITH, INDIANA 46319
10. Use EPA ID Number: I N D 0 1 6 3 6 0 2 6 5
G. State Facility's ID: 9180890002
H. Facility's Phone: (312) 768-3460

11. US DOT Description (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, FLAMMABLE LIQUID F005 UN 1263 (F005)	001	TT	02500	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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GENERATOR — Printed/Typed Name: Jim Dolan | Signature | Date: Month 04 Day 11 Year 90

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials — Printed/Typed Name: MIGUEL GARCIA | Signature | Date: Month 04 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 in Item 19.
Printed/Typed Name: F DUNFEE | Signature: F Dunfee | Month 04 Day 19 Year 90

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

123 FCT 63 4/11

COPY 5. TSD COPY

0017658

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 0347673

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

0857093 (1–7)

Authorization Number N/A (8–13)

V.W.R SCIENTIFIC (Company Name) | 800 E. FABYAN PKY. (Address) | 312 879 0600 (Phone Number) | (14) Generator Number (24) G

BATAVIA (City) | ILLINOIS (State) | 60510 (Zip) | ILD 039617337 (EPA Number)

WASTE HAULER(S)

MR. FRANK, INC (Hauler Name) | 201 W. 155TH ST. SO. HOLLAND, ILL. (Hauler Address) | 312 596 3377 (Phone Number) | S.W.H. Registration Number 0079030 (25–31) | ILD069506160 (EPA Number)

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERV. (Facility Name) | COLFAX AVE AT C.&O. R.R. (Address) | 918089 02 (39–46) Site Number

GRIFFITH (City) | INDIANA (State) | 46319 (Zip) | 312 768 3400 (Phone Number) | ILD016360265 (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 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 FLAMMABLE LIQUID, N.O.S. FLAMMABLE LIQ. | HAZARD CLASS: UN1993 (UN or NA Number) | D001 (EPA HW Number)

WEIGHT FOR D.O.T. USE ~700 LBS/TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: (47) 100 (52) | 1 GALLONS (Circle One) 2 CU. YDS. 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS 2 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] FOR V.W.R. (Authorized Signature) DATE: 12-27-83

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) Tony Grad (Authorized Signature) DATE: 12/27/83 (54–59)

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

[signature] (Authorized Signature) DATE: 12/28/83 (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 / 426-26

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

TO204 RT-50 GRM 12-28-83

006253

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

0947351

Authorization Number

VWR Scientific, Inc. (Company Name)	800 E. Fabyan Pkwy. (Address)	3 1 2 8 7 9 0 600 (Phone Number)	Generator Number
Batavia (City)	Illinois (State)	60510 (Zip)	I L D 0 3 9 6 1 7 3 3 7 (EPA Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name)	201 W. 155th St. (Hauler Address)		S.W.H. Registration Number 0 0 7 9 / 0 2 4
	South Holland, IL 60473	3 1 2 5 9 6 3 3 7 7 (Phone Number)	I L D 0 6 9 5 0 6 1 6 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)	Colfax Ave. at C & O R.R. (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 3 6 0 2 6 5 (EPA Number)
Alternate (Facility Name)	Address			Site Number
City	State	Zip	Phone Number	EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Laboratory 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 Flammable Liq., NOS Flammable Liquid

HAZARD CLASS: U N 1 9 9 3 (UN or NA Number) D 0 0 1 (EPA HW Number)

WEIGHT FOR D.O.T. USE 700 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 0 9 5 (1) GALLONS (Circle One) 2 CU. YDS.

METHOD OF SHIPMENT (Circle One) (DRUMS 2 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] FOR VWR (Authorized Signature) DATE: 3-27-84

WASTE HAULER

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

(1) [signature] (Authorized Signature) DATE: 03/27/84

(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:

[signature] (Authorized Signature) DATE: 3/29/84

COMMENTS OR SPECIAL INSTRUCTIONS:

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

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

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

REV. # 4

SITE COPY - PART 3

TO204 ET-50 ORM 7.29.84

006790

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 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 3 9 6 1 7 3 3 7
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
V.W.R. SCIENTIFIC
800 E. FABYAN PARKWAY, BATAVIA, IDL., 60510
4. Generator's Phone (312) 879-0600

A. State Manifest Document Number: INA 0370201
B. State Generator's ID: IL. GEN # 0890105025

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: IL. # 0079
D. Transporter's Phone: (312)-720-0700

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

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICES., INC.
420 SOUTH COLFAX AVENUE
GRIFFITH, INDIANA 46319
10. Use EPA ID Number: I N D 0 1 6 3 6 0 2 6 5
G. State Facility's ID: IL. # 9180890002
H. Facility's Phone: (219)-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. RQ., WASTE FLAMMABLE LIQUID., N.O.S. FLAMMABLE LIQUID UN 1993 (D001)	0 0 3	D M	0 0 1 4 5	G	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
11A. THE WASTE LISTED IN 11A. CONTAINES MIXED HYDROCARBONS & CHLORINATED SOLVENTS FROM LABORATORY CHEMICALS.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

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

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

Printed/Typed Name: [illegible] Signature: [illegible] Date: Month 07 Day 31 Year 89

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: CARL E PROSSER Signature: Carl E Prosser Date: Month 07 Day 31 Year 89

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

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: WHITAKER A Signature: [illegible] Date: Month 7 Day 31 Year 89

GENERATOR / TRANSPORTER / FACILITY

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

INA 0370201

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

204 RTSO 8/

COPY 5. TSD COPY

0016570

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 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.: ILD039617337
Manifest Document No.: 00000
2. Page 1 of 1
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address: VWR SCIENTIFIC INC, 800 E. FABYAN PKWY, BATAVIA, IL 60510
4. Generator's Phone: 708 879 0600

A. State Manifest Document Number: INA 0315945
B. State Generator's ID: 0890105025

5. Transporter 1 Company Name: MR FRANK INC
6. Use EPA ID Number: ILD984775049
C. State Transporter's ID: 0079
D. Transporter's Phone: 708 720 0700

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

9. Designated Facility Name and Site Address: AMERICAN CHEMICAL SERVICES, 420 SO. COLFAX, GRIFFITH IND.
10. Use EPA ID Number: IND016360265
G. State Facility's ID: 9180890002
H. Facility's Phone: 219 924 4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE FLAMMABLE LIQUID, N.O.S. FLAMMABLE LIQUID UN 1993	002	DM	00110	1	D001 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: Earl Andersen
Signature: Earl Andersen
Date: Month / Day / Year

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: CARL E. MILBURN
Signature: Carl E. Milburn
Date: Month 12 Day 20 Year 89

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

19. Discrepancy Indication Space:

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: WHITAKER H
Signature: Alvin Whitaker
Date: Month 12 Day 15 Year 89

GENERATOR / TRANSPORTER / FACILITY

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

INA 0315945

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

204 TCTSD 7/28

COPY 5. TSD COPY

0016572

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 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 0 9 6 1 7 3 3 7 | Manifest Document No. 5 9 8 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
VWR Scientific
800 E. Fabyan Pkwy. Batavia, IL. 60510

A. State Manifest Document Number: INA 0315981

B. State Generator's ID: ILD089010505O25

4. Generator's Phone (312 1879-1100

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

6. Use EPA ID Number: I L D 0 6 9 5 0 6 2 6 0

C. State Transporter's ID: ILL # 0079

D. Transporter's Phone: 312-720-0700

7. Transporter 2 Company Name

8. Use EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICES., INC.
420 SOUTH COLFAX AVENUE.,
GRIFFITN, INDIANA 46319

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

G. State Facility's ID

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

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE FLAMMABLE LIQUID., N.O.S., UN 1993	002	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: Robert J. Klasing | Signature: Robert J. Klasing | Date: Month 0 2 Day 1 7 Year 9 4

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: SON Porter | Signature | Date: Month 0 2 Day 1 7 Year 9 4

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Date: Month . Day . 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: W. HAKOR H | Signature | Date: Month Day Year 0 2 28 94

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

COPY 5. TSD COPY 204TCTSD 2/23

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 0315981

00:657 1

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. 0 R D 0 1 8 3 4 1 4 2 0 — Manifest Document No. Small Quantity Generator 9 1 8 3 1

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

3. Generator's Name
Valiton Motors Inc.
4757 Monroe St., Toledo, OH 46323
4. Generator's Phone (419) 473-1521

A. State Manifest Document Number IN 091831

B. State Generator's ID

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

C. State Transporter's ID

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
420 S. Colfax Ave.
Griffith, IN 46319

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

G. State Facility's ID

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

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 Paint Related Material Flammable Liquid NA 1263	2	DM	110 gal	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
		07	08	87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
David Kuilema	David Kuilema	07	08	87

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

19 Discrepancy Indication Space

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

Printed/Typed Name	Signature	Month	Day	Year
HAROLD F. Schmidt	Harold F. Schmidt	07	14	87

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

T.S.D. DETACH AND RETAIN THIS COPY 2-126R T63 B

IN 091831

012275

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 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 5 3 5
Manifest Document No.: 8 9 4 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
VALLEY CITY SIGN
5009 West River Rd., Comstock Park, MI 49321
4. Generator's Phone (616) 784-5711

A. State Manifest Document Number: INA 0189434
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 (F003) Flammable Liquid NA1263	3	D M	150	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: Russell Kellerito
Signature: Russell Kellerito
Month: 02 Day: 17 Year: 88

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Roger Norton
Signature: Roger Norton
Month: 02 Day: 17 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: Harold F. Schmidt
Signature: Harold F. Schmidt
Month: 02 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.

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865 3-2017 T-50 2/22/88

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

INA 0189434

0015117

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 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 3 5 3 5	Manifest Document No. 5 5 5 5	2. Page 1 of 1	Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Valley City Sign
5009 West River Rd, Comstock Park MI 49321

4. Generator's Phone (616) 784 - 5711

A. State Manifest Document Number: INA 0355955

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 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. Waste Paint Related Material Flammable Liquid NA1263 (F003)	2	D N	1 1 0	G	F 0 0 3
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, 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
MARY GASPER	Mary Gasper	0 3	0 9	9 0

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year
Roger Nitta	Roger Nitta	0 3	0 9	9 0

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year

FACILITY

19. Discrepancy Indication Space

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

Printed/Typed Name	Signature	Month	Day	Year
STEVE KULAVICK	Steve Kulavick	0 3	0 9	9 0

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

INA0355955

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

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2047CT50 3/12

0018150

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 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 C 0 0 0 0 0 1 8 5 3 5	5 5 9 6 8		

GENERATOR

3. Generator's Name and Mailing Address
Valley City Sign
5009 West River Rd, Comstock Park MI 49321

4. Generator's Phone (616) 784-5711

A. State Manifest Document Number: INA 0355968

B. State Generator's ID:

TRANSPORTER

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:

FACILITY

9. Designated Facility Name and Site Address
American Chemical Service
420 S. Colfax, PO Box 199
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 NA1263 (F003)	1	D.M	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.

Printed/Typed Name	Signature	Date Month	Day	Year
Russell Pellerito	Russell Pellerito	04	17	90

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year
Roger Norton	Roger Norton	04	17	90

18 Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year

FACILITY

19 Discrepancy Indication Space

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

Printed/Typed Name	Signature	Date Month	Day	Year
STEVE KUIAVICK	Steve Kuiavick	04	20	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.

INA0355968

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

204TCTSD 4/92

0018151

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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.: M.I.G.0.0.0.0.1.8.5.3.5 | Manifest Document No.: 5.5.9.9.5 | 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
Valley City Sign
5009 West River Rd, Comstock Park MI 49321
4. Generator's Phone (616) 784-5711

A. State Manifest Document Number: INA 0355995
B. State Generator's ID:

5. Transporter 1 Company Name: VALLEY CITY REFUSE DISPOSAL, INC.
6. Use EPA ID Number: M.I.D.9.8.1.9.5.6.0.6.3
C. State Transporter's ID:
D. Transporter's Phone: (616) 235-1500

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

9. Designated Facility Name and Site Address
American Chemical Service
420 S. Colfax, PO Box 190
Griffith IN 46319-1090
10. Use EPA ID Number: I.N.D.0.1.6.3.6.0.2.6.5
G. State Facility's ID:
H. Facility's Phone: (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. Waste Paint Related Material Flammable Liquid NA1263 (F003)	2	D.M	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.

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GENERATOR — Printed/Typed Name: Karen Cleveland | Signature: Karen Cleveland | Date: Month 07 Day 14 Year 90

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Roger Norton | Signature: Roger Norton | Date: Month 07 Day 14 Year 90
18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: | Signature: | Date: Month . Day . Year .

FACILITY
19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted item 19.
Printed/Typed Name: STEVE KULWICK | Signature: Steve Kulwick | Date: Month 07 Day 20 Year 90

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

COPY 5. TSD COPY

0018152

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.

INA0355995

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.: MIG000018535 — Manifest Document No.: 37979
2. Page 1 of 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
Valley City Sign
5009 West River Rd, Comstock Park MI 49321

4. Generator's Phone (616) 784-5711

A. State Manifest Document Number: INA 0437979
B. State Generator's ID:

5. Transporter 1 Company Name: VALLEY CITY REFUSE DISPOSAL, INC.
6. Use EPA ID Number: MLD981956063
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: LND016360265
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 (F003)	1	DM	55	G	F003
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above:
K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information:

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

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Printed/Typed Name: Karen Cleveland — Signature: Karen Cleveland — Date: Month 09 Day 14 Year 90

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Roger Norton — Signature: Roger Norton — Date: Month 09 Day 14 Year 90

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

19. Discrepancy Indication Space:

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: Whitaker A — Signature: A Whitaker — Date: Month 8 Day 17 Year 90

GENERATOR / TRANSPORTER / FACILITY

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

INA 0437979

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

219-78[illegible]

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0018153

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.: M·I·G·0·0·0·0·0·1·6·7·0
Manifest Document No.: 0·0·0·2·4
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
VALLEY PLASTICS CORPORATION
3140 East Kilgore, Kalamazoo, MI 49002
4. Generator's Phone (616) 381-5536

A. State Manifest Document Number: INA 0157775
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·0·0·6·0·2·8·4·9·2
7. Transporter 2 Company Name:
8. Use EPA ID Number:

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE INC.
420 S. Colfax
Griffith, IN 46319
10. Use EPA ID Number: I·N·D·0·1·6·3·6·0·2·6·5

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. PAINT SOLVENTS - NA-1263	04	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.

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

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: CARL EVANS | Signature | Date Month 04 Day 25 Year 89

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

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: HARROLD F. SCHMIDT | Signature | Date Month 04 Day 25 Year 89

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

INA 0157775

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 TSD 4/26

0015118

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

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: M-I-D-0-4-7-1-5-2-7-1-5
Manifest Document No.: 0-0-0-2-8
2. Page 1 of 1
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
VALLEY PLASTICS CORPORATION
3140 East Kilgore, Kalamazoo, MI 49002

4. Generator's Phone (616) 381-5536

A. State Manifest Document Number: INA 0157777
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-0-0-6-0-2-8-4-9-2
7. Transporter 2 Company Name
8. Use EPA ID Number
9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE INC.
420 S. Colfax
Griffith, IN 46319
10. Use EPA ID Number: I-N-D-0-1-6-3-6-0-2-6-5

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. PAINT SOLVENTS - NA-1263	3	D.M	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

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Printed/Typed Name: NORA J BROWN
Signature: [signature]
Month: 8 Day: 5 Year: 88

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: KEITH SAVAGOOL
Signature: [signature]
Month: 08 Day: 06 Year: 88

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: KEITH SAVAGOOL
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: FRANK PRICE
Signature: Frank Price
Month: 8 Day: 5 Year: 88

GENERATOR / TRANSPORTER / FACILITY

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

INA 0157777

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

0015119

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. M I D 0 4 7 1 5 2 7 1 5 | Manifest Document No. 0 0 0 3 1 | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
VALLEY PLASTICS CORPORATION
3140 East Kilgore, Kalamazoo, MI 49002
4. Generator's Phone (616) 381-5536

A. State Manifest Document Number: INA 0111185
B. State Generator's ID:

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:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE INC.
420 S. Colfax
Griffith, IN 46319
10. Use EPA ID Number: I N D 0 0 1 6 3 6 0 2 6 5
G. State Facility's ID:
H. Facility's Phone:

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. PAINT SOLVENTS - NA-1263	0 0 1	D M	0 0 0 5 5	G	F 003
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

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GENERATOR — Printed/Typed Name: [illegible] Signature: [signature] Date: Month 1 1 Day 0 7 Year 8 8

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Stewart Squires Signature: Stewart Squires Date: Month 11 Day 7 Year 88
18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: BILL PIERANTOZZI Signature: [signature] Date: Month 11 Day 07 Year 88

FACILITY
19. Discrepancy Indication Space
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: A. WHITAKER Signature: [signature] Date: Month 11 Day 17 Year 88

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

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

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

204 TO TSD 11/3/88

INA 0111185

0015120

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 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·047·1·5·2·7·1·5· Manifest Document No.: 0·0·0·3·2
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
VALLEY PLASTICS CORPORATION
3140 East Kilgore, Kalamazoo, MI 49002

4. Generator's Phone (616) 381-5536

A. State Manifest Document Number: INA 0111186
B. State Generator's ID:
C. State Transporter's ID:
D. Transporter's Phone: 616-361-6691
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID:
H. Facility's Phone: 219-924-4370

5. Transporter 1 Company Name: Haviland Products
6. Use EPA ID Number: M·I·D·0·0·6·0·2·8·4·9·2
7. Transporter 2 Company Name:
8. Use EPA ID Number:
9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE INC.
420 S. Colfax
Griffith, IN 46310
10. Use EPA ID Number: I·N·D·0·1·6·3·6·0·2·6·5

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. Waste Related Material PAINT ~~SOLVENTS~~ - NA-1263 Placarded Flammable Liquid Flammable NA1263	002	D·M	110	G	F 003
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

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Printed/Typed Name: [illegible] Hanson
Signature: [illegible]
Date: Month 03 Day 11 Year 89

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Stewart L. Squires
Signature: Stewart L. Squires
Date: Month 3 Day 11 Year 89

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

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: STEVE KULAVICK
Signature:
Date: Month 04 Day 10 Year 89

GENERATOR / TRANSPORTER / FACILITY

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INA 0111186

EPA Form 8700-22 (Rev. 9-86)
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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 50 4/12

0016567

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 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.: MID047152715
Manifest Document No.: 000 · 33
2. Page 1 of 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
VALLEY PLASTICS CORPORATION
3140 East Kilgore, Kalamazoo, MI 49002

4. Generator's Phone (616) 881-5536

A. State Manifest Document Number: INA 0111187
B. State Generator's ID:
C. State Transporter's ID:
D. Transporter's Phone: (616) 361-6691
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID:
H. Facility's Phone: (219) 924-4370

5. Transporter 1 Company Name: Haviland Products
6. Use EPA ID Number: MID006028492
7. Transporter 2 Company Name:
8. Use EPA ID Number:
9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE INC.
420 S. Colfax / P.O. Box 190
Griffith, IN 46310
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. PAINT SOLVENTS - NA-1263	4	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.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good 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: Noel J. Brown
Signature: [signature]
Date: Month 07 Day 12 Year 89

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Stewart L. Squires
Signature: [signature]
Date: Month 07 Day 12 Year 89

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

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: STEVE KULAVICK
Signature: Steve Kulavick
Date: Month 07 Day 12 Year 89

GENERATOR / TRANSPORTER / FACILITY

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

INA 0111187

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

0016568

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 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.: MID047152715 — Manifest Document No.: 90036
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
VALLEY PLASTICS CORPORATION
3140 East Kilgore Rd., Kalamazoo, MI 49002

4. Generator's Phone (616) 381-5536

A. State Manifest Document Number: INA 0111188
B. State Generator's ID:
C. State Transporter's ID:
D. Transporter's Phone: (616) 361-6691
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID:
H. Facility's Phone: (219) 924-4370

5. Transporter 1 Company Name: HAVILAND PRODUCTS
6. Use EPA ID Number: MID006028492
7. Transporter 2 Company Name:
8. Use EPA ID Number:
9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE INC.
420 S. Colfax / P.O. Box 190
Griffith, IN 46319
10. Use EPA ID Number: IND016960265

11. US DOT Description (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 SOLVENTS - NA-1263	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.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good 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: Norm J. Brown — Signature: [signature] — Date: Month 09 Day 28 Year 89

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Bill Pierantoni — Signature: [signature] — Date: Month 10 Day 13 Year 89

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: [illegible] — Signature: [signature] — Date: Month 10 Day 13 Year 89

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: Whitaker A — Signature: [signature] — Date: Month 10 Day 13 Year 89

GENERATOR / TRANSPORTER / FACILITY

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

INA 0111188

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

0016569

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

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. M.I.D.0.4.7.1.5.2.7.1.5 — Manifest Document No. 0.0.0.4.1
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
VALLEY PLASTICS CORPORATION
3140 East Kilgore Rd., Kalamazoo, MI 49002
4. Generator's Phone (616) 381-5536

A. State Manifest Document Number: INA 0248842
B. State Generator's ID:

5. Transporter 1 Company Name: RAVILAND 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: (616) 361-6681

7. Transporter 2 Company 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 / P.O. Box 190
Griffith, IN 46319
10. Use EPA ID Number: I.N.D.0.1.6.3.6.0.2.6.5
G. State Facility's ID:
H. Facility's Phone: (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE PAINT SOLVENTS - NA-1263	6	DM	330	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: NORA J. BROWN — Signature: Nora J. Brown — Date: Month 0 2 Day 1 3 Year 8 9

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JAMES GARY — Signature: James Gary — Date: Month 12 Day 13 Year 89
18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: BILL PIERANTONI — Signature: Bill Pierantoni — Date: Month 01 Day 08 Year 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: STEVE KULNICK — Signature: Steve Kulnick — Date: Month 01 Day 08 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 0248842

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

0018154

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 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.: EXEMPT
Manifest Document No.: 4.0.4.5.8
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
VALPARAISO UNIVERSITY
1500 EAST LINCOLNWAY., VALPARAISO, IN 46383
4. Generator's Phone (219) 464-5130

A. State Manifest Document Number: INA 0346458
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: 312-720-0700

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.0.1.6.3.6.0.2.6.5
G. State Facility's ID:
H. Facility's Phone: (219)-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE FLAMMABLE LIQUID., N.O.S. FLAMMABLE LIQUID UN 1993 (D001)	001	DM	00055	G	D001
b. NON-HAZARDOUS WASTE STREAM LIQUID (WASTE OIL)	002	DM	00110	G	NONE
c.					
d.					

J. Additional Descriptions for Materials Listed Above:
K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information:

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

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

Printed/Typed Name: Richard D. McNamara
Signature: [signature]
Date: Month 05 Day 05 Year 89

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: CARL T JUNGER
Signature: Carl T. Junger
Date: Month 05 Day 05 Year 89

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

19. Discrepancy Indication Space
5A PAILS (30A GAL) ASH GROVE 8/15/89 90103 2-204TCT50 5/5
25A GAL 204TCT50 8/15/89

20. Facility Owner or Operator. Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: WHITAKER A
Signature: [signature]
Month 5 Day 5 Year 89

GENERATOR / TRANSPORTER / FACILITY

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

INA0346458

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

COPY 5. TSD COPY

0016566

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

0213022
1 7

Authorization Number 997832 8 13
ILD 081040117

The Valspar Corp. (Company Name) | 1330 S. Kilbourn Ave. (Address)
Chicago, Illinois (City) | Illinois (State) | 60623 (Zip)

031600044 5 G
14 Generator Number 24

WASTE HAULER(S)

MR. FRANK, INC. (Hauler Name) | 201 W. 155TH ST SOUTH HOLLAND ILL. (Hauler Address) | S.W.H. Registration Number 0079018 25 31
ILD 069506160

Hauler Name | Hauler Address | S.W.H. Registration Number 32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

IND 016360265

American Chemical (Facility Name) | 420 S. Colfax, GRIFFITH (Address)
Griffith, (City) | Indiana (State) | Zip

91808902 39 46 Site Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint Sludge | WASTE 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 76,000 (LBS) TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 003000 47 52

1 GALLONS (Circle One) 2 CU. YDS. 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: 3/18/81 | (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 18 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 3/18/81 60 65

COMMENTS OR SPECIAL INSTRUCTIONS: TO WEST AGIT T-50 3/18/81 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

001939

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

0261075

Authorization Number 9 9 7 8 3 2

The Valspar Corp. (Company Name) — 1330 S. Kilbourn Ave. (Address)

Chicago, Illinois (City) — Illinois (State) — 60623 (Zip)

ILD08104017 G (Generator Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) — 201 W. 155th St. South Holland, IL (Hauler Address) — S.W.H. Registration Number 0079018

Hauler Name — Hauler Address — S.W.H. Registration Number ILD069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical (Facility Name) — 420 S. Colfax, Griffith (Address) — IND016360265 (Site Number)

City — State — Zip

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint Sludge — WASTE 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 36,000 LBS TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 005000 — 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: 10/22/81 — (Authorized Signature) 10/22/81

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 R[illegible] (Authorized Signature) — DATE: 10 22 81

(2) (Authorized Signature) — DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO X

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

(Authorized Signature) — DATE: 10 22 81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 206 X ~~T-80~~ T-50 10/22/81 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

001937

0261076

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

...RATOR

Authorization Number ~~9 9 7 8 3 2~~

ILD 081040107

~~I L D 0 8 1 0 4 0 1 7~~ Generator Number

0316000445

The Valspar Corp. (Company Name) — 1330 S. Kilbourn Ave. (Address)

Chicago, Illinois (City) — Illinois (State) — 60623 (Zip)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) — 201 W. 155th St. South Holland, IL (Hauler Address) — S.W.H. Registration Number ~~9 0 7 9 0 1 8~~

Hauler Name — Hauler Address — S.W.H. Registration Number ILD069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical (Facility Name) — 420 S. Colfax, Griffith (Address) — Site Number IND016360265

91808902

City — State — Zip

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint Sludge — WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Waste Solvents — HAZARD CLASS: Flammable

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 005000 — 1 GALLONS (Circle One) 2 CU. YDS.

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 12/17/81 — (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) Tom Berry (Authorized Signature) — DATE: 12 17 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 17 81

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802

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

TO 210 K T-50 GRM 12/17/81

SITE COPY - PART 3

001938

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

0224386

Authorization Number 997232

~~Valspar Corporation~~ (Company Name) ~~1330 S. Kilbourn Ave.~~ Address

0316000445 G Generator Number

~~Chicago~~ City ~~Illinois~~ State ~~60623~~ Zip ILD 081640167

WASTE HAULER(S)

Mr. Frank Inc ~~American Chemical Service, Inc.~~ Hauler Name 201 W. 155th St. South Holland Ill ~~P.O. Box 190, Griffith, Ind.~~ Hauler Address S.W.H. Registration Number 0679618

ILD 069566166

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical (Facility Name) P.O. Box 190 Address 91602902 Site Number

Griffith City Ind State Zip IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ~~Wash~~ 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: Organic Solvent

HAZARD CLASS: Flammable Liquid UN 1993

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 605000

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: 2/5/82 [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: 02/05/82

(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: 2/5/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802

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

To 205 RT-50
GEM 2/5/82

SITE COPY - PART 3

002856

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

0261080

Authorization Number 921072

The Valspar Corp. (Company Name) | 1330 S. Kilbourn Ave. (Address)
Chicago, Illinois (City) | Illinois (State) | 60623 (Zip)
ILD 031600044 5 G (Generator Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) | 201 W. 155th St., South Holland, IL (Hauler Address) | S.W.H. Registration Number 007900
312-596-3377
Hauler Name | Hauler Address | ILD 069506160 S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical (Facility Name) | 420 S. Colfax, Griffith, IN (Address) | 91808901 Site Number
City | 312-768-3400 State Zip | IND 016360765

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint Sludge | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: F005

SHIPPING DESCRIPTION: | HAZARD CLASS: Flammable Liquid n.o.c. UN 1993 | WEIGHT FOR D.O.T. USE ____ LBS TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 0550 | 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: 5-11-82 | 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) DATE: 5 11 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: 5 11 82

COMMENTS OR SPECIAL INSTRUCTIONS: ____

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424 8802

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

To 211 RT-63 6RM 5-6-82

SITE COPY - PART 3

003560

STATE OF ILLINOIS

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

SPECIAL WASTE HAULING MANIFEST

0224390

TO BE COMPLETED BY WASTE GENERATOR

312-782-7000

Authorization Number 9210722

Valspar Corp. (Company Name) | 1330 S. Kilbourn Ave. (Address) | ILD 0316 0 0 0 4 4 5 (Generator Number)

Chicago (City) | Illinois (State) | 60623 (Zip)

WASTE HAULER(S):

Mr. Frank, Inc. (Hauler Name) | 201 W. 155th St., South Holland, Il (Hauler Address) | S.W.H. Registration Number 0 0 7 9 0 2 1

312 596 3377 (Hauler Name) | (Hauler Address) | ILD 0 6 9 5 0 6 1 6 0 (S.W.H. Registration Number)

DESTINATION -- DISPOSAL STORAGE OR TREATMENT SITE

American Chemical (Facility Name) | 420 S. Colfax, Griffith, In. (Address) | 9 1 8 0 8 9 0 2 (Site Number)

(City) | 312-768-3400 (State) | IND 016360265 (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint Sludge | WASTE 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)

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

QUANTITY OF WASTE DELIVERED: 5200 | 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.

UN1993
K078

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 5-27-82 | (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) _____ (Authorized Signature) DATE: 05 27 82

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

_____ (Authorized Signature) DATE: 5/27/82

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-8802

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

TO 210 ET-506RM 5-27-82 SITE COPY - PART 3

002785

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

0357331 (1–7)

Authorization Number 9210 7 2 (8–13)

Valspar Corporationv (Company Name) | 1330 S. Kilbourn Ave. (Address)

Chicago (City) | Illinois (State) | 60623 (Zip)

312 762 7088

I L D 0 3 1 6 0 0 0 4 4 5 G (14–24) Generator Number

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) | 201 W. 155th St., South Holland, Il (Hauler Address) | S.W.H. Registration Number 0 0 7 9 0 2 9 (25–31)

312 596 3377

Hauler Name | Hauler Address | ILD 0 6 9 5 0 6 160 S.W.H. Registration Number (32–38)

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

American Chemical (Facility Name) | 420 S. Colfax, Griffith, In. (Address) | 9 1 8 0 8 9 0 2 (39–46) Site Number

312-768-3400

City | State | Zip | IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT Sludge | WASTE 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	WEIGHT FOR D.O.T. USE ____ LBS / TONS (circle one)
	NOS UN 1993	HW K078

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

QUANTITY OF WASTE DELIVERED: 004800 (52) 1 GALLONS / 2 CU. YDS. (Circle One) (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: 7-9-82 | (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) Tom Berry (Authorized Signature) DATE: 7/09/82 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

(Authorized Signature) DATE 7/9/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS ____

IN ILLINOIS, 217 / 782 3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS, 800 / 424-8802

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

To 210 RT-50 GPM 7-9-82 SITE COPY - PART 3

002782

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

0663455

Authorization Number 921072

TO BE COMPLETED BY WASTE GENERATOR

Valspar Corporation	1330 S. Kilbourn Ave.	312 762 7000	I L D 0 3 1 6 0 0 0 4 4 5
(Company Name)	Address	Phone Number	Generator Number
Chicago	Illinois	60623	312-762-7000
City	State	Zip	EPA Number

WASTE HAULER(S)

Mr. Frank, Inc.	201 W. 155th St. South Holland, IL	S.W.H. Registration Number 0 0 7 9 0 8 9
Hauler Name	Hauler Address	
	312 596 3377	I L D 0 6 9 5 0 6 1 6 0
	Phone Number	EPA Number
		S.W.H. Registration Number
Hauler Name	Hauler Address	
	Phone Number	EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical	420 S. Colfax, Griffith, IN	-9 1 8 0 8 9 0 2
(Facility Name)	Address	Site Number
City	State	Zip
	312 768 3400	I N D 0 1 6 3 6 0 2 6 5
	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 Sludge WASTE 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		1993 (UN or NA Number)	K078 (EPA HW Number)

WEIGHT FOR D.O.T USE _____ LBS / TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 004800 (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 Miguel J. Lemus (Authorized Signature) DATE: 7-13-82.

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) _____ (Authorized Signature) DATE: 07/17/82. (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO ✓

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

_____ (Authorized Signature) DATE: 7/13/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

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

REV #4

SITE COPY - PART 3 To 210 FT T-50 GPM 7.13.82

002783

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

0663454

Authorization Number 9-21072

TO BE COMPLETED BY WASTE GENERATOR

Valspar Corporation (Company Name) | 1330 S. Kilbourn Ave. (Address) | 312 762 7000 (Phone Number) | ILD 031600044 5G (14 Generator Number 24)

Chicago (City) | Illinois (State) | 60623 (Zip) | 312 762 7000 | EPA Number

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) | 201 W. 155th St., South Holland, IL (Hauler Address) | S.W.H. Registration Number 0079019 (25 31)

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 (Facility Name) | 420 S. Colfax, Griffith, IN (Address) | 91808902 (39 Site Number 46)

City | State | Zip | 312 768 3400 (Phone Number) | IND 016360265 (EPA Number)

Alternate (Facility Name) | Address | 39 Site Number 46

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint Sludge | WASTE 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: 1993 (UN or NA Number) | K078 (EPA HW Number)

WEIGHT FOR D.O.T. USE: LBS / TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 000450 (47 52) | 1 GALLONS (Circle One) 2 CU. YDS. (53)

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION (Authorized Signature) DATE: 7-16-82

WASTE HAULER

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

(1) (Authorized Signature) DATE: 07/16/82 (54 59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO X

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

(Authorized Signature) DATE: 7/16/82 (60 65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

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

REV # 4

SITE COPY - PART 3 5210 RT-50 6PM 7.16.82

002/84

IL 532-610
LPC 62 8/

STATE OF ILLINOIS

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

0663458 (1–7)

Authorization Number ____ (8–13)

TO BE COMPLETED BY WASTE GENERATOR

Valspar Corporation (Company Name)	1330 S. Kilbourn Ave. (Address)	3 1 2 7 6 2 7 0 0 0 (Phone Number)	0 3 1 6 0 0 0 4 4 5 G (14–24 Generator Number)
Chicago (City)	Illinois (State)	60623 (Zip)	I L D 0 0 8 1 0 4 0 1 0 7 (EPA Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name)	201 W. 155th St., South Holland (Hauler Address)	S.W.H. Registration Number 0 0 7 9 [redacted] 9 007 (25–31)	
		312 596 3377 (Phone Number)	I L D 0 6 9 5 0 6 1 6 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, Griffith, In. (Address)		9 1 8 0 8 9 0 2 (39–46 Site Number)
City	State	Zip	312 768 3400 (Phone Number) I N D 0 1 6 3 6 0 2 6 5 (EPA Number)
Alternate (Facility Name)	Address		39–46 Site Number
City	State	Zip	Phone Number / EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint Sludge WASTE 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		1 9 9 3 (UN or NA Number)	K 0 7 8 (EPA HW Number)

WEIGHT FOR D.O.T. USE ____ LBS / TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 005000 (47–52) (2) GALLONS (Circle One) / CU. YDS 1 (53)

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE: 7-19-82

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) [signature] (Authorized Signature) DATE: 07/19/82 (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: 7/19/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS ____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

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

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

REV # 4

SITE COPY - PART 3

To 210 K T-50 GRM 7-19-82

002979

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

0663459

Authorization Number

Valspar Corporation (Company Name) | 1330 S. Kilbourn Ave. (Address) | 312 762 7000 (Phone Number) | 0 3 1 6 0 0 0 4 4 5 (Generator Number) G

Chicago (City) | Illinois (State) | 60623 (Zip) | ILD 0 0 8 10 40 107 (EPA Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) | 201 W. 155th St., South Holland, Il. (Hauler Address) | S.W.H. Registration Number 0 0 7 9 / 0 4 0 9

312 596 3377 (Phone Number) | I L D 0 6 9 5 0 6 1 6 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, Griffith, In. (Address) | 9 1 8 0 8 9 0 2 (Site Number)

City | State | 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 Sludge | WASTE 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 | 1 9 9 3 (UN or NA Number) | K 0 7 8 (EPA HW Number)

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 0 0 4 9 0 0 (47–52) | 1 GALLONS (Circle One) 2 CU. YDS. 1 (53)

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION X [signature] (Authorized Signature) DATE: 7·22·82

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) Ronald Bridgewater (Authorized Signature) DATE: 7/22/82 (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: 7/22/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS

IN ILLINOIS 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

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

REV # 4

SITE COPY - PART 3 TO 211 K T-50 GRM 7·22·82

002981

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

0663457

Authorization Number

Valspar Corporation (Company Name)	1330 S. Kilbourn Ave., (Address)	312 762 7000 (Phone Number)	0316000445 (Generator Number)
Chicago (City)	Illinois (State)	60623 (Zip)	ILD0081040107 (EPA Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name)	201 W. 155th St., South Holland (Hauler Address)		S.W.H. Registration Number 007909
		312 596 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

American Chemical (Facility Name)	420 S. Colfax, Griffith, In. (Address)			91808902 (Site Number)
(City)	(State)	(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: Paint Sludge WASTE 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: 1993 (UN or NA Number) K078 (EPA HW Number)

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 004500 (47–52) 1 GALLONS (Circle One) 2 CU. YDS. (53)

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE: 7-26-82

WASTE HAULER

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

(1) Donald H Bell (Authorized Signature) DATE: 07 26 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 7 26 82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

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

REV # 4

SITE COPY - PART 3

TE 2107 7-30 GPM 7-26-82

002980

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

0663460
1 7

Authorization Number _____ 8 13

Valspar Corporation	1330 S. Kilbourn Ave.	312 762 7000	0 3 1 6 0 0 0 4 5 5 G
(Company Name)	Address	Phone Number	14 Generator Number 24
City	State	Zip	I L D 0 0 8 1 0 4 0 1 0 7 EPA Number

WASTE HAULER(S)

Mr. Frank, Inc.	201 W. 155th St., South Holland		S.W.H. Registration Number 0 0 7 9 0 0 9
Hauler Name	Hauler Address		25 31
		312 596 3377	I L D 0 6 9 5 0 6 1 6 0
		Phone Number	EPA Number
Hauler Name	Hauler Address		S.W.H. Registration Number 32 38
		Phone Number	EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical	420 S. Colfax, Griffith, In.			9 1 8 0 8 9 0 2
(Facility Name)	Address			39 Site Number 46
City	State	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 Sludge WASTE 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 — 1 9 9 3 UN or NA Number — K 0 7 8 EPA HW Number

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 004500 (47 52) 1 GALLONS (Circle One) 2 CU. YDS. 1 (53)

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE: 7-30-82

WASTE HAULER

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

(1) [signature] (Authorized Signature) DATE: 07 30 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: 7 30 82 (60 65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS, 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS, 800 / 424-8802 or 202 / 426-2675

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

REV # 4

SITE COPY - PART 3

TO 210 RT-50 [illegible] 7-30-82

002918

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

0663462

Authorization Number

Valspar Corporation (Company Name)	1330 S. Kilbourn Ave., (Address)	312 762 7000 (Phone Number)	0 3 1 6 0 0 0 4 4 5 G (Generator Number)
Chicago (City)	Illinois (State)	60623 (Zip)	I L D 0 0 8 1 0 4 0 1 0 -7 (EPA Number)

WASTE HAULER(S)

Mr. Frnak, Inc. (Hauler Name)	201 W. 155th St., South Holland (Hauler Address)		S.W.H. Registration Number 0 0 7 9 0 0 9
		312 596 3377 (Phone Number)	I L D 0 6 9 5 0 6 1 6 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, Griffith, In. (Address)		9 1 8 0 8 9 0 2 (Site Number)
(City)	(State)	(Zip) 312 768 3400 (Phone Number)	I N D 0 1 6 3 6 0 2 6 5 (EPA Number)
(Alternate (Facility Name))	(Address)		(Site Number)
(City)	(State)	(Zip) (Phone Number)	(EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Paint Sludge WASTE 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

1 9 9 3 (UN or NA Number) K 0 7 8 (EPA HW Number)

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 0 0 4 5 0 0 (47–52) 1 GALLONS (Circle One) 2 CU. YDS 1 (53)

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE: 8-13-82

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: 08/13/82 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

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

[signature] (Authorized Signature) DATE: 8/13/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS, 217 / 782 3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS 800 / 424 8802 or 202 / 426 2675

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

REV # 4

SITE COPY - PART 3

To 20 E 7 SO GCH 8/13/82

002917

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

0663461

Authorization Number

Valspar Corporation (Company Name) | 1330 S. Kilbourn Ave., (Address) | 312 762 7000 (Phone Number) | 0 3 1 6 0 0 0 4 4 5 G (Generator Number)

Chicago (City) | Illinois (State) | 60623 (Zip) | I L D 0 0 8 1 0 4 0 1 0 7 (EPA Number)

WASTE HAULER(S)

029

Mr. Frnak, Inc. (Hauler Name) | 201 W. 155th St., South Holland (Hauler Address) | S.W.H. Registration Number 0 0 7 9 ~~0 0 5~~

312 596 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

~~American Chemical~~ (Facility Name) | ~~420 S. Colfax, Griffith, In.~~ (Address) | 9 1 8 0 8 9 0 2 (Site Number)

312 768 3400 (Phone Number) | I N D 0 1 6 3 6 0 2 6 5 (EPA Number)

(City) | (State) | (Zip)

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

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

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Flammable Liquid | HAZARD CLASS. 1 9 9 3 (UN or NA Number) | K 0 7 8 (EPA HW Number)

WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 0 0 4 5 0 0 | ~~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 E P A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Mark J. Levine (Authorized Signature) DATE: 9/1/82

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) Michael P Mouter (Authorized Signature) DATE: 09/02/82

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

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

J Dunfee (Authorized Signature) DATE: 09/02/82

COMMENTS OR SPECIAL INSTRUCTIONS _____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

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

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

REV. # 4

SITE COPY - PART 3

To 210 E T-50 6PM 9-2-82

002715

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

0663463 (1–7)

Authorization Number (8–13)

Valspar Corporation (Company Name) | 1330 S. Kilbourn Ave., (Address) | 312-762-7000 (Phone Number) | 0 3 1 6 0 0 0 4 4 5 G (14–24) Generator Number

Chicago (City) | Illinois (State) | 60623 (Zip) | I L D 0 0 8 1 0 4 0 1 0 7 (EPA Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) | 201 W. 155th St., South Holland 596 (Hauler Address) | S.W.H. Registration Number 0 0 7 9 0 0 9 (25–31)

312-~~868~~-3377 (Phone Number) | I L D 0 6 9 5 0 6 1 6 C (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, Griffith, In. (Address) | 9 1 8 0 8 9 0 2 (39–46 Site Number)

(City) | (State) | (Zip) | 312 768 3400 (Phone Number) | I N D 0 1 6 3 6 0 2 6 5 (EPA Number)

(Alternate (Facility Name)) | (Address) | (39–46 Site Number)

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

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Flammable Liquid | HAZARD CLASS. NA 1993 (UN or NA Number) | K 0 7 8 (EPA HW Number)

WEIGHT FOR D.O.T. USE: LBS / TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 0 0 4,5 0 0 (47–52) | 1 GALLONS (Circle One) 2 CU. YDS. (53)

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE: 9-13-82

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: 9 13 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: 9 13 82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS _____

IN ILLINOIS 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS 800 / 424 8802 or 202 / 426-2675

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

REV. # 4

SITE COPY - PART 3

TO FILE T. SCOTT 9-13-82

002716

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

0663464

Authorization Number ____

Valspar Corporation (Company Name)	1330 S. Kilbourn (Address)	312 762 7000 (Phone Number)	03160 0 0 4 4 5 (Generator Number) G
Chicago (City)	Illinois (State)	60623 (Zip)	I L D 0 0 8 1 0 4 0 1 0 7 (EPA Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name)	201 W. 155th St., South Holland (Hauler Address)	S.W.H. Registration Number 0 0 7 9 0 25
	312 596 3377 (Phone Number)	I L D 0 6 9 5 0 6 1 6 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, Griffith, In. (Address)	9 1 8 0 8 9 0 2 (Site Number)
(City)	(State)	312 768 3400 (Phone Number) I N D 0 1 6 3 6 0 2 6 5 (EPA Number)
(Alternate (Facility Name))	(Address)	(Site Number)
(City)	(State)	(Zip) (Phone Number) (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ____ WASTE PHASE: ~~xxxxxx~~ 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 9 9 3 (UN or NA Number)	K 0 7 8 (EPA HW Number)
	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: 0 0 4 4 6 0 (47–52) (1 GALLONS (Circle One) 2 CU. YDS.) (53)

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Mark J. Jenne (Authorized Signature) DATE: 9-20-82

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: 9/20/82 (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: 9/20/82 (60–66)

COMMENTS OR SPECIAL INSTRUCTIONS ____

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

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

REV # 4

SITE COPY - PART 3

To 211K 7-50 GRM 9.20.82

002714

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

0663465
1 7

Authorization Number ____ 8 13

TO BE COMPLETED BY WASTE GENERATOR

Valspar Corporation	1330 S. Kilbourn Ave.,	312 762 7000	0 3 1 6 0 0 0 4 4 5 G
(Company Name)	Address	Phone Number	14 Generator Number 24
Chicago	Illinois	60623	I L D 0 0 8 1 0 4 0 1 0 7
City	State	Zip	EPA Number

WASTE HAULER(S)

Mr. Frank, Inc.	201 W. 155th St., South Holland	S.W.H. Registration Number 0 0 7 9 0 0 9
Hauler Name	Hauler Address	25 31
	312 596 3377	I L D 0 6 9 5 0 6 1 6 0
	Phone Number	EPA Number
Hauler Name	Hauler Address	S.W.H. Registration Number 32 38
	Phone Number	EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical	420 Colfax, Griffith In.	9 1 8 0 8 9 0 2
(Facility Name)	Address	39 Site Number 46
Griffith	IND.	312 768 3400 I N D 0 1 6 3 6 0 2 6 5
City	State Zip	Phone Number EPA Number
Alternate (Facility Name)	Address	39 Site Number 46
City	State Zip	Phone Number EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: 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 1 9 9 3		K 0 7 8
	Flammable Liquid	UN or NA Number	EPA HW Number

WEIGHT FOR D.O.T. USE ____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED 0 0 4 5 0 0 47 52 (1 GALLONS (Circle One) / 2 CU. YDS.) 53

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE: 10-6-82

WASTE HAULER

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

(1) Tom Berry (Authorized Signature) DATE: 10 06 82 54 59

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ____

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

[signature] (Authorized Signature) DATE: 10-6-82 60 65

COMMENTS OR SPECIAL INSTRUCTIONS. ____

IN ILLINOIS 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS, 800 / 424-8802 or 202 / 426-2675

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

REV # 4

SITE COPY - PART 3

Todd RT-50 Grad 10/6/82

002973

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

0663466

Authorization Number

Valspar Corporation	1330 S. Kilbourn Av	312 762 7000	0 3 1 6 0 0 0 4 4 5 G
(Company Name)	Address	Phone Number	Generator Number
Chicago	Illinois 60623		I L D 0 0 8 1 0 4 0 1 0 7
City	State / Zip		EPA Number

WASTE HAULER(S)

Mr. Frank, Inc.	201 W. 155th St., South Holland		S.W.H. Registration Number 0 0 7 9 0 0 9
Hauler Name	Hauler Address		
		312 596 3377	I L D 0 6 9 5 0 6 1 6 0
		Phone Number	EPA Number
			S.W.H. Registration Number
Hauler Name	Hauler Address		
		Phone Number	EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical	420 Colfax,		9 1 8 0 8 9 0 2
(Facility Name)	Address		Site Number
Griffith	Indiana	312 768 3400	I N D 0 1 6 3 6 0 2 6 5
City	State / Zip	Phone Number	EPA Number
Alternate (Facility Name)	Address		Site Number
City	State / Zip	Phone Number	EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: _____ WASTE 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

1 9 9 3 (UN or NA Number) K 0 7 8 (EPA HW Number)

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 005000 (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 [signature] (Authorized Signature) DATE: 10-22-82

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 22 82 (54–59)

(2) _____ (Authorized Signature) DATE / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

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

[signature] (Authorized Signature) DATE 10 22 82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS _____

IN ILLINOIS 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

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

REV # 4

SITE COPY - PART 3 To 203 KT-50 GRM 10-22-82

002912

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

0663467

Authorization Number

Valspar Corporation (Company Name)	1330 S. Kilbourn Ave. (Address)	312 762 7000 (Phone Number)	0 3 1 6 0 0 0 4 4 5 (Generator Number)
Chicago (City)	Illinois (State)	60623 (Zip)	I L D 0 0 8 1 0 4 0 1 0 7 (EPA Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name)	201 W. 155th St., South Holland (Hauler Address)		S.W.H. Registration Number 0 0 7 9 0 0 9
		312 596 3377 (Phone Number)	I L D 0 6 9 5 0 6 1 6 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 Colfax (Address)			9 1 8 0 8 9 0 2 (Site Number)
Griffith (City)	Indiana (State)	(Zip)	312 768 3400 (Phone Number)	I N D 0 1 6 3 6 0 2 6 5 (EPA Number)
(Alternate (Facility Name))	(Address)			(Site Number)
(City)	(State)	(Zip)	(Phone Number)	(EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE 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 1 9 9 3 (UN or NA Number) K 0 7 8 (EPA HW Number)

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED 004500 GALLONS (Circle One) 2 CU. YDS. 1

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE: 11-5-82

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) Michael Martin (Authorized Signature) DATE: 11/05/82

(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 11/05/82

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 211KT-50 6PM 11-5-82

002911

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

\# 0663468 (1–7)

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number ____ (8–13)

Valspar Corporation	1330 S. Kilbourn Ave.	312 762 7000	0 3 1 6 0 0 0 4 4 5 G
(Company Name)	Address	Phone Number	(14–) Generator Number (–24)
Chicago	**Illinois**	**60623**	**I L D 0 0 8 1 0 4 0 1 0 7**
City	State	Zip	EPA Number

WASTE HAULER(S)

018

Mr. Frank, Inc.	201 W. 155th St., South Holland	S.W.H. Registration Number 0 0 7 9 ~~0 0 9~~ (25–31)
Hauler Name	Hauler Address	
	312 596 3377	I L D 0 6 9 5 0 6 1 6 0
	Phone Number	EPA Number
Hauler Name	Hauler Address	S.W.H. Registration Number (32–38)
	Phone Number	EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical	420 Colfax			9 1 8 0 8 9 0 2 (39–46)
(Facility Name)	Address			Site Number
Griffith	**Indiana**		**312 768 3400**	**I N D 0 1 6 3 6 0 2 6 5**
City	State	Zip	Phone Number	EPA Number
Alternate (Facility Name)	Address			(39–) Site Number (–40)
City	State	Zip	Phone Number	EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ____ WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS.		
	Flammable Liquid	1 9 9 3 (UN or NA Number)	K 0 7 8 (EPA HW Number)

WEIGHT FOR D.O.T. USE ____ LBS / TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 0 0 4 5 0 0 (47–52) 1 GALLONS (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 Mark J. Leone (Authorized Signature) DATE: 11-12-82

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) Michael P. Martin (Authorized Signature) DATE: 11/12/82 (54–59)

(2) ____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

(Authorized Signature) DATE: 11/12/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: ____

IN ILLINOIS 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

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

REV # 4

SITE COPY - PART 3 To 210 K T-30 6 GAL 11.12.82

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

0357327

Authorization Number 921072

Valspar Corp. (Company Name) | 1330 S. Kilbourn Ave. (Address) | ILD 031600445 G (Generator Number)

Chicago, (City) | Illinois (State) | 60623 (Zip) | 312-762-7000

WASTE HAULER(S)

Mr. Frnak, Inc. (Hauler Name) | 201 W. 155th St., South Holland, Il (Hauler Address) | S.W.H. Registration Number 0079021

312 596 3377

ILD 069506160

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical (Facility Name) | 420 S. Colfax, Griffith, In. (Address) | 91808902 (Site Number)

City | 312-768-3400 (State) | Zip | IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint Sludge | WASTE 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 1263

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: 6000 (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: 6-10-82 | (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) _____ (Authorized Signature) DATE: 6/21/82 (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:

_____ (Authorized Signature) DATE: 6/21/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS 800 / 424-8802

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

TO 210 RT-50 GRM 6.28.82

SITE COPY - PART 3

00267

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

0663469

Authorization Number

Valspar Corporation (Company Name)	1130 S. Kilbounr Ave. (Address)	312 762 7000 (Phone Number)	0 3 1 6 0 0 0 4 4 5 G (Generator Number)
Chicago (City)	Illinois (State)	60623 (Zip)	I L D 0 0 8 1 0 4 0 1 0 7 (EPA Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name)	201 W. 155th., South Holland (Hauler Address)		S.W.H. Registration Number 0 0 7 9 ~~0 0 9~~ 0 1 8
		312 596 3377 (Phone Number)	I L D 0 6 9 5 0 6 1 6 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 Colfax, (Address)		9 1 8 0 8 9 0 2 (Site Number)
Griffith (City)	Indiana (State)	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 SLUDGE WASTE 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~~ 1 9 9 3 (UN or NA Number) K 0 7 8 (EPA HW Number)

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED 0 0 5 0 0 0 (1 GALLONS (Circle One) 2 CU. YDS. 1)

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE 11-29-~~80~~ 82

WASTE HAULER

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

(1) Donald H Bult (Authorized Signature) DATE 11/29/82

(2) _____ (Authorized Signature) DATE / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY* HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

[signature] (Authorized Signature) DATE 11/29/82

COMMENTS OR SPECIAL INSTRUCTIONS _____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

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

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

REV # 4

SITE COPY - PART 3 TC 210 E 7-63 GRM 11 29 82

002909

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

0733537
OUT OF STATE
Authorization Number 8 13

Valspar Corporation	1330 S. Kilbourn Ave.	312 762 7000	0 3 1 6 0 0 0 4 4 5 G
(Company Name)	Address	Phone Number	14 Generator Number 24
Chicago,	Illinois 60623		I L D 0 0 8 1 0 4 0 1 0
City	State Zip		EPA Number

WASTE HAULER(S)

Mr. Frank, Inc.	201 W. 155th St., South Holland		0079025 ~~0079009~~
Hauler Name	Hauler Address		S.W.H. Registration Number 25 31
		312 596 3377	I L D 0 6 9 5 0 6 1 6 0
		Phone Number	EPA Number
Hauler Name	Hauler Address		S.W.H. Registration Number 32 38
		Phone Number	EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical	420 Colfax,			9 1 8 0 8 9 0 2
(Facility Name)	Address			39 Site Number 46
Griffith	Indiana		312 768 3400	I N D 0 1 6 3 6 0 2 6 5
City	State	Zip	Phone Number	EPA Number
Alternate (Facility Name)	Address			39 Site Number 46
City	State	Zip	Phone Number	EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT WASTE SLUDGE WASTE 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 1 9 9 3 UN or NA Number K 0 7 8 EPA HW Number

WEIGHT FOR D.O.T. USE 38,500 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. 2 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: 12-9-82

WASTE HAULER

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

(1) Robert Perkins (Authorized Signature) DATE: 12 09 82 54 59

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

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

[signature] (Authorized Signature) DATE 12 9 82 60 65

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

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

REV # 4

SITE COPY - PART 3 To 211 F T-50 GRM 12.9.82

003000

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

0733538 (1–7)

Authorization Number ____ (8–13)

TO BE COMPLETED BY WASTE GENERATOR

Valspar Corporation (Company Name) | 1330 S. Kilbourn Ave., (Address) | 312 762 7000 (Phone Number) | 0 3 1 6 0 0 0 4 4 5 G (14–24) Generator Number

Chicago, (City) | Illinois (State) | 60623 (Zip) | I L D 0 0 8 1 0 4 0 1 0 EPA Number

WASTE HAULER(S)

Mr. Fran, Inc. (Hauler Name) | 201 W. 155th St., South Holland (Hauler Address) | S.W.H. Registration Number 0 0 7 9 ~~8 0 9~~ 0 2 5 (25–31)

312 596 3377 (Phone Number) | I L D 0 6 9 5 0 6 1 6 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 Colfax, (Address) | 9 1 8 0 8 9 0 2 (39–46) Site Number

Griffith (City) | Indiana (State) | 312 768 3400 (Zip / 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: ____ WASTE 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	1 9 9 3 (UN or NA Number)	K 0 7 8 (EPA HW Number)

WEIGHT FOR D.O.T. USE ____ LBS / TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 0 0 3 0 0 0 (47–52) (1 GALLONS / 2 CU. YDS. (Circle One)) 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS____ Number) (TANK TRUCK) OPEN TRUCK OTHER (Specify) ____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Raymond R. Janice (Authorized Signature) DATE: 12-16-82

WASTE HAULER

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

(1) Mike Fowler (Authorized Signature) DATE: 12/16/82 (54–59)

(2) ____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO X

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

(Authorized Signature) DATE: 12/16/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: ____

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

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

REV # 4

SITE COPY - PART 3

To 210 FT-506 RM 12-16-82

002799

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
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

Valspar Corporation (Company Name) | 1330 S. Kilbourn Ave. (Address) | 312 762 7000 (Phone Number)
Chicago, (City) | Illinois (State) | 60623 (Zip)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) | 201 W. 155th St., South Holland (Hauler Address) | 312 596 3377 (Phone Number)
(Hauler Name) | (Hauler Address) | (Phone Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical (Facility Name) | 420 Colfax (Address) | 312 768 (Phone Nu
Griffith, (City) | Indiana (State) | 46319 (Zip)
(Alternate (Facility Name)) | (Address) | (Phone Nu
(City) | (State) | (Zip)

TO BE COMPLETED BY WASTE GENERATOR

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATEL WAS

WASTE NAME: Waste Paint Solvents
SHIPPING DESCRIPTION:
HAZARD CLASS: Flammable Liquid
UN or NA Number: 1993

WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one)
WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.
QUANTITY OF WASTE DELIVERED:

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED A 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)

WASTE HAULER

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

(1) _____ (Authorized Signature)

(2) _____ (Authorized Signature)

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

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

(Authorized Signature)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS: 217 / 782-3637
DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PA
REV. 4 4

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

SITE COPY - PART 3

To 212 RT-50 6RM

006785

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

0733541
OUT OF STATE
Authorization Number 000000 (8–13)

Valspar Corporation (Company Name)	1330 S. Kilbourn Ave., (Address)	312 762 7000 (Phone Number)	0 316000445 G (Generator Number)
Chicago, (City)	Illinois (State)	60623 (Zip)	ILD 00 81040107 (EPA Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name)	201 W. 155th St., South Holland (Hauler Address)	312 596 3377 (Phone Number)	S.W.H. Registration Number 0079001 (25–31) ILD069506160 (EPA Number)
(Hauler Name)	(Hauler Address)	(Phone Number)	S.W.H. Registration Number (32–38) (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical (Facility Name)	420 Colfax (Address)			91808902 (39–46) (Site Number)
Griffith (City)	Indiana (State)	463 19 (Zip)	312 768 3400 (Phone Number)	IND016360265 (EPA Number)
(Alternate (Facility Name))	(Address)			(39–46) (Site Number)
(City)	(State)	(Zip)	(Phone Number)	(EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: 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: Flammable Liquid

1993 (UN or NA Number) K078 (EPA HW Number)

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 3,000 (47–52) 1 GALLONS (Circle One) 2 CU. YDS. 1 (53)

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE: 11-30-83

WASTE HAULER

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

(1) Mike Reifer (Authorized Signature) DATE: 11/30/83 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

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

[signature] (Authorized Signature) DATE: 11/30/83 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

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

REV. # 4

SITE COPY - PART 3

TO 210 FT. SO GRM 11-30-83

005004

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

0733542 (1–7)

Authorization Number out of state (8–13)

Valspar Corporation (Company Name)	1330 S. Kilbourn Ave. (Address)	312 762 7000 (Phone Number)	0 3 1 6 0 0 0 4 4 5 G (14–24 Generator Number)
Chicago (City)	Illinois (State)	60623 (Zip)	I L D 0 0 8 1 0 4 0 1 0 7 (EPA Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name)	201 W. 155th St., South Holland (Hauler Address)	S W H. Registration Number 0 0 7 9 0 0 1 (25–31)
	312 596 3377 (Phone Number)	I L D 0 6 9 5 0 6 1 6 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 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)		(39–46 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		
Flammable Liquid	1 9 9 3 (UN or NA Number)	K 0 7 8 (EPA HW Number)

WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 0 0 3 0 0 0 (47–52) 1 GALLONS (Circle One) 2 CU. YDS. (53)

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE: 11-30-83

WASTE HAULER

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

(1) [signature] (Authorized Signature) DATE: 11 30 83 (54–59)

(2) _____ (Authorized Signature) DATE: / / (60–65)

DISPOSAL, STORAGE, OR TREATMENT FACILITY:

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

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

[signature] (Authorized Signature) DATE: 11 30 83 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS _____

IN ILLINOIS, 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

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

REV. 8 4

SITE COPY - PART 3

To 210 E 7-50 ERM 11.30.83

005003

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

0733543
1 7

Authorization Number Out of State
8 13

Valspar Corporation (Company Name) | 1330 S. Kilbourn Ave. (Address) | 3127627000 (Phone Number 1-14) | 0316000445 (Generator Number) G 24

Chicago, (City) | Illinois (State) | 60623 (Zip) | ILD008104010 7 (EPA Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) | 201 W. 155th St., South Holland (Hauler Address) | S.W.H. Registration Number 00 7 9 028 (25-31)

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 (Facility Name) | 420 Colfax (Address) | 91808902 (39-46 Site Number)

Griffith, (City) | Indiana (State) | 46319 (Zip) | 312 768 3400 (Phone Number) | IND016360265 (EPA Number)

(Alternate (Facility Name)) | (Address) | (39-46 Site Number)

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

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: 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: Flammable Liquid | 1993 (UN or NA Number) | K078 (EPA HW Number)

WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 005000 (47-52) | 1 GALLONS (Circle One) 2 CU. YDS. | (53)

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] Purch Mgr. (Authorized Signature) DATE: 12/16/83

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) [signature] (Authorized Signature) DATE: 12/16/83 (54-59)

(2) _____ (Authorized Signature) DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

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

(Authorized Signature) [signature] DATE: 12/16/83 (60)

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. # 4

SITE COPY - PART 3

TO211RT-50 GKM 12.16.83

005501

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

0733544
1 7

Authorization Number Out of State
8 13

TO BE COMPLETED BY WASTE GENERATOR

Valspar Corporation (Company Name)	1330 S. Kilbourn Ave. Address	312-762-7000 Phone Number	0 3 1 6 0 0 0 4 4 5 G (14 Generator Number 24)
Chicago, City	Illinois State	60623 Zip	I L D 0 0 8 1 0 4 0 1 0 7 EPA Number

WASTE HAULER(S)

Mr. Frank, Inc. Hauler Name	201 W. 155th St., South Holland Hauler Address		S.W.H. Registration Number 0 0 7 9 0 0 4 (25 31)
		312-596-3377 Phone Number	I L D 0 6 9 5 0 6 1 6 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 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: 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: Flammable Liquid

HAZARD CLASS: 1993 (UN or NA Number) K078 (EPA HW Number)

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 0 0 3 0 0 8 (47 52) (1) GALLONS (Circle One) 2 CU. YDS. 1 (53)

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE: 12/22/83

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) Gabriel Garcia (Authorized Signature) DATE: 12/22/83 (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.

[signature] (Authorized Signature) DATE: 12/22/83 (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 TO210 FT-50 GRM 12.2.83

005002

IL 5
LPC

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

0733546
1 7

Authorization Number Out of State
8 13

Valspar Corporation (Company Name) | 1330 S. Kilbourn Ave., (Address) | 312 762 7000 (Phone Number) | 0 3 1 6 0 0 0 4 4 5 G (14 Generator Number 24)

Chicago, (City) | Illinois (State) | 60623 (Zip) | I L D 0 8 1 0 4 0 1 0 7 (EPA Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) | 201 W. 155th St., South Holland (Hauler Address) | S.W.H. Registration Number 0 0 7 9 0 1 8 (25 31)

312 596 3377 (Phone Number) | I L D 0 6 9 5 0 6 1 6 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 Colfax (Address) | 9 1 8 0 8 9 0 2 (39 Site Number 46)

Griffith (City) | Ind. (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: 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: Flammable Liquid | HAZARD CLASS: 1 9 9 3 (UN or NA Number) | K 0 7 8 (EPA HW Number)

WEIGHT FOR D.O.T. USE 33,600 (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 (47 52) (1 GALLONS (Circle One) 2 CU YDS.) 2 (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 Raymond Lonnee (Authorized Signature) DATE: 1-24-84

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) Robert Rubens (Authorized Signature) DATE: 01/24/84 (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:

R Rubens (Authorized Signature) DATE: 1/24/84 (60 65)

COMMENTS OR SPECIAL INSTRUCTIONS: R

IN ILLINOIS 217 / 782-3637 *24 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 TE T-50 6PM 1-24-84

006786

IL 532-610
LPC 62 8/77

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

0733547
1 7

Authorization Number: Out of State (8–13)

Valspar Corporation	1330 S. Kilbourn Ave., 312 762 7000	0 3 1 6 0 0 0 4 4 5
(Company Name)	Address / Phone Number	14 Generator Number 24 G
Chicago,	Illinois 60623	I L D 0 0 8 1 0 4 0 1 0 7
City	State Zip	EPA Number

WASTE HAULER(S)

Mr. Frank, Inc.	201 W. 155th St., South Holland	S.W.H. Registration Number 0 0 7 9 0 0 1 (25–31)
Hauler Name	Hauler Address	
	312 596 3377	I L D 0 6 9 5 0 6 1 6 0
	Phone Number	EPA Number
Hauler Name	Hauler Address	S.W.H. Registration Number (32–38)
	Phone Number	EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical	420 Colfax			9 1 8 0 8 9 0 2 (39–46)
(Facility Name)	Address			Site Number
Griffith	Ind.	46319	312 768 3400	I N D 0 1 6 3 6 0 2 6 5
City	State	Zip	Phone Number	EPA Number
Alternate (Facility Name)	Address			39 Site Number 46
City	State	Zip	Phone Number	EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: 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:		
Flammable Liquid	UN 1993 (UN or NA Number)	K078 (EPA HW Number)

WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 002,500 (47–52) (1 GALLONS / 2 CU. YDS.) (Circle One) 1 (53)

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Raymond P. Lance (Authorized Signature) DATE: 3-14-84

WASTE HAULER

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

(1) Mike Pfeifer (Authorized Signature) DATE: 03 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:

_____ (Authorized Signature) DATE: 03 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. # 4

SITE COPY - PART 3

To 210 E T-50 GRM 3.14.84

006783

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

0733548

Authorization Number: Out of State

Valspar Corporation (Company Name) | 1330 S. Kilbourn Ave., 312 762 7000 (Address / Phone Number) | 0 3 1 6 0 0 0 4 4 5 G (Generator Number)

Chicago, (City) | Illinois (State) | 60623 (Zip) | I L D 0 0 8 1 0 4 0 1 0 7 (EPA Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) | 201 W. 155th St.,South Holland (Hauler Address) | S.W.H. Registration Number 0 0 7 9 0 0 1

312 596 3377 (Phone Number) | I L D 0 6 9 5 0 6 1 6 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) | Ind. (State) | 46319 (Zip) | 312 768 3400 (Phone Number) | I N D 0 1 6 3 6 0 2 6 5 (EPA Number)

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

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

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste 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: Flammable Liquid | HAZARD CLASS: U N 1 9 9 3 (UN or NA Number) | K 0 7 8 (EPA HW Number)

WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 2,500 | 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 Raymond R. Skinner (Authorized Signature) DATE: 3-14-84

WASTE HAULER

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

(1) Mike Beyer (Authorized Signature) DATE: 03 14 84

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

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

_____ (Authorized Signature) DATE: 03 14 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

T0210R T50 6RM 3.14.84

006784

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

0960301

Authorization Number Out of State

Valspar Corporation (Company Name)	1330 S. Kilbourn Ave., (Address)	312 762 7000 (Phone Number)	0 3 1 6 0 0 0 4 4 5 (Generator Number)
Chciago, (City)	Illinois (State)	60623 (Zip)	I L D 0 0 8 1 0 4 0 1 0 7 (EPA Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name)	201 W. 155th St., South Holland (Hauler Address)		S.W.H. Registration Number 0 0 7 9 0 0 8
		312 596 3377 (Phone Number)	I L D 0 6 9 5 0 6 1 6 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)	Ind. (State)	46319 (Zip)	312 768 3400 (Phone Number)	I N D 0 1 6 3 6 0 2 6 5 (EPA Number)
(Alternate (Facility Name))	(Address)			(Site Number)
(City)	(State)	(Zip)	(Phone Number)	(EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste 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: Flammable Liquid

HAZARD CLASS: U N 1 9 9 3 (UN or NA Number) K 0 7 8 (EPA HW Number)

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 0 0 4,8 0 0 (47–52) 1 GALLONS (Circle One) 2 CU. YDS. 1 (53)

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Raymond R. Sennee (Authorized Signature) DATE: 6-22-84

WASTE HAULER

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

(1) Mike [signature] (Authorized Signature) DATE: 06/22/84 (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: 6/22/84 (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

210 KT-50

006782

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

0960302

Authorization Number Out of State

Valspar Corporation	1330 S. Kilbourn Ave.,	312 762 7000	0 3 1 6 0 0 0 4 4 5 G
(Company Name)	Address	Phone Number	Generator Number

Chicago	Illinois	60623	I L D 0 0 8 1 0 4 0 1 0 7
City	State	Zip	EPA Number

WASTE HAULER(S)

Mr. Frank, Inc.	201 W. 155th St., South Holland		S.W.H. Registration Number 0 0 7 9 0 0 8
Hauler Name	Hauler Address	312 596 3377 Phone Number	ILD069506160 EPA Number

American Chemical	420 S. Colfax		S.W.H. Registration Number
Hauler Name	Hauler Address	Phone Number	EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical	420 S. Colfax			9 1 8 0 8 9 0 2
(Facility Name)	Address			Site Number

Griffith	Ind.	46319	312 768 3400	I N D 0 1 6 3 6 0 2 6 5
City	State	Zip	Phone Number	EPA Number

Alternate (Facility Name)	Address			Site Number
City	State	Zip	Phone Number	EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Paint Solvents WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: WASTE SOLVENTS HAZARD CLASS: Flammable Liquid UN 1993 (UN or NA Number) K078 (EPA HW Number)

WEIGHT FOR D.O.T. USE 31 500 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.

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 Raymond R Sannee (Authorized Signature) DATE: 7/6/84

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) CE Milburn CE MILBURN (Authorized Signature) DATE: 07/06/84

(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:

F Dunfee (Authorized Signature) DATE: 7/9/84

COMMENTS OR SPECIAL INSTRUCTIONS: ____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

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

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

REV. # 4

SITE COPY - PART 3

204R T-50

006781

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

0960303

Authorization Number Out of St

Valspar Corporation	1330 S. Kilbourn Ave.,	312 762 7000	0 3 1 6 0 0 0 4 4 5
(Company Name)	Address	Phone Number	Generator Number
Chicago,	Illinois 60623		I L D 0 0 8 1 0 4 0 1 0 7
City	State / Zip		EPA Number

WASTE HAULER(S)

Mr. Frank, Inc.	201 W. 155th St., South Holland		S.W.H. Registration Number 0 0 7 9 011
Hauler Name	Hauler Address	312 596 3377	I L D 0 6 9 5 0 6 1 6 0
		Phone Number	EPA Number
Hauler Name	Hauler Address		S.W.H. Registration Number
		Phone Number	EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical	420 S. Colfax			918 0 8 9 0 2
(Facility Name)	Address			Site Number
Griffith	Ind.	46319	312 768 3400	I N D 0 1 6 3 6 0 2 6 5
City	State	Zip	Phone Number	EPA Number
Alternate (Facility Name)	Address			Site Number
City	State	Zip	Phone Number	EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Paint Solvents WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: HAZARD CLASS: Flammable Liquid

UN 1 9 9 3 (UN or NA Number) K 0 7 8 (EPA HW Number)

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED 003200 (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 Raymond R Sonnee (Authorized Signature) DATE: 7-18-84

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) Miguel Garcia (Authorized Signature) DATE: 07/18/84 (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: 7/19/84 (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. # 4

SITE COPY - PART 3

006780

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

0960304

Authorization Number Out of State

Valspar Corporation	1330 S. Kilbourn Ave.	312 762 7000	0 3 1 6 0 0 0 4 4 5 G
(Company Name)	Address	Phone Number	Generator Number
Chicago	Illinois 60623		I L D 0 0 8 1 0 4 0 1 0 7
City	State Zip		EPA Number

WASTE HAULER(S)

Mr. Frank, Inc.	201 W. 155th St., South Holland		S.W.H. Registration Number 0 0 7 9/019
Hauler Name	Hauler Address	312 596 3377	I L D 0 6 9 5 0 6 1 6 0
		Phone Number	EPA Number
Hauler Name	Hauler Address		S.W.H. Registration Number
		Phone Number	EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical	420 S. Colfax			9 1 8 0 8 9 0 2
(Facility Name)	Address			Site Number
Griffith	Ind.	46319	312 768 3400	I N D 0 1 6 3 6 0 2 6 5
City	State	Zip	Phone Number	EPA Number
Alternate (Facility Name)	Address			Site Number
City	State	Zip	Phone Number	EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Solvents Paint WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: HAZARD CLASS: Flammable Liquid UN 1993 (UN or NA Number) K078 (EPA HW Number)

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 004500 (47–52) 1 GALLONS (Circle One) 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 Raymond R. Sennee (Authorized Signature) DATE: 8-7-84

WASTE HAULER

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

(1) D W Bogda (Authorized Signature) DATE: 08/07/84 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

_____ (Authorized Signature) DATE: 8/7/84 (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

211 KT-50 11800 NIL Cl.

006778

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

0960305 (1–7)

Authorization Number OUT OF STATE (8–13)

Valspar Corporation (Company Name) | 1330 S. Kilbourn Ave., Address | 312 762 7000 Phone Number | 0 3 1 6 0 0 0 4 4 5 (14) Generator Number (24) G

Chicago, Illinois City | State | 60623 Zip | I L D 0 8 1 0 4 0 1 0 7 EPA Number

WASTE HAULER(S)

Mr. Frank, Inc. Hauler Name | 201 W. 155th St., South Holland Hauler Address | S.W.H. Registration Number 0 0 7 9 1 0 0 8 (25–31)

312-596 3377 Phone Number | I L D 0 6 9 5 0 6 1 6 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 | Ind. 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 | (39–46) 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: Flammable | HAZARD CLASS: U N 1 9 9 3 (UN or NA Number) | K 0 78 (EPA HW Number)

WEIGHT FOR D.O.T. USE _____ LBS / _____ TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 5000 (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 Raymond R. Spence (Authorized Signature) DATE: 8-16-84

WASTE HAULER

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

(1) _____ (Authorized Signature) DATE: 8/16/84 (54–59)

(2) _____ (Authorized Signature) DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES NO

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

_____ (Authorized Signature) DATE: 8/16/84 (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

21/K T-SO

10,500 BTU
1.9% Cl

006779

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

0960306

Authorization Number: Out of State

Valspar Corporation (Company Name) | 1330 S. Kilbourn Ave. (Address) | 312 762 7000 (Phone Number) | 0 3 1 6 0 0 0 4 4 5 G (Generator Number)

Chicago (City) | Illinois (State) | 60623 (Zip) | I L D 0 0 8 1 0 4 0 1 0 7 (EPA Number)

WASTE HAULER(S)

Mr. Frank, Inc. (Hauler Name) | 201 W. 155th St., South Holland, (Hauler Address) | S.W.H. Registration Number 0 0 7 9 1 0 0 8

312 596 3377 (Phone Number) | IL0069506160 (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) | Ind. (State) | 46319 (Zip) | 312 768 3400 (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: Waste Solvents Paint | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Flammable Liquid | HAZARD CLASS: U N 1 9 9 3 (UN or NA Number) | K 0 7 8 (EPA HW Number)

WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 0 0 5 0 0 0 (47–52) | 1 GALLONS (Circle One) 2 CU. YDS. (53)

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION. Raymond R. Lennee (Authorized Signature) DATE: 8-24-84

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) Michael L. Pfeifer (Authorized Signature) DATE: 08 24 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:

A Dwyer (Authorized Signature) DATE: 08 24 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 4

SITE COPY - PART 3

212 F T-50

11,800 BTU/LB
1.9% Cl.

006777

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

0960307

Authorization Number: Out of State

The Valspar Corporation (Company Name) | 1330 S. Kilbourn Ave., (Address) | 312 762 7000 (Phone Number) | 0 3 1 6 0 0 5 4 4 5 G (Generator Number)

Chicago, (City) | Illinois (State) | 60623 (Zip) | I L D 0 0 8 1 0 4 0 1 0 7 (EPA Number)

WASTE HAULER(S)

Mr. Frank, Inc, (Hauler Name) | 201 W. 155th St., South Holland (Hauler Address) | S.W.H. Registration Number: 0079/009

312 596 3377 (Phone Number) | I L D 0 6 9 5 0 6 1 6 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) | Ind. (State) | 46319 (Zip) | 312 768 3400 (Phone Number) | I N D 0 1 6 3 6 0 2 6 5 (EPA Number)

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

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

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Waste Solvents Paint | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Flammable Liquid | HAZARD CLASS: U N 1 9 9 3 (UN or NA Number) | K 0 7 8 (EPA HW Number)

WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 0 0 5 0 0 0 (47–52) | 1 GALLONS (Circle One) 2 CU. YDS. (53)

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Ernest R. Boylak (Authorized Signature) | DATE: 9-12-84

WASTE HAULER

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

(1) D W Bogda (Authorized Signature) | DATE: 09/12/84 (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: 9/12/84 (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

212K T-50 | 12100 BTU I.C.

006776

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. ILD052437506 Manifest Document No. 00008

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
VALSPAR CORP.
2500-8th Ave. E. Moline, ILL.

4. Generator's Phone (309) 752-1450 612-14

A. Illinois Manifest Document Number IL 1115602

B. Illinois Generator's ID 1610250001

5. Transporter 1 Company Name MR. FRANK INC.

6. US EPA ID Number ILD069506160

C. Illinois Tranporter's ID 0079

D. (312) 596 3377 Transporter's Phone

7. Transporter 2 Company Name

8. US EPA ID Number

E. Illinois Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL
420-So. COLFAX
GRIFFITH, IND

10. US EPA ID Number IND016360265

G. Illinois Facility's ID 9180890002

H. Facility's Phone (312) 768-3400

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a.	HM X WASTE FLAMMABLE LIQUID, NOS FLAMMABLE LIQUID UN1993	001	FT	05000	G	EPA HW Number 0001 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
DIRTY 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 governmental regulations, and Illinois regulations.

Printed/Typed Name CHRIS A. HARPER Signature Chris A. Harper Date 3-11-85 Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name Michael Martin Signature Michael Martin Date 3 11 85 Month Day Year

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name Signature Date Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name FDUNFEE Signature F Dunfee Date 3 11 85 Month Day Year

GENERATOR / TRANSPORTER / FACILITY

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV. # 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½ Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

210 E T50

009222

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.: IL005249750 — Manifest Document No.: 61000 08

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: VALSPAR CORP. 2500 - 8th AVE. EAST MOLINE, ILL. 61244

4. Generator's Phone (309) 752-1450

A. Illinois Manifest Document Number: IL 1161215

B. Illinois Generator's ID: 1610250001

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

6. US EPA ID Number: IL0069506160

C. Illinois Tranporter's ID: 0079

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

7. Transporter 2 Company Name:

8. US EPA ID Number:

E. Illinois Transporter's ID:

F. Transporter's Phone:

9. Designated Facility Name and Site Address: AMERICAN CHEMICAL 420- SO. COLFAX GRIFFITH, IND.

10. US EPA ID Number: IND016360265

G. Illinois Facility's ID: 7180890002

H. Facility's Phone: (312) 768-3400

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a. WASTE FLAMMABLE LIQUID NOS FLAMMABLE LIQUID UN 1993	X	001	TT	03000	G	EPA HW Number: 0001; 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: Dirty 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 governmental regulations, and Illinois regulations.

Printed/Typed Name	Signature	Date (Month Day Year)
CHRIS A. HARPER	Chris A. Harper	03 25 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)
MICHAEL MARTIN	Michael Martin	3 25 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)
JNUNFES	FOSTER DUFFY	3 25 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

210 FT-50

009224

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. ILD052437506 Manifest Document No. 100009

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
VAISPAR CORP.
2500 - 8th Ave. EAST Moline, Ill. 61244

4. Generator's Phone (309) 752-1450

A. Illinois Manifest Document Number IL 1167091

B. Illinois Generator's ID 1610250001

5. Transporter 1 Company Name MR. FRANK INC.

6. US EPA ID Number ILD069506160

C. Illinois Tranporter's ID 00179

D. (312) 576-3377 Transporter's Phone

7. Transporter 2 Company Name

8. US EPA ID Number

E. Illinois Transporter's ID

F. ( ) Transporter's Phone

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL
420 So. COLFAX
GRIFFITH, IN 10.

10. US EPA ID Number IND016360265

G. Illinois Facility's ID 9180890002

H. Facility's Phone (312) 768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
GENERATOR a. WASTE FLAMMABLE LIQUID N.O.S. FLAMMABLE LIQUID UN 1993	X	001	TT	04500	G	EPA HW Number D0001 Authorization Number 000000
b.						EPA HW Number Authorization Number
c.						EPA HW Number Authorization Number
d.						EPA HW Number Authorization Number

J. Additional Descriptions for Materials Listed Above
Dirty 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 governmental regulations, and Illinois regulations.

Printed/Typed Name	Signature	Date Month Day Year
CHRIS A. HARPER	Chris A. Harper	05 02 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month Day Year
John VanVlymen	John VanVlymen	05 02 85

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name	Signature	Date Month Day Year

FACILITY

19. Discrepancy Indication Space

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

Printed/Typed Name	Signature	Date Month Day Year
F DUNFEE	F Dunfee	5 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

210 RT-50

009226

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.: IL005243750 6 | Manifest Document No.: 00010

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: VALSPAR CORP. 2500 8th Ave. East Moline, Ill. 61244

4. Generator's Phone (309) 752-1450

A. Illinois Manifest Document Number: IL 1167090

B. Illinois Generator's ID: 1610250001

5. Transporter 1 Company Name: MR. FRANK

6. US EPA ID Number: IL006950616 0

C. Illinois Tranporter's ID: 0079

D. (312) 5963377 Transporter's Phone

7. Transporter 2 Company Name

8. US EPA ID Number

E. Illinois Transporter's ID

F. ( ) Transporter's Phone

9. Designated Facility Name and Site Address: AMERICAN Chemical 420 So Colfax Griffith, Ind

10. US EPA ID Number: IN0016360265

G. Illinois Facility's ID: 9180890002

H. Facility's Phone: (312) 768-3400

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	HM X WASTE FLAMMABLE LIQUID NOS Flammable Liquid UN1993	001	TT	04500	G	EPA HW Number 0001 / 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: Dirty 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 governmental regulations, and Illinois regulations.

Printed/Typed Name: CHRIS A. HARPER | Signature: Chris A Harper | Date: Month 06 Day 04 Year 85

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: MICHAEL MARTIN | Signature: Michael Martin | Date: Month 6 Day 4 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: ADUNFEE | Signature: [signature] | Date: Month 6 Day 4 Year 85

GENERATOR / TRANSPORTER / FACILITY

IN ILLINOIS: 217 / 782-3637 "24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS" OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV.# 5

This Agency is authorized to require pursuant to Illinois Revised Statutes 1983 Chapter 111½ Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

210 009227

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. IL0052437506 Manifest Document No. 00009

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
Valspar Chem. Corp.
2500 8th Ave. E. Moline ILL. 61244

A. Illinois Manifest Document Number IL 1167088

4. Generator's Phone (309) 752-1450

B. Illinois Generator's ID 1610250101

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

6. US EPA ID Number: IL0069506160

C. Illinois Tranporter's ID 100175

D. (312) 696-3377 Transporter's Phone

7. Transporter 2 Company Name

8. US EPA ID Number

E. Illinois Transporter's ID

F. ( ) Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical
420 - So. Colfax
Griffith, IN 10

10. US EPA ID Number: IND016360265

G. Illinois Facility's ID 9118089000 2

H. Facility's Phone (312) 768-3400

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
GENERATOR a.	WASTE Flammable Liquid NOS Flammable Liquid UN1993	X	001	TT	64000	G	EPA HW Number D001 / Authorization Number
b.							EPA HW Number / Authorization Number
c.							EPA HW Number / Authorization Number
d.							EPA HW Number / Authorization Number

J. Additional Descriptions for Materials Listed Above: Dirty 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 governmental regulations, and Illinois regulations.

Printed/Typed Name: CHRIS A. HARPER — Signature: Chris A Harper — Date (Month Day Year): 07 23 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: MICHAEL MARTIN — Signature: Michael Martin — Date (Month Day Year): 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: EDUNFEE — Signature — Date (Month Day Year): 7 23 85

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS: OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV.# 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½ Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

210K T-50

009228

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.: ILD052437506 / 00008

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: VALSPAR CORP. 2500 - 8TH AVE. EAST MOLINE, ILL. 61244

A. Illinois Manifest Document Number: IL 1167087

4. Generator's Phone: (309) 752-1450

B. Illinois Generator's ID: 1161025000 1

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

6. US EPA ID Number: ILD069506160

C. Illinois Tranporter's ID: 10079

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

7. Transporter 2 Company Name

8. US EPA ID Number

E. Illinois Transporter's ID

F. ( ) Transporter's Phone

9. Designated Facility Name and Site Address: AMERICAN CHEMICAL 420 - So. GOLFAX GRIFFITH, IND.

10. US EPA ID Number: IND016360265

G. Illinois Facility's ID: 9180890002

H. Facility's Phone: (312) 768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE FLAMMMABLE LIQUID N.O.S. Flammable Liquid UN1993	X	001	TD	4200	G	EPA HW Number D001 / Authorization Number 2000100
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: Dirty Solvent

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

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

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

Printed/Typed Name	Signature	Date (Month Day Year)
CHRIS A HARPER	Chris A Harper	10 01 85

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)
JOHN VAN VLYMEN	John Van Vlymen	10 01 85

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)

19. Discrepancy Indication Space

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

Printed/Typed Name	Signature	Date (Month Day Year)
F DUNFEE	F Dunfee	10 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

211 E T-C 009231

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. ILD052437506 Manifest Document No. 0001

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
VALSPAR CORP.
2500 - 8th AVE. East Moline, IL 61244

4. Generator's Phone (309) 752-1450

A. Illinois Manifest Document Number IL 1432090

B. Illinois Generator's ID 1610250001

5. Transporter 1 Company Name MR. FRANK Inc

6. US EPA ID Number ILD069506160

C. Illinois Tranporter's ID 0079

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

7. Transporter 2 Company Name

8. US EPA ID Number

E. Illinois Transporter's ID

F. ( ) Transporter's Phone

9. Designated Facility Name and Site Address
AMERICAN Chemical
420 - South Colfax
Griffith, Ind.

10. US EPA ID Number IND016360265

G. Illinois Facility's ID 9180890002

H. Facility's Phone (312) 768-3400

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	HM X WASTE Flammable Liquid N.O.S. Flammable Liquid UN 1993	001	TT	050.00	G 1	EPA HW Number 0001 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 Dirty Solvent

K. Handling Codes for Wastes Listed Above 1 = Gallons 2 = Cubic Yards

Unless I am a small quantity generator who has been exempted by statute or regglation 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.

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, 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 CHRIS A. HARPER Signature Chris A. Harper Date Month Day Year 11 14 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name Moe Wanhoff Signature Moe Wanhoff Date Month Day Year 11 14 85

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name Signature Date Month Day Year

FACILITY

19. Discrepancy Indication Space

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

Printed/Typed Name FDUNFEE Signature F Dunfee Date Month Day Year 11 14 85

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV. #6

This Agency is authorized to require pursuant to Illinois Revised Statutes, 1983, Chapter 111½ Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

211KT-SO

009233

STATE OF ILLINOIS ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

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

IL532-0610

LPC 62 8/81

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) **EPA Form 8700-22 (3-84)** Form Approved. OMB No. 2000-0404. Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I L D 0 8 1 0 4 0 1 0 7 — Manifest Document No. 0 0 0 7

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

3. Generator's Name and Mailing Address
The Valspar Corporation
1330 S. Kilbourn Ave., Chicago, Il. 60623

4. Generator's Phone (312) 762-7000

A. Illinois Manifest Document Number: IL 1134004

B. Illinois Generator's ID: 0 3 1 1 6 0 0 5 4 4 5

C. Illinois Tranporter's ID: 0 0 1 7 9

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

6. US EPA ID Number: I L D 0 6 9 5 0 6 1 6 0

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

7. Transporter 2 Company Name

8. US EPA ID Number

E. Illinois Transporter's ID

F. Transporter's Phone

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

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

G. Illinois Facility's ID: 9 1 8 0 8 9 0 0 0 2

H. Facility's Phone: (312) 768-3400

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	X Waste Flammable Liquid, N.O.S. Flammable Liquid UN1993	001	TP	030.00	G	EPA HW Number: D001 / Authorization Number
b.						EPA HW Number / Authorization Number
c.						EPA HW Number / Authorization Number
d.						EPA HW Number / Authorization Number

J. Additional Descriptions for Materials Listed Above
Waste Solvents & Paint

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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)
Raymond R. Sonnee	Raymond R Sonnee	10 29 84

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)
Michael A. Pfeifer	Michael A. Pfeifer	10 29 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)
F DUNFEE	F Dunfee	10 29 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

212RT-50 12100 BTU ; 1.9% Cl.

006771

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.: ILD081040107 00008

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
The Valspar Corporation
1330 S. Kilbourn Ave., Chicago, Il. 60623

4. Generator's Phone (312) 762-7000

A. Illinois Manifest Document Number: IL 1134005

B. Illinois Generator's ID: 0 3 1 6 0 0 5 4 4 5

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

6. US EPA ID Number: ILD069506160

C. Illinois Tranporter's ID: 0 0 7 9

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

7. Transporter 2 Company Name

8. US EPA ID Number

E. Illinois Transporter's ID

F. ( ) Transporter's Phone

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

10. US EPA ID Number: IND016360265

G. Illinois Facility's ID: 9180990002

H. Facility's Phone (312) 768-3400

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a.	X Flammable Waste Liquid, N. O. S. Flammable Liquid UN1993	X	001	TT	02500	G	EPA HW Number K088; Authorization Number
b.							EPA HW Number; Authorization Number
c.							EPA HW Number; Authorization Number
d.							EPA HW Number; Authorization Number

J. Additional Descriptions for Materials Listed Above
Waste Solvents & Paont

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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)
Raymond R. Sonnee	Ray Sonnee	10 29 84

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)
MICHAEL A PFEIFER	Michael A. Pfeifer	10 29 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)
P DUNFEE	P Dunfee	10 29 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

212RT-50

006770

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.: IL D 0 8 1 0 4 0 1 0 7 — Manifest Document No.: 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: The Valspar Corporation, 1330 S. Kilbourn Ave., Chicago, Illinois 60623

4. Generator's Phone: 762-7000

A. Illinois Manifest Document Number: IL 1122706

B. Illinois Generator's ID: 0 3 1 6 0 0 5 4 4 5

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

6. US EPA ID Number: IL D 0 6 9 5 0 6 1 6 0

C. Illinois Tranporter's ID: 0 0 7 9

D. Transporter's Phone: 312596-3377

7. Transporter 2 Company Name:

8. US EPA ID Number:

E. Illinois Transporter's ID:

F. Transporter's Phone:

9. Designated Facility Name and Site Address: American Chemical, 420 S. Colfax, Girffith, Ind. 46319

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

G. Illinois Facility's ID: 9 1 8 0 8 9 0 0 0 2

H. Facility's Phone: (312) 768-3400

	HM	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a.	X	Waste Flammable Liquid, N.O.S., Flammable Liquid UN1993	0 0 1	T T	0 3 0 0 0	G	EPA HW Number / Authorization Number
b.							EPA HW Number / Authorization Number
c.							EPA HW Number / Authorization Number
d.							EPA HW Number / Authorization Number

J. Additional Descriptions for Materials Listed Above: Waste Solvents & Paint

K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information

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

Printed/Typed Name: Raymond R. Sonnee — Signature: Raymond R Sonnee — Date: Month 09 Day 21 Year 84

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: MICHAEL A. PFEIFER — Signature: Michael A. Pfeifer — Date: Month 09 Day 21 Year 84

18. Transporter 2 Acknowledgement or Receipt of Materials

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

19. Discrepancy Indication Space

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

Printed/Typed Name: F DUNFEE — Signature: F Dunfee — Date: Month 09 Day 21 Year 84

GENERATOR — TRANSPORTER — FACILITY

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV.# 5

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FACILITY COPY - PART 3

210 ET-50 11100 BTU/LB 1% cl

006774

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 8 1 0 4 0 1 0 7 | Manifest Document No.: 0 0 0 0 0 1 | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but is required by Illinois law.

GENERATOR

3. Generator's Name and Mailing Address
The Valspar Corporation
1330 S. Kilbourn Ave., Chicago, Il., 60623
4. Generator's Phone (312) 762-7000

A. Illinois Manifest Document Number: IL-122708

B. Illinois Generator's ID: 0 3 1 6 0 0 5 4 4 5

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

C. Illinois Tranporter's ID: 0 0 7 9

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

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

E. Illinois Transporter's ID

F. ( ) Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical
420 S. Colfax
Griffith, Ind. 46319
10. US EPA ID Number: I N D 0 1 6 3 6 0 2 6 5

G. Illinois Facility's ID: 9 1 8 0 8 9 0 0 0 2

H. Facility's Phone: (312) 768-3400

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a.	Waste Flammable Liquid, N.O.S. Flammable Liquid UN1993	X	001	TT	03000	G	EPA HW Number: D001 / Authorization Number
b.							EPA HW Number / Authorization Number
c.							EPA HW Number / Authorization Number
d.							EPA HW Number / Authorization Number

J. Additional Descriptions for Materials Listed Above
Waste Solvents & Paint

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

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

Printed/Typed Name: Raymond R. Sonnee | Signature: Raymond R. Sonnee | Date: Month Day Year 09 12 1984

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Michael A. Peelfer | Signature: Michael A. Peelfer | Date: Month Day Year 09 12 1984

18. Transporter 2 Acknowledgement or Receipt of Materials

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

FACILITY

19. Discrepancy Indication Space

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

Printed/Typed Name: F DUNFEE | Signature: F Dunfee | Date: Month Day Year 09 12 1984

IN ILLINOIS: 217 / 782-3637 *24 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

212 R T-50

006775

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.: ILD081040107 00000

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
The Valspar Corporation
1330 S. Kilbourn Ave., Chicago, Il. 60623

4. Generator's Phone (3 12) 762-7000

A. Illinois Manifest Document Number: IL- 1122709

B. Illinois Generator's ID: 0 3 1 6 0 0 5 4 4 5

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

6. US EPA ID Number: ILD069506160

C. Illinois Tranporter's ID: 0 0 7 9

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

7. Transporter 2 Company Name

8. US EPA ID Number

E. Illinois Transporter's ID

F. ( ) Transporter's Phone

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

10. US EPA ID Number: IND016360265

G. Illinois Facility's ID: 9 1 8 0 8 9 0 0 0 7

H. Facility's Phone: (312) 768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a. X Waste Flammable Liquid, N.O.S. Flammable Liquid UN1993	X	001	TT	4700	G	EPA HW Number: K078 / Authorization Number
b.						EPA HW Number / Authorization Number
c.						EPA HW Number / Authorization Number
d.						EPA HW Number / Authorization Number

J. Additional Descriptions for Materials Listed Above
Waste Solvents & Paint

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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)
Raymond R. Sonnee	Ray Sonnee	10 5 84

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)
GARY DRUEN	G Druen	10 05 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)
DUNFEE	A Dunfee	10 5 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

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FACILITY COPY - PART 3

211K T-SO 11700 BTU/LB ; 1.77 cl.

006773

STATE OF ILLINOIS ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

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

IL532-0610

LPC 62 8/81

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) EPA Form 8700-22 (3-84) Form Approved. OMB No. 2000-0404. Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I L D 0 8 1 0 4 0 1 0 7 | Manifest Document No. 0 0 0 0 4

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
The Valspar Corporation
1330 S. Kilbourn Ave., Chicago, Il. 60623
4. Generator's Phone (312) 762-7000

A. Illinois Manifest Document Number: IL 1122710

B. Illinois Generator's ID: 0 3 1 6 0 0 5 4 4 5

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

C. Illinois Tranporter's ID: 0 0 1 7 9

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

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

E. Illinois Transporter's ID

F. ( ) Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical
420 S. Colfax
Griffith, Ind. 46319
10. US EPA ID Number: I N D 0 1 6 3 6 0 2 6 5

G. Illinois Facility's ID: 9 I 8 0 8 9 0 0 0 2

H. Facility's Phone (312) 768-3400

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
GENERATOR a.	Waste Flammable Liquid, N.O.S. Flammable Liquid UN1993	X	0 0 1	TT	0 5 0 0 0	G	EPA HW Number: D 0 0 1 / Authorization Number: 0 0 0 0 0 0
b.							EPA HW Number / Authorization Number
c.							EPA HW Number / Authorization Number
d.							EPA HW Number / Authorization Number

J. Additional Descriptions for Materials Listed Above: Waste Solvents & Paint

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

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

Printed/Typed Name: Raymond R. Sonnee | Signature: Raymond Sonnee | Date: Month Day Year 10 19 84

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: RON BRIDGEWATER | Signature: Ron Bridgewater | Date: Month Day Year 10 19 84

18. Transporter 2 Acknowledgement or Receipt of Materials

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

FACILITY

19. Discrepancy Indication Space

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 Day Year 10 19 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

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FACILITY COPY - PART 3

211K T-50 10,500 BTU 2% Cl.

006772

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

0283701

TO BE COMPLETED BY WASTE GENERATOR

FED. ILD052437506
1-309-752-1450

Authorization Number

VALSPAR CORP (Company Name) — 2500 8TH AVE (Address)
EAST MOLINE (City) — ILL (State) — 61244 (Zip)

1610250004 G (Generator Number)

WASTE HAULER(S)

MR FRANK INC. (Hauler Name) — (Hauler Address) — 3125963377 S.W.H. Registration Number 0079029

SOUTH HOLLAND (Hauler Name) — ILL (Hauler Address) — FED. ILD069506160 S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE 3127683400

AMERICAN CHEM SERV. (Facility Name) — 420 S. COLFAX AVE (Address) — 91888902 (Site Number)
GRIFFITH (City) — IND. (State) — 46319 (Zip) — FED IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: DIRTY SOLVENT — WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

0079029 — UN1993 — D001

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: DIRTY SOLVENT — HAZARD CLASS: FLAMMABLE

WEIGHT FOR D.O.T. USE 40,000 LBS TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 005000 — 1 GALLONS (Circle One) 2 CU. YDS. 1

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 12-8-82 — Ted Block (Authorized Signature)

WASTE HAULER

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

(1) Michael Martin (Authorized Signature) — DATE: 12 08 82

(2) (Authorized Signature) — DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO X

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

(Authorized Signature) — DATE: 12 08 82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802

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

TC123RT-63 GRM 12-8-82 — SITE COPY - PART 3

002518

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

0283702

TO BE COMPLETED BY WASTE GENERATOR

1-309-752-1450

FED ILD 052437506
Authorization Number

VALSPAR CORP. (Company Name) — 2500 8 AVE (Address)
EAST MOLINE (City) — ILL (State) — 61244 (Zip)

1610250004 G
Generator Number

WASTE HAULER(S)

MR. FRANK INC (Hauler Name) — 201 W 155TH ST - SOUTH HOLLAND ILL (Hauler Address) — S.W.H. Registration Number 0079029

~~SOUTH HOLLAND~~ (Hauler Name) — (Hauler Address) — S.W.H. Registration Number FED ILD069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE 312-768-3400

AMERICAN Chem SERV. (Facility Name) — 420 S. Colfax Ave (Address) — 91808902 Site Number
GRIFFITH (City) — IND. (State) — 46319 (Zip) — FED IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: DIRTY SOLVENT 0079029

WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

VN 1993
D001

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: DIRTY SOLVENT
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: 3/9/83 — [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) Michael D. Martin (Authorized Signature) — DATE: 3/9/83

(2) _____ (Authorized Signature) — DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

[signature] (Authorized Signature) — DATE: 3/9/83

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 211 KT-50 GRM 3.9.83 SITE COPY - PART 3

005461

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

0783199

FED ILD052437506
Authorization Number (8–13)

TO BE COMPLETED BY WASTE GENERATOR

VALSPAR CORP | 2500 8TH AVE | 309 752 1450 | 16102500004 (14–24)
(Company Name) | Address | Phone Number | Generator Number

E. MOLINE | ILL | 61244 | ILD052437506
City | State | Zip | EPA Number

WASTE HAULER(S)

~~AMERICAN~~ | | S.W.H. Registration Number 0079029 (25–31)
Hauler Name | Hauler Address

Phone Number | EPA Number

MR FRANK | 201 W 155 ST | S.W.H. Registration Number (32–38)
Hauler Name | Hauler Address

S. HOLLAND ILL. | 3127683400 | ILD069506160
Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMER. CHEM. CO | 420 S. COLFAX AVE | 91808902 (39–46)
(Facility Name) | Address | Site Number

GRIFFITH. | IND | 46319 | 3127683400 | IND016360265
City | State | Zip | Phone Number | EPA Number

Alternate (Facility Name) | Address | Site Number (39–46)

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: DIRTY 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
DIRTY SOLVENT FLAMMABLE		UN 1993	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: 004000 (47–52) 1 (GALLONS) (Circle One) 2 CU. YDS. / (53)

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Ted Block (Authorized Signature) DATE: 5-9-83

WASTE HAULER

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

(1) Michael Martin (Authorized Signature) DATE: 5/9/83 (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: 05/09/83 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS, 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

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

REV. 8 4

SITE COPY - PART 3

T0211KT-50 6MM 5.9.83

005463

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

0783200
FED ILD052437506
Authorization Number 000000 (8–13)

(Company Name)	Address	Phone Number	Generator Number
Valspar Corp	2500 8th Ave.	3097521450	1610250004 G

City	State	Zip	EPA Number
East Moline	Ill.	61244	ILD052437506

WASTE HAULER(S)

Hauler Name	Hauler Address	Phone Number	S.W.H. Registration Number / EPA Number
MR Frank	201 W. 155 St. Holland, IL.		0079018 (25–31)
			ILD069506160
			S.W.H. Registration Number (32–38)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

(Facility Name)	Address	Site Number
American Chem Serv.	420 S. Colfax Ave	91808902 (39–46)

City	State	Zip	Phone Number	EPA Number
Griffith	Ind.	46319		IND016360265

Alternate (Facility Name)	Address	Site Number

City	State	Zip	Phone Number	EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Dirty 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
Dirty Solvent	Flammable	UN1993	D001

WEIGHT FOR D.O.T. USE 32,000 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL QUANTITY OF WASTE DELIVERED: 004500 (47–52) 1 GALLONS (Circle One) 2 CU. YDS. 7 (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 Jim McConnell (Authorized Signature) DATE: 5-13-83

WASTE HAULER

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

(1) X Robert [signature] (Authorized Signature) DATE: 03/13/83 (54–59)

(2) _____ (Authorized Signature) DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

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

[signature] (Authorized Signature) DATE: 05/13/83 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

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

REV # 4

SITE COPY - PART 3 To 210 LT-50 [initials] 5-13-83

005464

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

0783841

FED ILD 052437506
Authorization Number (8–13)

TO BE COMPLETED BY WASTE GENERATOR

(Company Name)	Address	Phone Number	Generator Number (14–24)
VALSPAR CORP	2500 8TH AVE	309 752 1450	1 6 1 0 2 5 0 0 0 4 6

City	State	Zip	EPA Number
E. MOLINE	ILL	61244	ILD052437506

WASTE HAULER(S)

Hauler Name	Hauler Address		S.W.H. Registration Number (25–31)
MR FRANK	201 W. 155 ST	S. HOLLAND ILL	0079027
		312 768 3400 Phone Number	IL D 0 6 4 5 0 6 1 6 0 EPA Number
			S.W.H. Registration Number (32–38)
		Phone Number	EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

(Facility Name)	Address		Site Number (39–46)
AMER. CHEM. SERV	420 S. COLFAX AVE		91808902

City	State	Zip	Phone Number	EPA Number
GRIFFITH	IND.	46319	312 768 3400	IND 0 0 6 3 6 0 2 6 5

Alternate (Facility Name)	Address	Site Number (39–46)

City	State	Zip	Phone Number	EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: DIRTY 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 DIRTY SOLV.	FLAMMABLE	UN1993	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: 003000 (47–52) — 1 GALLONS (Circle One) / 2 CU. YDS. 1 (53)

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION _____ (Authorized Signature) DATE 6-22-83

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) _____ (Authorized Signature) DATE 06/22/83 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

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

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

_____ (Authorized Signature) DATE 6-22-83 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS _____

IN ILLINOIS 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

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

REV. # 4

SITE COPY - PART 3

TO 210 RT-50 6/24 6-22-83

005465

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

0783842

FED ILD 052437506
~~Authorization Number~~ Out of State
8 13

VALSPAR CORP (Company Name) | 25008TH AVE (Address) | 309752 1450 (Phone Number) | 161025 0004 G (Generator Number) 14 24

E. MOLINE (City) | ILL (State) | 61244 (Zip) | ILD 052437506 (EPA Number)

WASTE HAULER(S)

MR FRANK (Hauler Name) | 201 W 155 ST. HOLLAND ILL (Hauler Address) | S.W.H. Registration Number 0079027 (25 31)

312 768 3400 (Phone Number) | ILD069506160 (EPA Number)

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

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMER. CHEM. CO. (Facility Name) | 420 S. COLFAX AVE (Address) | 91808902 (Site Number) 39 46

GRIFFITH (City) | IND (State) | 46319 (Zip) | 312768 3400 (Phone Number) | IND016360265 (EPA Number)

(Alternate (Facility Name)) | (Address) | (Site Number) 39 46

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

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: DIRTY 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 DIRTY SOLVENT
HAZARD CLASS: FLAMMABLE
UN 1993 (UN or NA Number) | D001 (EPA HW Number)

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 003000 (47 52) 1 GALLONS (Circle One) 2 CU. YDS. 1 (53)

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE: 9/13/83

WASTE HAULER

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

(1) [signature] (Authorized Signature) DATE: 9/13/83 (54 59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

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

[signature] (Authorized Signature) DATE: 09/13/83 (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 210K T-50 GRM 9.13.83

005466

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

0783843 (1–7)

Authorization Number OUT OF STATE (8–13)

VALSPAR CORP (Company Name) | 2500 8TH AVE (Address) | 3047521450 (Phone Number) | 16102500004 (14 Generator Number 24)

E. MOLINE (City) | IL (State) | 61244 (Zip) | ILD005243750 6 (EPA Number)

WASTE HAULER(S)

M.R. FRANK (Hauler Name) | 201 W. 155TH HOLLAND ILL (Hauler Address) | S.W.H. Registration Number 00790188 (25–31)

312 768 3400 (Phone Number) | ILD 069506160 (EPA Number)

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

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMER. CHEM. CO. (Facility Name) | 420 S. CALFAX AVE (Address) | 91808902 (39–46 Site Number)

GRIFFITH (City) | IN (State) | 46319 (Zip) | 312 768 3400 (Phone Number) | IND 016360265 (EPA Number)

(Alternate (Facility Name)) | (Address) | (39–46 Site Number)

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

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: DIRTY 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 DIRTY SOLVENT FLAMMABLE | HAZARD CLASS: UN 1993 (UN or NA Number) | 0001 (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: 00500 (47–52) | 1 ~~GALLONS~~ (Circle One) 2 CU. YDS. 1 (53)

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION _____ (Authorized Signature) | DATE: 9-20-83

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: 9/21/83 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY:

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

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

_____ (Authorized Signature) | DATE: 9/21/83 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS, 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS, 800 / 424-8802 or 202 / 426-2675

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

REV. # 4

SITE COPY - PART 3

TO 210 KT-50 GRM 9.21.83

00546T

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

0783844
1 7

Authorization Number OUT OF STATE
8 13

TO BE COMPLETED BY WASTE GENERATOR

VALSPAR CORP	2500 5TH AVE	3097521450	IL 161 0025 0004 G	
(Company Name)	Address	Phone Number	14 Generator Number	24
EAST MOLINE	ILL	61244	IL0052437506	
City	State	Zip	EPA Number	

WASTE HAULER(S)

MR. FRANK	201 W. 55TH HOLLAND ILL	S.W.H. Registration Number	0079001
Hauler Name	Hauler Address		25 31
		3127683400	IL0069506160
		Phone Number	EPA Number
		S.W.H. Registration Number	
Hauler Name	Hauler Address		32 38
		Phone Number	EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMER. CHEM. CO.	420 S. COLFAX AVE		91808902	
(Facility Name)	Address		39 Site Number	46
GRIFFITH	IND.	46319	3127683400	IND016360265
City	State	Zip	Phone Number	EPA Number
			39 Site Number	46
Alternate (Facility Name)	Address			
City	State	Zip	Phone Number	EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE DIRTY 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 DIRTY SOLVENT FLAMMABLE		UN1993	D001

WEIGHT FOR D.O.T. USE 21,750 (LBS) TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 003000 (47–52)

1. (GALLONS) (Circle One)
2. CU. YDS. 1 (53)

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Ted Bloch (Authorized Signature) DATE: 10-27-83

WASTE HAULER

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

(1) Mike Pinke (Authorized Signature) DATE: 10 27 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: 10 27 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

T0210 RT-50 GRM 10-27-83

0U5407

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

0783846
1 7

Authorization Number OUT OF STATE
8 13

TO BE COMPLETED BY WASTE GENERATOR

VALSPAR CORP (Company Name) | 2500 8TH AVE (Address) | 3097521450 (Phone Number) | 161025000 4 (14 Generator Number 24)

EAST MOLINE (City) | ILL (State) | 61244 (Zip)

ILD052437506 (EPA Number)

WASTE HAULER(S)

MR FRANK (Hauler Name) | 201 W. 55TH HOLLAND ILL (Hauler Address)

S.W.H. Registration Number 0079001 (25 31)

3127683400 (Phone Number)

ILD0695061 6 0 (EPA Number)

Hauler Name | Hauler Address

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

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMER. CHEM. CO (Facility Name) | 420 S. COLFAX AVE (Address)

91808902 (39 Site Number 46)

GRIFFITH (City) | IND (State) | 46319 (Zip) | 3127683400 (Phone Number) | IND016360265 (EPA Number)

Alternate (Facility Name) | Address | 39 Site Number 46

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE DIRTY 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 DIRTY SOLVENT	FLAMMABLE	UN1993	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: 100300 (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 Neil Block (Authorized Signature) DATE: 10-31-83

WASTE HAULER

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

(1) Mike Pfeifer (Authorized Signature) DATE: 10 31 83 (54 59)

(2) _____ (Authorized Signature) DATE: / / (60 65)

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:

D Mapes (Authorized Signature) DATE: 10 31 83 (60 65)

COMMENTS OR SPECIAL INSTRUCTIONS _____

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

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

REV # 4

SITE COPY - PART 3

TO210RT-50 GRM 10.31.83

005408

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

0783847
1 7

~~Authorization Number~~ OUT OF STATE
8 13

VALSPAR CORP (Company Name) | 2500 8TH AVE (Address) | 309 752 1450 (Phone Number) | 161 025 0004 G (Generator Number) 14 24

E. MOLINE (City) | ILL (State) | 61244 (Zip) | ILD 052 437 506 (EPA Number)

WASTE HAULER(S)

MR FRANK (Hauler Name) | 201 W. 55TH HOLLAND ILL (Hauler Address) | S.W.H. Registration Number 0029019 (25 31)

312 768 3400 (Phone Number) | ILD 069 506 160 (EPA Number)

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

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMER. CHEM. Co. (Facility Name) | 420 S. COLFAX AVE (Address) | 91808902 (Site Number) 39 46

GRIFFITH (City) | IND (State) | 46319 (Zip) | 312 768 3400 (Phone Number) | IND 016 360 265 (EPA Number)

Alternate (Facility Name) | Address | Site Number 39 46

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE DIRTY SOLVENT WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: WASTE SOLVENT
HAZARD CLASS: FLAMMABLE
UN 1993 (UN or NA Number) | 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: 00 4800 (47 52) 1 GALLONS (Circle One) 2 CU. YDS. 1 (53)

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE: 11.14.83

WASTE HAULER

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

(1) [signature] (Authorized Signature) DATE: 11/14/83 (54 59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO ✓

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

[signature] (Authorized Signature) DATE: 11/14/83 (60 65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

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

REV. # 4

SITE COPY - PART 3

TO 210 FT 5-50 GRM 11.14.83

005470

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

0559178

OUT OF STATE

Authorization Number

VALSPR CORP (Company Name) | 2500 8 Ave (Address) | 309 7521450 (Phone Number) | 161 025 0004 (Generator Number)

E. MOLINE (City) | IL (State) | 61244 (Zip) | ILD 052437506 (EPA Number)

WASTE HAULER(S)

MR. FRANK (Hauler Name) | 201 W 155 ST S. HOLLAND IL. (Hauler Address) | S.W.H. Registration Number 00790XX 18

3125963377 (Phone Number) | ILD069506160 (EPA Number)

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

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN Chem Serv (Facility Name) | 420 S. COLFAX Ave (Address) | 91808902 (Site Number)

GRIFFITH (City) | IND (State) | 46319 (Zip) | 3127693400 (Phone Number) | IND 016360265 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: DIRTY SOLENT WASTE 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 _____ LBS TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: ~~00 5000~~ 00 4000 (47, 52)

1 GALLONS (Circle One)
2 CU. YDS. 1 (53)

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION. IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION: [signature] (Authorized Signature) DATE 1-18-84

WASTE HAULER

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

(1) Michael Martin (Authorized Signature) DATE 01/18/84 (54, 59)

(2) _____ (Authorized Signature) DATE __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO _____

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

[signature] (Authorized Signature) DATE 01/18/84 (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. # 3

SITE COPY - PART 3

T0210E T-50 GRM 1.18.84

005457

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

0783860
OUT OF STATE
Authorization Number

VALSPAR CORP (Company Name) | 2500 8TH AVE (Address) | 3097521450 (Phone Number) | 1610250004 G (Generator Number)
EAST MOLINE (City) | ILL (State) | 61244 (Zip) | ILD052437506 (EPA Number)

WASTE HAULER(S)

MR FRANK (Hauler Name) | 201 W 155TH HOLLAND ILL (Hauler Address) | S.W.H. Registration Number 0079001
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 CHEMSERV. (Facility Name) | 420 COLFAX AVE (Address) | 918089002 (Site Number)
GRIFFITH (City) | IN (State) | 46319 (Zip) | 3127683400 (Phone Number) | IND016360265 (EPA Number)

Alternate (Facility Name) | Address | Site Number
City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: DIRTY 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
DIRTY SOLVENT	FLAMMABLE	UN1993	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: 3000 (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 Jed Block (Authorized Signature) DATE: 2-8-84

WASTE HAULER

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

(1) Mike Leigh (Authorized Signature) DATE: 02 08 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 08 84 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

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

REV. # 4

SITE COPY - PART 3

To 212 RT-50 GRN 2-8-84

006749

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

0783858

TO BE COMPLETED BY WASTE GENERATOR

FED IL D052437506
Authorization Number
OUT OF STATE

YALESPAR CORP. (Company Name) | 2500 8TH AVE (Address) | 3097521450 (Phone Number) | 1610250004/G (14 Generator Number 24)

E. MOLINE (City) | ILL (State) | 61244 (Zip) | ILD052437506 (EPA Number)

WASTE HAULER(S)

MR. FRANK (Hauler Name) | 201 W 155 ST S. HOLLAND ILL (Hauler Address) | S.W.H. Registration Number 00790 01 (25 31)

3127683400 (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 CHEM. SERV. (Facility Name) | 420 S. COLFAX AVE (Address) | 91808903 (39 Site Number 46)

GRIFFITH (City) | IND (State) | 46819 (Zip) | 3127683400 (Phone Number) | IND016360265 (EPA Number)

Alternate (Facility Name) | Address | 39 Site Number 46

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: DIRTY 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:		
DIRTY SOLVENT	FLAMMABLE	UN1993 (UN or NA Number)	D001 (EPA HW Number)

WEIGHT FOR D.O.T. USE: 21,000 LBS / TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 003000 (47 52) 1 GALLONS (Circle One) / 2 CU. YDS. 1 (53)

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Bill Jackson (Authorized Signature) DATE: 3-1-84

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) [redacted] (Authorized Signature) DATE: 3/1/84 (54 59)

(2) Mike Hoefle (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: 03/02/84 (60 65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

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

REV. # 4

SITE COPY - PART 3

To 211 KT-50 GRN 3.2.84

006750

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

0783848
Authorization Number OUT OF STATE

TO BE COMPLETED BY WASTE GENERATOR

VALSPAR CORP (Company Name) | 2500 5TH AVE (Address) | 309 755 1450 (Phone Number) | 1 61 02 5 00004 G (Generator Number)
E. MOLINE (City) | IL (State) | 61244 (Zip) | ILD 052437506 (EPA Number)

WASTE HAULER(S)

MR FRANK (Hauler Name) | 201 W 155 ST S. HOLLAND IL (Hauler Address) | S.W.H. Registration Number 0079019
~~312 768 3400~~ (Phone Number) | ILD 065506164 (EPA Number)

(Hauler Name) | (Hauler Address) | S.W.H. Registration Number
312 596 3377 (Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMER. CHEM SERV (Facility Name) | 420 S. COLFAX AVE (Address) | 91808903 (Site Number)
GRIFFITH (City) | IND (State) | 46319 (Zip) | 312 768 3400 (Phone Number) | IND 016360265 (EPA Number)

(Alternate (Facility Name)) | (Address) | (Site Number)
(City) | (State) | (Zip) | (Phone Number) | (EPA Number)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: DIRTY SOLV | WASTE 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 SOLV, | HAZARD CLASS: FLAMMABLE | UN 1993 (UN or NA Number) | D001 (EPA HW Number)

WEIGHT FOR D.O.T. USE 35000 (LBS) TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 004500 | 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 Ted Black (Authorized Signature) DATE: 3-8-84

WASTE HAULER

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

(1) [signature] (Authorized Signature) DATE: 03/08/84

(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 3/8/84

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

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 ET-50 GRM 3.8.84

006752

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

0559179

Authorization Number

VALSPAR CORP (Company Name) | 2500 8TH AVE (Address) | 3097521450 (Phone Number) | 1610250004 (Generator Number)

E. MOLINE (City) | ILL (State) | 61244 (Zip) | ILD052437506 (EPA Number)

WASTE HAULER(S)

MR. FRANK (Hauler Name) | 201 W 155ST S HOLLAND ILL (Hauler Address) | S.W.H. Registration Number 0079026

3127683400 (Phone Number) | ILD069506160 (EPA Number)

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

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN Chem. Serv (Facility Name) | 420 S. COLFAX AVE (Address) | 9180 8902 (Site Number)

GRIFFITH (City) | IND (State) | 46319 (Zip) | 3127683400 (Phone Number) | IND016360265 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: DIRTY 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: DIRTY SOLVENT HAZARD CLASS: FLAMMABLE UN1993 (UN or NA Number) D001 (EPA HW Number)

WEIGHT FOR D.O.T. USE 43,000 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED 005000 1 GALLONS (Circle One) 2 CU. YDS. 1

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Bill Jackson (Authorized Signature) DATE: 4/5/84

WASTE HAULER

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

(1) John Van Vleymen (Authorized Signature) DATE: 04/05/84

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ____

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

(Authorized Signature) [signature] DATE 4 5 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 # 3

SITE COPY - PART 3

TO 212 FT-50 GRM 4.5.84

006754

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

0783198

FED ILD052437506
~~Authorization Number~~ 8 13

(Company Name)	Address	Phone Number	Generator Number
Valspar Corp.	2500 8th Ave	3097521450	1610250004

City	State	Zip	EPA Number
E. Moline	ILL	61244	ILD052437506

WASTE HAULER(S)

Hauler Name	Hauler Address	S.W.H. Registration Number	Phone Number	EPA Number
MR. Frank	201 W. 155 St So. Holland, ILL	0079001	3127683400	ILD069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

(Facility Name)	Address	Site Number	City	State	Zip	Phone Number	EPA Number
American Chem. Serv.	420 So. Colfax Ave.	9180890	Griffith	IND	46319	3127683400	IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Dirty 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: Dirty Solvent HAZARD CLASS: Flammable UN 1993 (UN or NA Number) B001 (EPA HW Number)

WEIGHT FOR D.O.T. USE 24,000 LBS. TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 003000 (47–52) 1 GALLONS (Circle One) 2 CU. YDS. 1 (53)

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Chris A. Harper (Authorized Signature) DATE: 4-25-84

WASTE HAULER

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

(1) Mike Pfeifer (Driver) (Authorized Signature) DATE: 4/25/84 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY* HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ____

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

[signature] (Authorized Signature) DATE: 04/25/84 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: ____

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

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

REV. # 4

SITE COPY - PART 3

To 212 E T-50 GRU

006755

0783861

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

...MPLETED BY ...ENERATOR

~~FED ID 052437506~~
Authorization Number

OUT OF STATE DISPOSAL

VALSPAR CORP (Company Name) | 2500 8TH AVE (Address) | 3097521450 (Phone Number) | 1610250004 (Generator Number) G

E. MOLINE (City) | ILL (State) | 61244 (Zip) | ILD052437506 (EPA Number)

WASTE HAULER(S)

MR. FRANK (Hauler Name) | 201 W 155 ST 5 HOLLAND ILL (Hauler Address) | S.W.H. Registration Number 00790129

3127683400 (Phone Number) | ILD069506160 (EPA Number)

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

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEM. SERV. (Facility Name) | 4205 COLFAX AVE (Address) | 91808902 (Site Number)

GRIFFITH (City) | IND (State) | 46319 (Zip) | 3127683400 (Phone Number) | IND 016360265 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: DIRTY 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: DIRTY SOLVENT
HAZARD CLASS: FLAMMABLE
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: 004500 (47–52) 1 GALLONS (Circle One) 2 CU. YDS. 1 (53)

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Bill Jackson (Authorized Signature) DATE: 5/2/83

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) Michael Martin (Authorized Signature) DATE: 05/02/83 (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.

J Dumfee (Authorized Signature) DATE: 05/02/83 (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

T0211FT-50 GRM 5.2.83

005462

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

0783851

FED ILD 052437506
Authorization Number

Valspar Corp. (Company Name) | 2500-8th Ave (Address) | 3097521450 (Phone Number) | 1610250004 (Generator Number)
E. Moline (City) | Ill. (State) | 61244 (Zip) | ILD052437506 (EPA Number)

WASTE HAULER(S)

Mr. Frank (Hauler Name) | 201 W. 155 St (Hauler Address) | S.W.H. Registration Number 007901
So. Holland Ill. | 3125963377 (Phone Number) | ILD069506160 (EPA Number)

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chem. Serv. (Facility Name) | 420 So. Colfax Ave (Address) | 918089 02 (Site Number)
Griffith (City) | IND (State) | 46319 (Zip) | 3127683400 (Phone Number) | IND016360265 (EPA Number)

Alternate (Facility Name) | Address | Site Number
City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Dirty 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: Dirty Solvent
HAZARD CLASS: Flammable
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: 004200 (47–52) 1 GALLONS (Circle One) 2 CU. YDS. 1 (53)

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Chris A. Harper (Authorized Signature) DATE: 7-2-84

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) Michael Martin (Authorized Signature) DATE: 07/2/84 (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:

T Dunfee (Authorized Signature) DATE: 07/02/84 (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

210 KT-50

006757

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

0783852
7

FED IL0052437506
Authorization Number (8–13)

TO BE COMPLETED BY WASTE GENERATOR

Valspar Corp.	2500-8th Ave	3097521450	16102500047
(Company Name)	Address	Phone Number (14)	Generator Number (1–24)
E. Moline	Ill	61244	IL0052437506
City	State	Zip	EPA Number

WASTE HAULER(S)

Mr. Frank	201-W-155 St-So. Holland Ill.	S.W.H. Registration Number 0079019 (25–31)
Hauler Name	Hauler Address	
	3125963377	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

American Chem. Serv.	4120-So Colfax Ave.	91808902 (39–46)
(Facility Name)	Address	Site Number
Griffith	Ind.	46319 3127683400 IND016360265
City	State	Zip Phone Number EPA Number
Alternate (Facility Name)	Address	Site Number (39–46)
City	State	Zip Phone Number EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Dirty 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
Dirty Solvent	Flammable	UN1993	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: 004500 (47–52) GALLONS (Circle One) / 2 CU. YDS. 1 (53)

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION — Chris A. Harper (Authorized Signature) — DATE: 7-16-84

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) Michael Martin (Authorized Signature) — DATE: 07/16/84 (54–59)

(2) _____ (Authorized Signature) — DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO_____

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

T Dimple (Authorized Signature) — DATE: 7/16/84 (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

211E T-50

006758

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

0783849

Authorization Number FED ILD052437506

(Company Name)	Address	Phone Number	Generator Number
Valspar Corp.	2500 8th Ave	3097521450	1610250004

City	State	Zip	EPA Number
E. Moline	Ill	61244	ILD052437506

WASTE HAULER(S)

Hauler Name	Hauler Address	S.W.H. Registration Number
Mr. Frank	201 W 155 St. So. Holland Ill	0079018

Phone Number	EPA Number
~~3127683400~~	ILD069506160

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

Phone Number	EPA Number
3125963377	

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

(Facility Name)	Address	Site Number
American Chemical Serv.	420 So. Colfax Ave.	91808902

City	State	Zip	Phone Number	EPA Number
Griffith	Ind	46319	3127683400	IND016360265

Alternate (Facility Name)	Address	Site Number

City	State	Zip	Phone Number	EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Dirty 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
Dirty Solvent	Flammable	UN1993	D001

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: 005000 1 GALLONS (Circle One) 2 CU. YDS. 1

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION X Julius Arrington (Authorized Signature) DATE: 5-17-84

WASTE HAULER

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

(1) John Van Vlymen (Authorized Signature) DATE: 05/17/84

(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:

J Drafee (Authorized Signature) DATE: 5/17/84

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

210 RT-50

006756

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

0783853

Authorization Number FED IL005243750

Valspar Corp. (Company Name) | 2500-8th Ave (Address) | 3097521450 (Phone Number) | 1610250004 (Generator Number)

E. Moline (City) | Ill. (State) | 61244 (Zip) | IL0052437506 (EPA Number)

WASTE HAULER(S)

Mr. Frank (Hauler Name) | 201 W. 155 St (Hauler Address) So. Holland, Ill. | S.W.H. Registration Number 0079018

3125963377 (Phone Number) | IL0069506160 (EPA Number)

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

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chem. Serv. (Facility Name) - 420 So. Colfax Ave (Address) | 9180890 2 (Site Number)

Griffith (City) | Ind (State) | 46319 (Zip) | 3127683400 (Phone Number) | IND016360265 (EPA Number)

Alternate (Facility Name) | Address | Site Number

City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Dirty 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: Dirty Solvent HAZARD CLASS: Flammable | UN or NA Number: 4N1993 | EPA HW Number: 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: 004200 (47–52) 1 GALLONS (Circle One) 2 CU. YDS. 1 (53)

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Chris A. Harper (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) Michael Martin (Authorized Signature) DATE: 08/06/84 (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 08/06/84 (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

212F 11800 BTU
T-50 1% Cl

006760

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

0783854

FED ILD 052437506
Authorization Number

Valspar Corp. (Company Name) | 2500 8th Ave. (Address) | 3097521450 (Phone Number) | 1610250004 (Generator Number)
E. Moline (City) | Ill (State) | 61244 (Zip) | IL 0052437506 (EPA Number)

WASTE HAULER(S)

Mr. Frank (Hauler Name) | 201 W. 155-St So, Holland, Ill (Hauler Address) | S.W.H. Registration Number 0079001
3125963377 (Phone Number) | IL0069506160 (EPA Number)

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chem. Serv. (Facility Name) | 420 S. Colfax Ave. (Address) | 9180 8902 (Site Number)
City | Ind. (State) | 46319 (Zip) | 3127683400 (Phone Number) | IND01630265 (EPA Number)

Alternate (Facility Name) | Address | Site Number
City | State | Zip | Phone Number | EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Dirty 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: Dirty Solvent
HAZARD CLASS: Flammable
UN 1993 (UN or NA Number)
D001 (EPA HW Number)

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)
WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.
QUANTITY OF WASTE DELIVERED: 003000 (47–52) 1 GALLONS (Circle One) 2 CU. YDS. 1 (53)

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Chris A. Harper (Authorized Signature) DATE: 8-16-84

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) Michael A. Reifer (Authorized Signature) DATE: 08 16 84 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO _____

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

_____ (Authorized Signature) DATE: 08 16 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

211E T-50 9800 BTU/CB 1.8% Cl.

006761

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

0783855

~~Authorization Number~~ FeOIL 0052437506

(Company Name)	Address	Phone Number	Generator Number
Valspar Corp	2500 8th Ave.	3097521450	1610250004

City	State	Zip	EPA Number
E. Moline	Ill	61244	IL0052437506

WASTE HAULER(S)

Hauler Name	Hauler Address	S.W.H. Registration Number
Mr. Frank	201-W. 155 St. So. Holland, Ill.	0079011

Phone Number	EPA Number
3125963377	IL0069506160

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

Phone Number	EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

(Facility Name)	Address	Site Number
American Chem. Serv.	420 So. Colfax Ave.	~~218089000~~ ~~218089002~~

City	State	Zip	Phone Number	EPA Number
Griffith	Ind.	46319	3127683400	IN0016360265

Alternate (Facility Name)	Address	Site Number

City	State	Zip	Phone Number	EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Dirty 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
Dirty Solvent	Flammable	4N1993	0001

WEIGHT FOR D.O.T. USE 33600 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 004200 1 GALLONS (Circle One) 2 CU. YDS. 1

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Chris A. Hayson (Authorized Signature) DATE: 9-12-84

WASTE HAULER

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

(1) [signature] (Authorized Signature) DATE: 09 12 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: 9 12 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

006762

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. ILD052437506 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: VALSPAR CORP. 2500 8th AVE E. Moline ILL.

4. Generator's Phone (309) 752-1450

A. Illinois Manifest Document Number: IL 1115601

B. Illinois Generator's ID: 1610250001

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

6. US EPA ID Number: ILD069506160

C. Illinois Tranporter's ID: 0079

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

7. Transporter 2 Company Name

8. US EPA ID Number

E. Illinois Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address: American Chem. 420 So. Colfax Griffith IND

10. US EPA ID Number: IND016360265

G. Illinois Facility's ID: 9180890002

H. Facility's Phone: (312) 768-3400

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	WASTE Flammable Liquid, NOS Flammable Liquid UN1993	X	001	TT	03000	G	EPA HW Number: D001 Authorization Number
b.							EPA HW Number Authorization Number
c.							EPA HW Number Authorization Number
d.							EPA HW Number Authorization Number

J. Additional Descriptions for Materials Listed Above: Dirty Solvents

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

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

Printed/Typed Name: CHRIS A. HARPER — Signature: Chris A. Harper — Date: Month 10 Day 15 Year 84

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: MICHAEL A. PFEIFER — Signature: Michael A. Pfeifer — Date: Month 10 Day 15 Year 84

18. Transporter 2 Acknowledgement or Receipt of Materials

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

19. Discrepancy Indication Space

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

Printed/Typed Name: F DUNFEE — Signature: F Dunfee — Date: Month 10 Day 15 Year 84

GENERATOR — TRANSPORTER — FACILITY

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV.# 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½ Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

211 K T-50 11800 BTO NIL CO.

006764

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.: ILD052437506 / 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: VALSPAR CORP. 2500 - 8th Ave. E. Moline, ILL. 61244

A. Illinois Manifest Document Number: IL 1115603

4. Generator's Phone: (309) 752-1450

B. Illinois Generator's ID: 1610250001

5. Transporter 1 Company Name: MR. FRANK

6. US EPA ID Number: ILD069506160

C. Illinois Tranporter's ID: 0079

D. (312) 596 3377 Transporter's Phone

7. Transporter 2 Company Name

8. US EPA ID Number

E. Illinois Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address: AMERICAN CHEMICAL 420 So. Colfax GRIFFIN, IND.

10. US EPA ID Number: IND001636026 5

G. Illinois Facility's ID: 9180870002

H. Facility's Phone: (312) 768 3400

GENERATOR

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a.	WASTE Flammable Liquid N.O.S. Flammable Liquid UN 1993	X	001	TT	03000	G	EPA HW Number: D001; Authorization Number:
b.							EPA HW Number; Authorization Number
c.							EPA HW Number; Authorization Number
d.							EPA HW Number; Authorization Number

J. Additional Descriptions for Materials Listed Above: Dirty 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 governmental regulations, and Illinois regulations.

Printed/Typed Name: CHRIS A. HARPER — Signature: Chris A. Harper — Date (Month Day Year): 10 26 84

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: MICHAEL H. PFEIFER — Signature: Michael H. Pfeifer — Date (Month Day Year): 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: ED UNFER — Signature: Ed Unfer — Date (Month Day Year): 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

204 K.T-50 9800 BTU 2.3% Cl.

006166

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. IL005243750 6 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
VALSPAR CORPORATION
2500- 8th AVE. E. Moline, Ill.

4. Generator's Phone (309) 752-1450 61244

A. Illinois Manifest Document Number: IL 1161211

B. Illinois Generator's ID: 1610250001

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

6. US EPA ID Number: ILD069506160

C. Illinois Tranporter's ID: 0079

D. (312) 5963377 Transporter's Phone

7. Transporter 2 Company Name

8. US EPA ID Number

E. Illinois Transporter's ID

F. ( ) Transporter's Phone

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL
420- So. Colfax Ave.
GRIFFITH, IND

10. US EPA ID Number: IND016360265

G. Illinois Facility's ID: 9180890002

H. Facility's Phone: (312) 7683400

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a.	WASTE FLAMMABLE LIQUID, NOS FLAMMABLE LIQUID UN1993	X	001	TT	04500	G	EPA HW Number: 0001; 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: Dirty 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 governmental regulations, and Illinois regulations.

Printed/Typed Name: CHRIS A. HARPER — Signature: Chris A. Harper — Date: Month 11 Day 19 Year 84

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: GARY DRUEN — Signature: Gary Druen — Date: Month 11 Day 19 Year 84

18. Transporter 2 Acknowledgement or Receipt of Materials

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

19. Discrepancy Indication Space

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

Printed/Typed Name: FDUNFEE — Signature: F Dunfee — Date: Month 11 Day 19 Year 84

GENERATOR / TRANSPORTER / FACILITY

IN ILLINOIS: 217 / 782-3637 "24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS" OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV.# 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½ Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

212 KT-50 10400 BTU/LB; NIL CL.

006768

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.: ILD052437506 / 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
VALSPAR CORPORATION
2500 - 8TH AVE. E. MOLINE, ILL 61244
4. Generator's Phone (309) 752 1450

A. Illinois Manifest Document Number: IL 1161212
B. Illinois Generator's ID: 1610250001
C. Illinois Tranporter's ID: 00179
D. (312) 596 3377 Transporter's Phone

5. Transporter 1 Company Name: MR. FRANK INC.
6. US EPA ID Number: ILD069606160

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

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

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL
420 - So. COLFAX AVE
GRIFFITH, IND
10. US EPA ID Number: IND016360265

G. Illinois Facility's ID: 9180890002
H. Facility's Phone: (312) 769 3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a. WASTE Flammable Liquid N.O.S. Flammable Liquid UN 1993	X	001	TT	02900	G	EPA HW Number: D001 / Authorization Number:
b.						EPA HW Number: / Authorization Number:
c.						EPA HW Number: / Authorization Number:
d.						EPA HW Number: / Authorization Number:

J. Additional Descriptions for Materials Listed Above: Dirty 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 governmental regulations, and Illinois regulations.

GENERATOR

Printed/Typed Name	Signature	Date (Month Day Year)
CHRIS A. HARPER	Chris A. Harper	12 6 84

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)
JOE WEBER	Joe Weber	12 6 84

18. Transporter 2 Acknowledgement or 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 in Item 19.

Printed/Typed Name	Signature	Date (Month Day Year)
F. DUNFEE		12 6 84

FACILITY

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV. # 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½ Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

210 R T-50

006769

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.: ILD002525723 — Manifest Document No.: 0028
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: The Valspar Corporation, 901 North Greenwood, Kankakee, IL 60901

4. Generator's Phone (815) 933-5561

A. Illinois Manifest Document Number: IL 1145371

B. Illinois Generator's ID: 0910550010

5. Transporter 1 Company Name: K.I.D. INC — 6. US EPA ID Number: ILD054155080

C. Illinois Tranporter's ID: 0066

D. (815) 933293 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 Road, 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)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a.	HM X WASTE PAINT FLAMMABLE LIQUID UN 1263	001	TT	IN GAL 04950	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: a) STILL BOTTOMS/THINNER SLUDGE

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information: RQ - XYLENE; RQ - TOLUENE

WEIGHT: GROSS 76490; TARE 34740; NET 41,750

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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: RAY MARCZAK — Signature: Ray Marczak — Date: Month 01 Day 14 Year 85

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Keith Kadow — Signature: Keith Kadow — Date: Month 01 Day 14 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: F DUNFEE — Signature: F Dunfee — Date: Month 1 Day 14 Year 85

GENERATOR / TRANSPORTER / FACILITY

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV.# 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½ Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

210 ET-50

009217

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.: ILD052437506 | 00007

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: VALSPAR CORP. 2500-8th Ave. E. Moline, ILL. 61244

A. Illinois Manifest Document Number: IL 1161214

4. Generator's Phone: (309) 752-1450

B. Illinois Generator's ID: 1161025001 1

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

6. US EPA ID Number: ILD069506160

C. Illinois Tranporter's ID: 10079

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

7. Transporter 2 Company Name

8. US EPA ID Number

E. Illinois Transporter's ID

F. ( ) Transporter's Phone

9. Designated Facility Name and Site Address: AMERICAN CHEMICAL 4120-So. COLFAX GRIFFITH, IND.

10. US EPA ID Number: IND016360265

G. Illinois Facility's ID: 9118089001 2

H. Facility's Phone: (312) 768 3400

GENERATOR

	HM	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	X	WASTE Flammable Liquid, NOS Flammable Liquid UN1993	001	TT	04000	G	EPA HW Number: D001; Authorization Number:
b.							EPA HW Number: ; Authorization Number:
c.							EPA HW Number: ; Authorization Number:
d.							EPA HW Number: ; Authorization Number:

J. Additional Descriptions for Materials Listed Above: Dirty 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 governmental regulations, and Illinois regulations.

Printed/Typed Name	Signature	Date (Month Day Year)
CHRIS A. HARPER	Chris A Harper	01 17 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)
MICHAEL A. PFEIFER	Michael A. Pfeifer	01 17 85

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)

FACILITY

19. Discrepancy Indication Space

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

Printed/Typed Name	Signature	Date (Month Day Year)
F DUNFEE	F Dunfee	01 18 85

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV.# 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½ Section 21, that this information be submitted to the Agency. Failure to provide the information may result in 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

21KT-50

00021

STATE OF ILLINOIS ENVIRONMENTAL PROTECTION AGENCY · DIVISION OF LAND POLLUTION CONTROL

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

IL532-0610

LPC 62 8/81

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) **EPA Form 8700-22 (3-84)** Form Approved. OMB No. 2000-0404. Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I L D 0 0 5 2 5 7 2 3 | Manifest Document No. 0 0 3 4

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 THE VALSPAR CORPORATION
901 N. GREENWOOD
KANKAKEE, IL 60901

4. Generator's Phone (8 1 5) 9 3 3 - 5 5 6 1

A. Illinois Manifest Document Number IL 1145376

B. Illinois Generator's ID 0 1 9 1 1 0 1 5 1 0 1 0 1 1 0

5. Transporter 1 Company Name K. I. D., INC. — 6. US EPA ID Number I L D 0 5 4 1 5 5 0 8 0

C. Illinois Tranporter's ID 0 1 0 1 6

D. (815) 933 7931 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 ROAD
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 1 9 1 1 8 0 1 5 1 9 0 1 0 1 0 1 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 PAINT FLAMMABLE LIQUID UN 1263	X	0 0 1	T T	0 0 5 5 0 0	1	EPA HW Number F 0 1 0 1 5 — Authorization Number
b.							EPA HW Number — Authorization Number
c.							EPA HW Number — Authorization Number
d.							EPA HW Number — Authorization Number

J. Additional Descriptions for Materials Listed Above
a) STILL BOTTOMS/THINNER SLUDGE

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
RQ - XYLENE
RQ - TOLUENE

WEIGHT
GROSS 72280
TARE 34.740
NET 37,540

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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 KAY MARCZAK — Signature Kay Marczak — Date Month Day Year 0 2 1 1 8 5

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name Keith Kadow — Signature Keith Kadow — Date Month Day Year 0 2 1 1 8 5

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name — Signature — Date Month Day Year

FACILITY

19. Discrepancy Indication Space

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

Printed/Typed Name K. Rushak — Signature K. Rushak — 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

211 R T-50

009220

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.: IL0052437506 — Manifest Document No.: 00011

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
VALSPAR CORPORATION
2500 - 8th Avenue, East Moline, Il. 61244

4. Generator's Phone (309) 752-1450

A. Illinois Manifest Document Number: IL 1432091

B. Illinois Generator's ID: 1 6 1 0 2 5 0 0 0 1

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

6. US EPA ID Number: IL0069506160

C. Illinois Tranporter's ID: 0 0 7 9

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

7. Transporter 2 Company Name:

8. US EPA ID Number:

E. Illinois Transporter's ID:

F. ( ) Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical
420 South Colfax
Griffith, Indiana

10. US EPA ID Number: IN0016360265

G. Illinois Facility's ID: 9 1 8 0 8 9 0 0 0 2

H. Facility's Phone: 312 768-3400

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	WASTE FLAMMABLE LIQUID N.O.S. FLAMMABLE LIQUID UN 1993	X	001	TT	05000	1 G	EPA HW Number: D 0 0 0 1; Authorization Number: 0 0 0 0 0 0
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: DIRTY SOLVENT

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: Carole R. Fluegel — Signature: Carole Fluegel — Date: Month 03 Day 10 Year 86

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Moe Woerhoff — Signature: Moe Woerhoff — Date: Month 03 Day 10 Year 86

18. Transporter 2 Acknowledgement of Receipt of Materials

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

19. Discrepancy Indication Space

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

Printed/Typed Name: R Rusher K — Signature: R Rusher K — Date: Month 3 Day 10 Year 86

GENERATOR — TRANSPORTER — FACILITY

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV. #6

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FACILITY COPY - PART 3

211KT-50

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

DO NOT WRITE IN THIS SPACE

Please print or type. (Form designed for use on elite (12-pitch) typewriter) Form Approved OMB No. 2000 0404 Expires 7 31 86

UNIFORM HAZARDOUS WASTE MANIFEST

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

3. Generator's Name: VALSPAR CORP [illegible]
4. Generator's Phone (309) 75[illegible]-1450
A. State Manifest Document Number: IN 076765
B. State Generator's ID: 1610250001
5. Transporter 1 Company Name: MR FRANK INC
6. US EPA ID Number: ILD[illegible]
C. State Transporter's ID: [illegible]
D. Transporter's Phone: 312 54[illegible] 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 CHEM 420 S. CILFAX [illegible] IN
10. US EPA ID Number: IND[illegible] 60265
G. State Facility's ID: 918085000[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	I. Waste No.
a. WASTE FLAMMABLE LIQUID N.O.S. FLAMMABLE LIQUID [illegible]	401	TT	2950	1	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above:
K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information:

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

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

Printed/Typed Name: TED BLOCK
Signature: Ted Block
Month Day Year: 11 13 86

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JOE WEBER
Signature: [illegible] Weber
Date: Month Day Year: 11 13 86

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

19. Discrepancy Indication Space:

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19
Printed/Typed Name: F DUNFEE
Signature: [illegible]
Month Day Year: 11 13 86

GENERATOR / TRANSPORTER / FACILITY

IN 076765

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

T.S.D. DETACH AND RETAIN THIS COPY

all 210 K 150

011644

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.: ILD052437506 — Manifest Document No.: 0001

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: VALSPAR CORP, 2500 8TH AVE E. MOLINE, IL 61244

4. Generator's Phone (309) 752-1450

A. Illinois Manifest Document Number: IL 1432092

B. Illinois Generator's ID: 1610250001

5. Transporter 1 Company Name: MR FRANK INC

6. US EPA ID Number: ILD069506160

C. Illinois Tranporter's ID: 00079

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

7. Transporter 2 Company Name

8. US EPA ID Number

E. Illinois Transporter's ID

F. ( ) Transporter's Phone

9. Designated Facility Name and Site Address: AMERICHEM CO., 420 S. COLFAX, GRIFFIN IN 46823

10. US EPA ID Number: IND0163-60265

G. Illinois Facility's ID: 9180990002

H. Facility's Phone: (312) 768-3400

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	WASTE FLAMMABLE LIQUID N.O.S., FLAMMABLE LIQUID UN 1993	X	001	TT	050.00	G	EPA HW Number: 0001; 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: Dirty solvent. Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage or disposal currently available to me which minimizes the present and future threat to human health and the environment.

K. Handling Codes for Wastes Listed Above: 1 = Gallons 2 = Cubic Yards

15. Special Handling Instructions and Additional Information

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

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Printed/Typed Name: TED BLOCK — Signature: Ted Block — Date: Month 12 Day 18 Year 86

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Joe Kooinga — Signature: Joe Kooinga — Date: Month 12 Day 18 Year 86

18. Transporter 2 Acknowledgement of Receipt of Materials

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

19. Discrepancy Indication Space

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

Printed/Typed Name: FDUNFEE — Signature: FDunfee — Date: Month 12 Day 18 Year 86

GENERATOR / TRANSPORTER / FACILITY

IN ILLINOIS: 217 / 782-3637 "24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS" OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV. #6

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FACILITY COPY - PART 3

all 210 R 750 B 011640

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.: ILD015437106 / 010901

2. Page 1 of: 1

Information in the shaded areas is not required by Federal law

3. Generator's Name: Velsper Corp
2200 5th Ave E. Moline, Ill 61244

4. Generator's Phone: (309) 752-1450

A. State Manifest Document Number: IN 094002

B. State Generator's ID:

5. Transporter 1 Company Name: Mr Frank

6. US EPA ID Number: IKD016715016

C. State Transporter's ID:

D. Transporter's Phone:

7. Transporter 2 Company Name:

8. US EPA ID Number:

E. State Transporter's ID:

F. Transporter's Phone:

9. Designated Facility Name and Site Address: American Chemical Co
420 S. COLFAX
GRIFFIN, IN 47623

10. US EPA ID Number: IND016316126

G. State Facility's ID:

H. Facility's Phone: (317) 767-3402

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 N.O.S. Flammable Liquid UN 1993	0101	TT	05000	G	D001 Xylol
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, 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
William A Smith II	William A Smith II	03	07	87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date: Month	Day	Year
Mr Unknown	Mr Unknown	03	07	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
R Rushuck	R Rushuck	03	09	87

IN 094002

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

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012267

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. [illegible] Manifest Document No. 00001
2. Page 1 of 1
Information in the shaded areas is not required by Federal law

3. Generator's Name: [illegible]
4. Generator's Phone: [illegible]
A. State Manifest Document Number: IN 094001
B. State Generator's ID: [illegible]

5. Transporter 1 Company Name: [illegible]
6. US EPA ID Number: [illegible]
C. State Transporter's ID: 0079
D. Transporter's Phone: 312/[illegible]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: [illegible] 430 S. Coltrin [illegible] 46323
10. US EPA ID Number: [illegible]
G. State Facility's ID: [illegible]
H. Facility's Phone: 312/[illegible]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. [illegible]	001	TT	04000	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: [illegible] Signature: [illegible] Month Day Year 7

17. Transporter 1 Acknowledgement of Receipt of Materials — Date

Printed/Typed Name: Joe Kooinga Signature: Joe Kooinga Month Day Year 7

18. Transporter 2 Acknowledgement of Receipt of Materials — Date

Printed/Typed Name: Signature: Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name: EDUNFEE Signature: [illegible] Month Day Year 05 31 87

GENERATOR / TRANSPORTER / FACILITY

IN 094001

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

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012268

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: VALSPAR ... E MOLINE

4. Generator's Phone ( )

A. State Manifest Document Number: IN 094003

B. State Generator's ID

5. Transporter 1 Company Name | 6. US EPA ID Number

C. State Transporter's ID: 001

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	Waste No.
a.		TT	051200	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	Month	Day	Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
				17

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	Signature	Month	Day	Year
DUNFEE		07	01	87

FACILITY

IN 094003

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

212 F T50 B

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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.: ILD 052437506 00 01

2. Page 1 of: 1

Information in the shaded areas is not required by Federal law

3. Generator's Name: Valspar Corporation
2500 Eighth Avenue East Moline, Il. 61244

4. Generator's Phone: (309) 752-1450

A. State Manifest Document Number: IN 094004

B. State Generator's ID:

5. Transporter 1 Company Name: Mr. Frank

6. US EPA ID Number: ILD 095 061 60

C. State Transporter's ID: 0079

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

7. Transporter 2 Company Name:

8. US EPA ID Number:

E. State Transporter's ID:

F. Transporter's Phone:

9. Designated Facility Name and Site Address: American Chemical
420 S. Colfax
Griffin, Indiana 46823

10. US EPA ID Number: IND 016 360 265

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 UN1993	001	TT	04900	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	Month	Day	Year
Rod Brown		09	16	87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Jack McCleverty		09	16	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
F DUNFEE	F Dunfee	09	16	87

IN 094004

EPA Form 8700-22A (Rev. 11-85)

UHWM 2/LP2

21KT50 A.S.D. DETACH AND RETAIN THIS COPY

012270

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.: ILD052437506 — Manifest Document No.: 00001
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law

3. Generator's Name: VALSPAR CORPORATION
2500 EIGHTH AVENUE, EAST MOLINE, IL 61244

4. Generator's Phone (309) 752-1450

A. State Manifest Document Number: IN 094005
B. State Generator's ID:
C. State Transporter's ID: 0079
D. Transporter's Phone: 312-596-3377
E. State Transporter's ID:
F. Transporter's Phone:

5. Transporter 1 Company Name: MR. FRANK
6. US EPA ID Number: ILD06950 6160
7. Transporter 2 Company Name:
8. US EPA ID Number:

9. Designated Facility Name and Site Address: AMERICAN CHEMICAL
420 S. COLFAX
GRIFFIN, IN 46823
10. US EPA ID Number: IND016360265

G. State Facility's ID: 9180890002
H. Facility's Phone: 312-768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a. WASTE FLAMMABLE LIQUID N.O.S. FLAMMABLE LIQUID UN1993	001	TT	05000	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: [illegible] — Signature: [illegible] — Month Day Year: 11 09 87

17. Transporter 1 Acknowledgement of Receipt of Materials — Date: 11 09 87
Printed/Typed Name: JACK M-CLEVERTY — Signature: [illegible] — Month Day Year:

18. Transporter 2 Acknowledgement of Receipt of Materials — Date: 11 09 87
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: F DUXTEE — Signature: [illegible] — Month Day Year: 11 09 87

IN 094005

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

211TKT50M

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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: ILD052437506 0001

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

3. Generator's Name: VALSPAR CORPORATION
2500 EIGHTH AVENUE, EAST MOLINE, IL 61244

A. State Manifest Document Number: IN 094006

4. Generator's Phone (309) 752-1450

B. State Generator's ID:

5. Transporter 1 Company Name: MR. FRANK

6. US EPA ID Number: ILD 069 510 616 0

C. State Transporter's ID: 0079

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

7. Transporter 2 Company Name:

8. US EPA ID Number:

E. State Transporter's ID:

F. Transporter's Phone:

9. Designated Facility Name and Site Address:
AMERICAN CHEMICAL
420 S. COLFAX
GRIFFIN, IN 46823

10. US EPA ID Number: IND 016 360 265

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 UN1993	001	TT	00500	G	F003
b. XXXXXXXXXX					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: ~~0008~~ ~~0007~~

K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information

WEAR SAFETY GLASSES & GLOVES
AVOID BREATHING CONCENTRATED VAPORS

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GENERATOR

Printed/Typed Name	Signature	Month	Day	Year
ROD BROWN		02	25	88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
JACK MCCLOSKEY		02	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
G R MURPHY		02	26	88

IN 094006

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

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0015112

...MENT OF ENVIRONMENTAL MANAGEMENT
...LID AND HAZARDOUS WASTE MANAGEMENT
...5
...is, IN 46207-7035

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I L D 0 5 2 4 3 7 5 0 6 | Manifest Document No. 0 0 0 0 1
2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
VALSPAR CORPORATION
2500 EIGHTH AVENUE, EAST MOLINE, IL 61244
4. Generator's Phone (309) 752-1450

A. State Manifest Document Number: INA 0220854
B. State Generator's ID:

5. Transporter 1 Company Name: MR. FRANK
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
420 S. COLFAX
GRIFFIN, IN 46823
10. Use EPA ID Number: I N D 0 1 6 3 6 0 2 6 5
G. State Facility's ID: 9180890002
H. Facility's Phone: 312-768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE FLAMMABLE LIQUID N.O.S. FLAMMABLE LIQUID UN1993	0 0 1	T T	0 5	G	F003
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
WEAR SAFETY GLASSES AND GLOVES
AVOID BREATHING CONCENTRATED VAPORS

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GENERATOR — Printed/Typed Name: ROD BROWN | Signature | Date: Month 0 4 Day 1 2 Year 8 8

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: RANDY KARLOUSKY | Signature | Date: Month 0 4 Day 1 2 Year 8 8

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: PETER C. RAUEN | Signature | Date: Month 0 4 Day 1 3 Year 8 8

FACILITY

19. Discrepancy Indication Space

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 04 Day 13 Year 88

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

INA 0220854

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

2,187 C T50 4/13/11

0015113

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	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 5 2 4 3 7 5 0 6	0 0 0 0 1	1 of 1	

3. Generator's Name and Mailing Address
VALSPAR CORPORATION
2500 EIGHTH AVENUE, EAST MOLINE, IL 61244

A. State Manifest Document Number: INA 0220855
B. State Generator's ID:
4. Generator's Phone ( )
5. Transporter 1 Company Name: MR. FRANK
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
420 S. COLFAX
GRIFFIN, IN 46823
10. Use EPA ID Number: I N D 0 1 6 3 6 0 2 6 5
G. State Facility's ID: 9180890002
H. Facility's Phone: 312-768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE FLAMMABLE LIQUID N.O.S. FLAMMABLE LIQUID UN1993	0 01	TT	04-200	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
WEAR SAFETY GLASSES AND GLOVES
AVOID BREATHING CONCENTRATED VAPORS

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GENERATOR

Printed/Typed Name	Signature	Date Month	Day	Year
ROD BROWN		0 6	1 4	8 8

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year
JOSEPH L. KOOINGA	Joseph L Kooinga	06	14	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
EDONFEE	Edonfee	06	14	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 0220855

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865 2 OF 3 TSD 6/14/88

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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

0015114

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 5 2 4 3 7 5 0 6
Manifest Document No.: 0 0 0 0 1
2. Page 1 of 1
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
VALSPAR CORPORATION
2500 EIGHTH AVENUE, EAST MOLINE, IL 61244

A. State Manifest Document Number: INA 0220856

B. State Generator's ID: 0079

4. Generator's Phone (309) 752-1450

5. Transporter 1 Company Name: MR. FRANK
6. Use EPA ID Number: I L D 0 6 9 5 0 6 1 6 0
C. State Transporter's ID: 0079 XXXXXXXXXX
D. Transporter's Phone: 312-596-3377

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

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL
420 S. COLFAX
GRIFFIN, IN 46823
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. FLAMMABLE LIQUID UN1993	0 0 1	T T	036.00	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
WEAR SAFETY GLASSES AND GLOVES
AVOID BREATHING CONCENTRATED VAPORS

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GENERATOR — Printed/Typed Name: ROD BROWN — Signature: Rod Brown — Date: Month 0 8 Day 1 0 Year 8 8

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials — Printed/Typed Name: PETER CRISAN — Signature: Peter Crisan — Date: Month 0 8 Day 1 0 Year 8 8
18. Transporter 2 Acknowledgement of Receipt of Materials — Printed/Typed Name — Signature — Date: Month Day Year

FACILITY
19. Discrepancy Indication Space
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. — Printed/Typed Name: F DUNFEE — Signature — Date: Month 0 8 Day 1 0 Year 8 8

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

INA 0220856

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
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PAGE 1 (white) TSD MAIL TO GENERATOR
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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

2 ITC TSD 8/11

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

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: I L D 0 5 2 4 3 7 5 0 6
Manifest Document No.: 0 0 0 0 1
2. Page 1 of 1
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
VALSPAR CORPORATION
2500 EIGHTH AVENUE, EAST MOLINE, IL 61244

A. State Manifest Document Number: INA 0220857
B. State Generator's ID:

4. Generator's Phone (309) 752-1450

5. Transporter 1 Company Name: MR. FRANK
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
420 S. COLFAX
GRIFFIN, IN 46823

10. Use EPA ID Number: I N D 0 1 6 3 6 0 2 6 5
G. State Facility's ID: 9180890002
H. Facility's Phone: 312-768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE FLAMMABLE LIQUID N.O.S. FLAMMABLE LIQUID UN1993	0 0 1	T T	0 0 0 1 0	G	F003
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
WEAR SAFETY GLASSES AND GLOVES
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GENERATOR
Printed/Typed Name: ROD BROWN
Signature:
Date: Month 1 1 Day 1 5 Year 8 8

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: GARY DERESS
Signature:
Date: Month 1 1 Day 1 5 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:
Date: Month 1 1 Day 1 6 Year 8 8

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
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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 0220857

0015116

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	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·0·5·2·4·3·7·5·0·6	0·0·0·0·1	1 of 1	

3. Generator's Name and Mailing Address
VALSPAR CORPORATION
2500 EIGHTH AVENUE, EAST MOLINE, IL 61244

4. Generator's Phone (309) 752-1450

A. State Manifest Document Number: INA 0220858

B. State Generator's ID: 1602500001

5. Transporter 1 Company Name: MR. FRANK

6. Use EPA ID Number: I·L·D·0·6·9·5·0·6·1·6·0

C. State Transporter's ID: 0879

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

7. Transporter 2 Company Name

8. Use EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL
420 S. COLFAX
GRIFFIN, IN 46823

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. FLAMMABLE LIQUID UN1993	001	TT	050 00	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

15. Special Handling Instructions and Additional Information
WEAR SAFETY GLASSES AND GLOVES
AVOID BREATHING CONCENTRATED VAPORS

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GENERATOR

Printed/Typed Name	Signature	Date Month	Day	Year
ROD BROWN		03	16	89

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year
JOAQUIN GARCIA		03	16	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
DUNFEE	J Dunfee	03	16	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 0220858

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

211CT60 3/17

0016561

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

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: I L D 0 5 2 4 3 7 5 0 6 | Manifest Document No.: 0 0 0 0 1 | 2. Page 1 of 1 | Information in the shaded areas not required by Federal law. Items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
VALSPAR CORPORATION
2500 EIGHTH AVENUE, EAST MOLINE, IL 61244
4. Generator's Phone (309) 752-1450

A. State Manifest Document Number: INA 0315984
B. State Generator's ID: 1610250001

5. Transporter 1 Company Name: MR. FRANK
6. Use EPA ID Number: I L D 0 5 9 3 0 5 1 5 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
420 S. COLFAX
GRIFFIN, IN 46823
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. FLAMMABLE LIQUID UN1993	0 0 1	T T	0 2 3 0 0	G	F003
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
WEAR SAFETY GLASSES AND GLOVES
AVOID BREATHING CONCENTRATED 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 government regulations.

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

GENERATOR

Printed/Typed Name: WILLIAM A. SMITH IV
Signature: William A. Smith IV
Date: Month 03 Day 23 Year 89

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jim Porter
Signature:
Date: Month 03 Day 23 Year 89

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

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: FDUNFEE
Signature: FDunfee
Date: 0323 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)
2117C50 3/23

COPY 5. TSD COPY

0016562

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 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·0·5·2·4·3·7·5·0·6
Manifest Document No.: 0·0·0·0·1
2. Page 1: 1 of 1
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
VALSPAR CORPORATION
2500 EIGHTH AVENUE, EAST MOLINE, IL 61244
4. Generator's Phone (309) 752-1450

A. State Manifest Document Number: INA 0351301
B. State Generator's ID: 1610250001

5. Transporter 1 Company Name: MR. FRANK
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
420 S. COLFAX
GRIFFIN, IN 46823
10. Use EPA ID Number: I·N·D·0·1·6·3·6·0·2·6·5
G. State Facility's ID: 9180890002
H. Facility's Phone: 312-768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE FLAMMABLE KLIQUID N.O.S. FLAMMABLE LIQUID UN1993	0.0.1	T.T	04000	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
~~XXXXX~~ WEAR SAFETY GLASSES AND GLOVES
AVOID BREATHING CONCENTRATED 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 government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good 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: Rod Brown
Signature: [signature]
Date: Month 05 Day 31 Year 89

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JACK McCLEVERTY
Signature: [signature]
Date: Month 05 Day 31 Year 89

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

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: F DUNFEE
Signature: F Dunfee
Month 05 Day 31 Year 89

GENERATOR
TRANSPORTER
FACILITY

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

INA0351301

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

210 FC F00 5/31

COPY 5. TSD COPY

0016563

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 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 2 4 3 7 5 0 6
Manifest Document No.: 0 0 0 0 1
2. Page 1 of 1 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
VALSPAR CORPORATION
2500 EIGHTH AVENUE, EAST MOLINE, IL 61244
4. Generator's Phone (309) 752-1450

A. State Manifest Document Number: INA 0351308
B. State Generator's ID: 1610250001

5. Transporter 1 Company Name: MR. FRANK, INC.
6. Use EPA ID Number: I L D 98 4 7 7 5 8 4 9
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
420 S. COLFAX
GRIFFIN, IN 46823
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. X WASTE FLAMMABLE LIQUID N.O.S. FLAMMABLE LIQUID UN1993	0 0 1	T T	0 4 0 0 0	G	F003
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
WEAR SAFETY GLASSES AND GLOVES
AVOID BREATHING CONCENTRATED VAPORS

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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: WILLIAM A. SMITH IV
Signature: WILLIAM A. SMITH IV
Date: Month 0 7 Day 1 8 Year 8 9

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Walter C. Klambo
Signature: Walter C. Klambo
Date: Month 0 7 Day 1 8 Year 8 9

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

FACILITY

19. Discrepancy Indication Space

20 Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted item 19.
Printed/Typed Name: FDUNFEE
Signature: FDunfee
Date: Month 07 Day 18 Year 89

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

COPY 5. TSD COPY

210TC150718

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.

INA0351308

0016564

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 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 2 4 3 7 6 0 6
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
VALSPAR CORPORATION
2500 EIGHTH AVENUE
EAST MOLINE, IL 61244
4. Generator's Phone ( )

A. State Manifest Document Number: INA 0351302
B. State Generator's ID: 1610250001

5. Transporter 1 Company Name: MR. FRANK, INC.
6. Use EPA ID Number: I L D 9 8 4 7 7 5 0 4 9
C. State Transporter's ID: 0079
D. Transporter's Phone: 312-720-0700

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

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL
420 S. COLFAX
GRIFFIN, IN 46823
10. Use EPA ID Number: I N D 0 1 6 3 6 0 2 6 5
G. State Facility's ID: 9180890002
H. Facility's Phone: 312-768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE FLAMMABLE LIQUID N.O.S. FLAMMABLE LIQUID UN1993	0 0 1	T T	0 5 5 0 0	G	F003
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
WEAR SAFETY GLASSES AND GLOVES
AVOID BREATHING CONCENTRATED 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 government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good 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: ROD BROWN
Signature: Rod Brown
Date: Month 11 Day 02 Year 89

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: CARL E PROSSER
Signature: Carl E Prosser
Date: Month 11 Day 02 Year 89

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

FACILITY
19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: FDUNFEE
Signature: FDunfee
Date: Month 11 Day 02 Year 89

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

COPY 5. TSD COPY

212 F 150 11/2

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 0351302

0016565

HAZARDOUS WASTE MANIFEST

ORIGINAL – NOT NEGOTIABLE

F1) -12
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			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY			

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
1 TK TANKER	X	WASTE PAINT FLAMMABLE LIQUID UN 1263	1263		GALS	APPROX. 1200		

SPECIAL HANDLING INSTRUCTIONS

COMMENTS

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

PLACARDS TENDERED Yes ☒ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

TOTAL CHARGES: $

FREIGHT CHARGES

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

1-241
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 207R T-50 9/2/81
TSDF SIGNATURE DATE

9/2/81

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

001940

HAZARDOUS WASTE MANIFEST

ORIGINAL – NOT NEGOTIABLE

FW-16
MANIFEST DOCUMENT NUMBER

07-38720
SHIPPER NUMBER

MR. FRANK INDUSTRIAL DISPOSAL
NAME OF CARRIER (SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPP OR RECEIV
GENERATOR/ SHIPPER	IND 005178355	VALSPAR CORP. P.O. BOX 10330 FT WAYNE, IN. 219-484-9011	4-22-8
TRANSPORTER # 1	ILD 069506160	MR. FRANK INDUSTRIAL DISPOSAL 201 W. 155TH ST SO. HOLLAND IL 312-596-3377	4-22-8
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND 016360265	AMERICAN CHEMICAL SERVICES 120 S. COLFAX GRIFFITH, IN. 312-768-3400	4/22/8
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARG (For Car Use On
BULK TANKER	X	PAINT LIQUID WASTE FLAMMABLE LIQUID UN 1263 D001	1263		GALS.	APPROX 4800 GALLONS		

SPECIAL HANDLING INSTRUCTIONS

COMMENTS

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

PLACARDS TENDERE
Yes ☒ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

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

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

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

TOTAL CHARGES: $

FREIGHT CHARGES
FREIGHT PREPAID except when box at right is checked ☐ Check box if char are t co

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

CERTIFICATION

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

[signature] 4-22-82
GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

Robert Perkins 4-22-82
TRANSPORTER #1 SIGNATURE & DATE TRANSPORTER #2 SIGNATURE & DATE (if required)

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

[signature] 4/22/82
TSDF SIGNATURE DATE

2

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TO 210 KT-50-GRM 4-22-82

002502

HAZARDOUS WASTE MANIFEST

ORIGINAL – NOT NEGOTIABLE

FW-18
MANIFEST DOCUMENT NUMBER

07-39499
SHIPPER NUMBER

MR. FRANK
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 005178355	VALSPAR CORP. P.O. BOX 10330 219-484-9011. FT WAYNE IN.	8-20-8
TRANSPORTER # 1	ILD 069506160	MR. FRANK IND. DISPOSAL 312-596-3377 SO. HOLLAND ILL. 201 W. 155TH ST.	8-20-8
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND 016360265	AMERICAN CHEMICAL SERVICES 120 S. COLFAX GRIFFITH, IN. 312-768-3400	8-20-8
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
BULK TANKER	X	PAINT LIQUID WASTE FLAMMABLE LIQUID UN 1263 D001	1263		GALS	5000 GALLONS		

SPECIAL HANDLING INSTRUCTIONS

COMMENTS

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

PLACARDS TENDERED Yes ☒ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

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

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

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

TOTAL CHARGES: $

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

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

CERTIFICATION

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

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

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

[signature] 8-20-82
GENERATOR'S SIGNATURE DATE

[signature] 8/20/82
TSDF SIGNATURE DATE

3

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TO 211R T-50 EPA 8-20-82

002509

HAZARDOUS WASTE MANIFEST

ORIGINAL – NOT NEGOTIABLE

FW-20
MANIFEST DOCUMENT NUMBER

07-39799
SHIPPER NUMBER

MR. FRANK
NAME OF CARRIER (SCAC) CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPE OR RECEIVE
GENERATOR/ SHIPPER	IND 005178355	VALSPAR CORP PO. BOX 10330 FT WAYNE IN 219-484 9011	10-15-8
TRANSPORTER # 1	ILD 069506160	MR. FRANK IND. DISPOSAL 201 W. 155TH ST. 312-596-3377 SO. HOLLAND ILL	10-15-8
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND 016360265	AMERICAN CHEMICAL SERVICES 120 S. COLFAX GRIFFITH, IN 312-768-3400	10/15/8
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGE (For Carri Use Only
BULK TANKER	X	PAINT LIQUID WASTE FLAMMABLE LIQUID UN-1263 - UN1993 D001	1263		GALS.	APPROX 5000 GALLONS		

SPECIAL HANDLING INSTRUCTIONS

COMMENTS

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

PLACARDS TENDERE
Yes ☒ No ☐

REMIT C.O.D. TO:
ADDRESS

COD Amt: $

C.O.D. FEE:
PREPAID ☐
COLLECT ☐ $

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

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

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

TOTAL CHARGES: $

FREIGHT CHARGES
FREIGHT PREPAID except when box at right is checked ☐ Check box if charge are to c colle

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

CERTIFICATION

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

Stephen B. Seales 10-15-82
GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

[signature]
TRANSPORTER #1 SIGNATURE & DATE TRANSPORTER #2 SIGNATURE & DATE (if required)

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

[signature] 10/15/82
TSDF SIGNATURE DATE

2

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

TO 210 FT T-50 GRM 10.15.82

002513

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 005178355 | Manifest Document No. FW-38 | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
VALSPAR CORP.
202 JACOBS ST. FORT WAYNE, IN 46808

4. Generator's Phone (219) 484-7011

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: MR FRANK, S. HOLLAND IL | 6. US EPA ID Number: ILD 067506160

C. State Transporter's ID: IND 009

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
120 S. COLFAX
GRIFFITH, IN

10. US EPA ID Number: IND 016360265

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)	HM		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	X	WASTE PAINT FLAMMABLE LIQUID UN-1263	1	BULK	4100	GALS	D001
b.				TT		G	
c.							
d.							

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information: P.O. DOT-41234
IN - 845 AM
OUT - 145 PM

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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: STEPHEN B. SCALES | Signature: Stephen B. Scales | Date: Month 10 Day 23 Year 84

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: GARY DRUEN | Signature: [signature] | Date: Month 10 Day 23 Year 84

18. Transporter 2 Acknowledgement of Receipt of Materials

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

FACILITY

19. Discrepancy Indication Space

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

Printed/Typed Name: F. DUNFEE | Signature: F. Dunfee | Date: Month 10 Day 24 Year 84

Style F15-6 Labelmaster, Chicago, IL 60646 (312) 478-0900

EPA Form 8700-22 (3-84)

212K T-50 13400 0.9%

TSDF COPY

006765

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 005178355 — 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: VALPAR CORP. 202 JACOBS ST. FORT WAYNE, IN 46588 — FW-39

4. Generator's Phone (219) 484-9011

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: MR. FRANK S. HOLLAND, IL

6. US EPA ID Number: IND 069506160

C. State Transporter's ID: IND 557

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, 120 S. COLFAX, GRIFFITH, IN

10. US EPA ID Number: IND 016360265

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)	HM		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	X	WASTE PAINT FLAMMABLE LIQUID UN-1263	1	T.T	4200	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

IN - 7.30 AM PO. 07-41340

OUT - 12:30 PM.

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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: STEPHEN B. SCALES — Signature: [signature] — Date: Month 11 Day 12 Year 84

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: GARY [illegible] — Signature: [signature] — Date: Month 11 Day 12 Year 84

18. Transporter 2 Acknowledgement of Receipt of Materials

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

FACILITY

19. Discrepancy Indication Space

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: [signature] — Date: Month 11 Day 12 Year 84

Style F15-6 Labelmaster, Chicago, IL 60646 (312) 478-0900

EPA Form 8700-22 (3-84)

210 T-SC 13100 BTU 1% Cl.

TSDF COPY

006767

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) FW-41 Form Approved. OMB No. 2000-0404. Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. IND 000178355 | 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
VALSPAR CORP.
202 JACOBS ST. FT WAYNE, IN 46808
4. Generator's Phone (217) 484-7011

FW-41

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

5. Transporter 1 Company Name: MV. FRANK S. HOLLAND, IL | 6. US EPA ID Number: ILD 054504160
C. State Transporter's ID: IND 327
D. Transporter's Phone: 812-536-3271

7. Transporter 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
120 S. COLFAX
GRIFFITH, IN
10. US EPA ID Number: IND 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)	HM	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE PAINT FLAMMABLE LIQUID UN1263	X	1	T.T.	5400	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
IN - 8:30 AM
OUT - 12:00 NOON
P.O.# 07-41522

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

GENERATOR

Printed/Typed Name	Signature	Date (Month Day Year)
STEPHEN B. SCALES	Stephen B. Scales	1 24 95

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)
MICHAEL MARTIN	Michael Martin	1 24 95

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)

FACILITY

19. Discrepancy Indication Space

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)
TED JUNFER		1 24 95

Style F15-6 Labelmaster, Chicago, IL 60646 (312) 478-0900 EPA Form 8700-22 (3-84)

210E 7.50

19,100 BTU
1% Cl

TSDF COPY

009219

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) FW 42 Form Approved. OMB No. 2000-0404. Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: IND 005178355
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: VALSPAR CORP. 200 JACOBS ST. FT WAYNE, IN 46808 FW 42
4. Generator's Phone (217) 484-9011

A. State Manifest Document Number:
B. State Generator's ID: 0079
C. State Transporter's ID: ~~IND 559~~
D. Transporter's Phone: 312-596-5377

5. Transporter 1 Company Name: MR FRANK S. HOLLAND, IL
6. US EPA ID Number: IND 067506160

7. Transporter 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 120 S. COLFAX GRIFFITH, IN
10. US EPA ID Number: IND 016360265

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)	HM		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	X	WASTE PAINT FLAMMABLE LIQUID UN 1263	001	T.T	04300	G	D001
b.							
c.							
d.							

J. Additional Descriptions for Materials Listed Above: IN - 840 AM. OUT - 11:00 AM PO# 07-41635

K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information:

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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: STEPHEN B. SCALES
Signature: [signature]
Date: Month 3 Day 19 Year 85

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: John Van Vlymen
Signature: [signature]
Date: Month 03 Day 19 Year 85

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

19. Discrepancy Indication Space:

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: F DUNFEE
Signature: F Dunfee
Date: Month 3 Day 19 Year 85

GENERATOR / TRANSPORTER / FACILITY

Style F15-6 Labelmaster, Chicago, IL 60646 (312) 478-0900 EPA Form 8700-22 (3-84)

212 F T-50

009223

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

1. Generator's US EPA ID No.: IND 005178355
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: VALSPAR CORP. 202 JACOBS ST. FT WAYNE IN 46808 FW 43
4. Generator's Phone (219) 484-9011

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

5. Transporter 1 Company Name: MR FRANK S. HOLLAND, IL
6. US EPA ID Number: ILD 069506160
C. State Transporter's ID: 686
D. Transporter's Phone: 516-3377

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 120 S. COLFAX GRIFFITH, IN
10. US EPA ID Number: IND 016360265
G. State Facility's ID:
H. Facility's Phone: 219-924 4320

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 FLAMMABLE LIQUID UN-1263	DOT	FT	4500	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
IN 9:20 AM
OUT - 1:45 PM

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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: STEPHEN B. SCALES
Signature: Stephen B. Scales
Date: Month 4 Day 30 Year 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Moe Wainhoff
Signature: Moe Wainhoff
Date: Month 4 Day 30 Year 85

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

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: F DUNFEE
Signature: F Dunfee
Date: Month 4 Day 30 Year 85

Style F15-6 Labelmaster, Chicago, IL 60646 (312) 478-0900

EPA Form 8700-22 (3-84)

210 R T-50

TSDF COPY

009225

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 005173355 | Manifest Document No. FW-46

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

3. Generator's Name and Mailing Address
VALSPAR CORP. 202 JACKS ST. FT WAYNE, IN 46808

4. Generator's Phone (219) 484-9011

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: MR. FRANK S. HOLLAND, IL

6. US EPA ID Number: ITLD 067506460

C. State Transporter's ID 2077

D. Transporter's Phone 312-226-2077

7. Transporter 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
120 S. GOLFAX
GRIFFITH IN.

10. US EPA ID Number: IND 016360265

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)	HM	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE PAINT FLAMMABLE LIQUID UN-1263	X	001	TT	4200	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
IN - 7 AM
OUT - 10 AM
07-41771
TRUCK # 27
TRL. # 220

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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: STEPHEN R. SCALES | Signature | Date: Month 8 Day 21 Year 85

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Date: Month 8 Day 21 Year 85

18. Transporter 2 Acknowledgement of Receipt of Materials

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

19. Discrepancy Indication Space

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

Printed/Typed Name: F DUNFEE | Signature | Date: Month 8 Day 21 Year 85

Style F15-6 Labelmaster, Chicago, IL 60646

EPA Form 8700-22 (3-84)

13400 BTU 0.4% Cl. 210F T-50

TSDF COPY

009229

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 005173355 | Manifest Document No.: 00018

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

3. Generator's Name and Mailing Address: VALSPAR CORP. 202 JACOBS ST. FT. WAYNE, IN 46503

4. Generator's Phone (219) 424-9011

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: MR FRANK S. HOLLAND, II

6. US EPA ID Number: TLD 069506160

C. State Transporter's ID

D. Transporter's Phone: 312-576-3277

7. Transporter 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, 120 S. COLFAX, 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)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	WASTE PAINT FLAMMABLE LIQUID UN-1263	X	001	TT	4100	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

9:30 AM PO # 07-42069

IN - 4:30 PM

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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
STEPHEN B. SCALE	[signature]	9 27 85

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month Day Year
CARL E. MILBURN	[signature]	9 27 85

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name	Signature	Date Month Day Year
F DUNFEE	F Dunfee	9 30 85

GENERATOR / TRANSPORTER / FACILITY

Style F15-6 Labelmaster, Chicago, IL 60646 EPA Form 8700-22 (3-84)

210 K T-50

TSDF COPY

009230

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 005178255 — Manifest Document No.: 00049
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address: VALSPAR CORP. 202 JACOBS ST FT WAYNE, IN 46808
4. Generator's Phone (219) 484-7011

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

5. Transporter 1 Company Name: MR FRANK SCHOLAND IL
6. US EPA ID Number: IND 069506160

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 120 S. COLFAX 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)	HM		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	X	WASTE PAINT FLAMMABLE LIQUID ON-1263	001	TT	4000	G	D001
b.							
c.							
d.							

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimumization certification under section 3002(b) of RCRA. I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable ane 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. PO# 07-42148 IN 9:15 AM OUT 3:30 PM

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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: STEPHEN B. SCALES — Signature: [signature] — Date: Month 10 Day 28 Year 85

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Moe Wheelhouse — Signature: [signature] — Date: Month 10 Day 28 Year 85

18. Transporter 2 Acknowledgement of Receipt of Materials

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

19. Discrepancy Indication Space

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

Printed/Typed Name: F DUNFEE — Signature: [signature] — Date: Month 10 Day 29 Year 85

Style F15-6 Labelmaster, Chicago, IL 60646 EPA Form 8700-22 (3-84)

211 E T-50

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009232

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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 000 178 355 | Manifest Document No. 22250 | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
VALPAK CORP.
202 JACOBS ST. FT WAYNE, IN 46808

4. Generator's Phone (219) 484-7011

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: MV EVANS S. HOLLAND IL | 6. US EPA ID Number: ILD 067506160

C. State Transporter's ID

D. Transporter's Phone 312 [illegible]

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

E. State Transporter's ID 2077

F. Transporter's Phone

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICES
120 S. CALFAX
GRIFFITH, IN

10. US EPA ID Number: IND 011 361 026 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)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE PAINT FLAMMABLE LIQUID UN-1263	X	001	TT	5200	G	D001
b.						
c.						
d.						

J. Additional Descriptions for Materials Listed Above
IN - 8:30 AM OUT - 2 PM. PO # 07-42282

K. Handling Codes for Wastes Listed Above

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

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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
STEPHEN R SCALES	[signature]	01 27 86

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month Day Year
[illegible]	[signature]	01 27 86

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month Day Year

FACILITY

19. Discrepancy Indication Space

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

Printed/Typed Name	Signature	Date Month Day Year
T DUNFEE	[signature]	1 7 86

Style F15-6 Labelmaster, Chicago, IL 60646

EPA Form 8700-22 (3-84)

TSDF COPY

210 TE T-50

011641

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
VALSPAR CORP
2 [illegible] PL FT WAYNE IN 46802

4. Generator's Phone (219) 424 7211

A. State Manifest Document Number
IN 011819

B. State Generator's ID.

5. Transporter 1 Company Name
MV FURNEY INC

6. US EPA ID Number
[illegible]

C. State Transporter's ID 0077

D. Transporter's Phone 312-516-3377

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
1601 S. CALUMET
GRIFFITH IN INDIANAPOLIS

10. US EPA ID Number

G. State Facility's ID
91808 90002

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. PAINT FLAMMABLE LIQUID UN1263	001	TT	0PHDR	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
IN-930 AM PJ# 01-47721 TRAILER # 231
RJT- TRACTOR # 44

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, 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
STEPHEN B. [illegible]	[signature]	12	18	86

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
MICHAEL A. PFEIFER	[signature]	12	18	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
F DUNFEE	[signature]	12	18	86

EPA Form 8700-22A (Rev. 11-85)

T.S.D. DETACH AND RETAIN THIS COPY

IN 011819

[illegible] 01[illegible] 123K-T-62

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 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. IND005178355 | Manifest Document No. 00075 | 2. Page 1 of 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
VALSPAR CORP.
202 JACOBS ST. FT WAYNE, IN 46808

A. State Manifest Document Number INA 0128498

4. Generator's Phone 219 ( ) 484-9011

B. State Generator's ID

5. Transporter 1 Company Name MR. FRANK INC.

6. US EPA ID Number ILD069506160

C. State Transporter's ID 0689

D. Transporter's Phone 312-576-0377

7. Transporter 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
1205 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)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt./Vol.	Waste No.
a. WASTE PAINT FLAMMABLE LIQUID UN 1263	001	TT	4800	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
IN - 9:45 AM PO # 07-14609 TRAILER # 227
OUT - 12:00 N. HACKER 334-18 TRACTOR # 59

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

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good 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: STEPHEN B. SCALES | Signature: Stephen B. Scales | Date: Month 05 Day 12 Year 87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: BARI DERESS | Signature: Bari Deress | Date: Month 05 Day 12 Year 87

18. Transporter 2 Acknowledgement of Receipt of Materials

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

FACILITY

19. Discrepancy Indication Space

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

Printed/Typed Name: P DUNFEE | Signature: P Dunfee | Date: Month 05 Day 12 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 0128498

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

211K TSD M

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

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. / Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.
IND005178355 / 000076		

3. Generator's Name and Mailing Address: VALSPAR CORP. 202 JACOBS ST. FT. WAYNE IN 46808
4. Generator's Phone: (219) 484-9011
A. State Manifest Document Number: INA 0128499
B. State Generator's ID:
5. Transporter 1 Company Name: MR FRANK INC
6. Use EPA ID Number: ILD069506160
C. State Transporter's ID: 0073
D. Transporter's Phone: 312-376-3377
7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:
9. Designated Facility Name and Site Address: AMERICAN CHEMICAL SERVICES 120 S. COLFAX GRIFFITH, IN
10. Use EPA ID Number: IND016360265
G. State Facility's ID:
H. Facility's Phone: 219-924-1870

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 FLAMMABLE LIQUID, UN-1263	001	TT	5000	G	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above:
K. Handling Codes for Wastes Listed Above: G GALONS

15. Special Handling Instructions and Additional Information
IN-9AM PO#07-14673 TRAILER 227
OUT-10:30 AM HAZED-0079 TRACTOR 40

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

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good 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)
STEPHEN B. SCALES	Stephen B. Scales	10 29 87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)
Joe Kooinga	Joe Kooinga	10 29 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)
F DUNFEE	F Dunfee	10 29 87

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

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

210 FT 50 M

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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 0128499

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 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. IND005178355 — Manifest Document No. 00078
2. Page 1 of 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: VALSPAR CORPORATION, 202 JACOBS ST. FT. WAYNE, IN. 46808
A. State Manifest Document Number: INA 0128502
B. State Generator's ID:
4. Generator's Phone: (219) 484-9011
5. Transporter 1 Company Name: MR. FRANK INC.
6. Use EPA ID Number: ILD069506160
C. State Transporter's ID: 5184
D. Transporter's Phone: 312-646-5307
7. Transporter 2 Company 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, 120 S. COLFAX, GRIFFITH, IN.
10. Use EPA ID Number: IND016360265
G. State Facility's ID:
H. Facility's Phone: 219-924-4510

11. US DOT Description (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 FLAMMABLE LIQUID UN-1263	001	TT	5500	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
IN - 7 AM PO # 07-14762 TRAILER # 257
OUT - 8:30 AM HAULER I.D. - 334-49 TRACTOR # 40

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

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good 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: STEPHEN B. SCALES — Signature: Stephen B. Scales — Date: Month 2 Day 17 Year 87

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials — Printed/Typed Name: Joe Kooinga — Signature: Joe Kooinga — Date: Month 2 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: T DUNFEE — Signature: T Dunfee — Month 2 Day 17 Year 87

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

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

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 0128502

012274

OF ENVIRONMENTAL MANAGEMENT
AND HAZARDOUS WASTE MANAGEMENT

IN 46207-7035

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. IND005178355 Manifest Document No. 08877
2. Page 1 of 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
VALSPAR CORP.
202 JACOBS ST. FT. WAYNE, IN 46808
4. Generator's Phone (219) 484-9011

A. State Manifest Document Number: INA 0128503
B. State Generator's ID:

5. Transporter 1 Company Name: MR FRANK INC.
6. Use EPA ID Number: ILD.069.506.160
C. State Transporter's ID: 0689
D. Transporter's Phone: 312-596-8377

7. Transporter 2 Company 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
120 S. COLFAX
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 PAINT FLAMMABLE LIQUID UN-1263	001	T.T	05000	G	D001 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: PO # 07-14836
IN - 9:00 AM TRAILER 227
OUT - 10:00 AM TRACTOR 60 HAULER # 334-18

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

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good 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: STEPHEN B. SCALES — Signature: Stephen B. Scales — Date: Month 02 Day 04 Year 88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: CARL E. MILBURN — Signature: Carl E. Milburn — Date: Month 02 Day 04 Year 88

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

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: F DUNFEE — Signature: F Dunfee — Date: Month 02 Day 09 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

210 KT 50 M

INA 0128503

0015109

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 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.: IND005178355 — Manifest Document No.: 00085
2. Page 1 of 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: VALSPAR CORP. 202 JACOBS ST FT WAYNE, IN 46808
4. Generator's Phone (219) 484-9011

A. State Manifest Document Number: INA 0128506
B. State Generator's ID:

5. Transporter 1 Company Name: MR. FRANK INC
6. Use EPA ID Number: ILD069506160
C. State Transporter's ID: 0689
D. Transporter's Phone: 312-596-3377

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

9. Designated Facility Name and Site Address: AMERICAN CHEMICAL SERVICES 120 S. COLFAX GRIFFITH, IN.
10. Use EPA ID Number: IND016360265
G. State Facility's ID:
H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE PAINT FLAMMABLE LIQUID UN-1263	001	TT	5000	G	D001 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: IN- 800 AM (TWO) AM TRAILER 68 PO # 07-23100
OUT- 900 AM TRACTOR 231

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, 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: STEPHEN B. SCALES — Signature: [signature] — Date: Month 07 Day 25 Year 88

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: PETER CRISAN — Signature: Peter N Crisan — Date: Month 07 Day 25 Year 88

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

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: F DUNFEE — Signature: [signature] — Date: Month 07 Day 25 Year 88

GENERATOR / TRANSPORTER / FACILITY

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

INA 0128506

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

4000212KT507
1000211KT507/25

0015110

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 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.: IND005178355 — Manifest Document No.: 00086
2. Page 1 of 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: VALSPAR CORP. 202 JACOBS ST. FT WAYNE, IN 46808
4. Generator's Phone (219) 484-7011

A. State Manifest Document Number: INA 0128510
B. State Generator's ID: ff
C. State Transporter's ID: ~~[illegible]~~ 0079
D. Transporter's Phone: 312-596-3377
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID: ff ~~[illegible]~~
H. Facility's Phone: 219-924-4370

5. Transporter 1 Company Name: MR FRANK INC.
6. Use EPA ID Number: TLD067506160
7. Transporter 2 Company Name:
8. Use EPA ID Number:
9. Designated Facility Name and Site Address: AMERICAN CHEMICAL SERVICES 120 S. COLFAX GRIFFITH, IN
10. Use EPA ID Number: IND016360265

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE PAINT FLAMMABLE LIQUID UN-1263	001	TT	05000	G	D001 F003 F005
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above:
K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information: IN 800 AM TRAILER 227 PO # 07-23147 OUT 1000 AM TRACTOR 58

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

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good 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: STEPHEN B SCALES — Signature: [signature] — Date: Month 08 Day 25 Year 88

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: GARY DERESS — Signature: [signature] — Date: Month 08 Day 25 Year 88

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

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: FDUNFEE — Signature: [signature] — Date: Month 08 Day 25 Year 88

GENERATOR / TRANSPORTER / FACILITY

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

INA 0128510

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

212TC TSD 8/2

0015111

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.: ILD002525723 — Manifest Document No.: 0006

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: The VALSPAR CORPORATION, 901 North Greenwood, KANKAKEE IL 60901

4. Generator's Phone (815) 9335561

A. Illinois Manifest Document Number: IL 1116155

B. Illinois Generator's ID: 0910550010

5. Transporter 1 Company Name: VANDERHYDEN TRANSPORT CO

6. US EPA ID Number: ILD048294904

C. Illinois Tranporter's ID: 0318

D. (312) 3857671 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 Road, 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.
a.	X	Waste Paint, Flammable Liquid, UN1263	001	TT	GAL 04870	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: Tal Still Bottoms/Thinner Sludge

K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information

RQ - XYLENE

RQ - Toluene

Weight: GROSS 62400, TARE 31700, NET 30,700

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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: RAY MARCZAK — Signature: Ray Marczak — Date: Month 10 Day 09 Year 84

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: MARK BURRIS — Signature: Mark Burris — Date: Month 10 Day 09 Year 84

18. Transporter 2 Acknowledgement or Receipt of Materials

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

19. Discrepancy Indication Space

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

Printed/Typed Name: F DUNFEE — Signature: F Dunfee — Date: Month 10 Day 9 Year 84

GENERATOR / TRANSPORTER / FACILITY

IN ILLINOIS: 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS — OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV.# 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½ Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

202 RT 50 15,100 BTU NIL CO.

006763

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. ILD002525723 Manifest Document No. 0123

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 THE VALSPAR CORPORATION 901 NORTH GREENWOOD KANKAKEE, IL 60901

4. Generator's Phone (815) 933-5561

A. Illinois Manifest Document Number IL 1578406

B. Illinois Generator's ID 0911055090

5. Transporter 1 Company Name Mr. FRANK INC.

6. US EPA ID Number ILD069506160

C. Illinois Transporter's ID 00799

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

7. Transporter 2 Company Name

8. US EPA ID Number

E. Illinois Transporter's ID

F. ( ) Transporter's Phone

9. Designated Facility Name and Site Address AMERICAN CHEMICAL SERVICE 420 S. COLFAX ROAD GRIFFITH, IN 46319

10. US EPA ID Number IND016360265

G. Illinois Facility's ID 9718989002

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 PAINT RELATED MATERIAL FLAMMABLE LIQUID UN1263	X	08	DM	044,00	1	EPA HW Number F0015 Authorization Number 000000
b.							EPA HW Number Authorization Number
c.							EPA HW Number Authorization Number
d.							EPA HW Number Authorization Number

J. Additional Descriptions for Materials Listed Above: SCRAP SOLVENT

K. Handling Codes for Wastes Listed Above In Item #14: 1 = Gallons 2 = Cubic Yards

15. Special Handling Instructions and Additional Information: RQ - XYLENE RQ - TOLUENE P.O.# 15060-30

WEIGHT GROSS TARE NET 44,000

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, 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: WILLIAM CLOCKSIN Signature: William Clocksin Date: Month 10 Day 2 Year 86

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: John Van Ulymen Signature: John Van Ulymen Date: Month 10 Day 2 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: HAROLD F. SCHMIDT Signature: Harold F. Schmidt Date: Month 10 Day 2 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

204K T-50 011643

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.
ILD005459723	10126		

GENERATOR

3. Generator's Name and Mailing Address: VALSPAR CORPORATION, 901 NORTH GREENWOOD, KANKAKEE, IL 60901

A. Illinois Manifest Document Number: IL 3578405

B. Illinois Generator's ID

4. Generator's Phone: (815) 933-5961

TRANSPORTER

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

6. US EPA ID Number: ILD069506160

C. Illinois Transporter's ID

D. Transporter's Phone: 618/532-3377

7. Transporter 2 Company Name

8. US EPA ID Number

E. Illinois Transporter's ID

F. Transporter's Phone

FACILITY

9. Designated Facility Name and Site Address: CHEMICAL SERVICE, 3501 STATE FAX ROAD, GARY, IN 46409

10. US EPA ID Number: IND076380765

G. Illinois Facility's ID: IL 0000100005

H. Facility's Phone: 219/949-1110

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 X WASTE PAINT RELATED MATERIAL, FLAMMABLE LIQUIDS, N.O.S. (XYLENE), UN1263	001		0.5000		
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: SCRAP SOLVENT

K. Handling Codes for Wastes Listed Above: In Item 14 1 = Gallons 2 = Cubic Yards

15. Special Handling Instructions and Additional Information: RQ-XYLENE, RQ-TOLUENE

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, 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)
WILLIAM CARLSON	William Carlson	01 26 87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)
JOE KOOINGA	Joe Kooinga	01 26 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)
F DUNFEE	F Dunfee	01 26 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

all 210E TSO &

012265

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.: I4 D0 0 R5 R5 7 0 B0 4
Manifest Document No.: 139
2. Page 1 of 1
Information in the shaded areas is not required by Federal law

3. Generator's Name: THE VALSPAR CORPORATION, 901 NORTH GREENWOOD, KANKAKEE, IL 60901
4. Generator's Phone: 815 9335561
A. State Manifest Document Number: IN 106501
B. State Generator's ID: 0910550010
C. State Transporter's ID:
D. Transporter's Phone:
E. State Transporter's ID: 0066
F. Transporter's Phone: 815 933 2931
G. State Facility's ID: 91808900.02
H. Facility's Phone: 219 924 4370

5. Transporter 1 Company Name: K.I.D., INC
6. US EPA ID Number: I4 D0 5 4 1 5 5 0 8 0
7. Transporter 2 Company Name:
8. US EPA ID Number:

9. Designated Facility Name and Site Address: AMERICAN CHEMICAL SERVICE, 420 S. COLFAX ROAD, GRIFFITH IN 46319
10. US EPA ID Number: IN 0 0 1 4 3 6 0 3 6 5

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a. FLAMMABLE LIQUID WASTE PAINT UN 1263	001	TT	5000	1	F005
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: a) STILL BOTTOMS/THINNER SLUDGE
K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information
RQ - XYLENE
RQ - TOLUENE

WEIGHT	
GROSS	77,260
TARE	33,840
NET	43,420

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, 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: BILL CLOCKSIN
Signature: Bill Clocksin
Month Day Year: 04 17 87

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: James R Fowler
Signature: [signature]
Date: Month Day Year: 04 17 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: R Roshnick
Signature: R Roshnick
Month Day Year: 04 17 87

GENERATOR / TRANSPORTER / FACILITY

IN 106501

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

T.S.D. DETACH AND RETAIN THIS COPY

211RT30 B

012266

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 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. INE 2 00000278 | Manifest Document No. 0001 | 2. Page 1 of 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
THE VALSPAR CORPORATION
2526 N. WESTERN AVE.
HAMMOND, IND. 46323
4. Generator's Phone (815) 933-3561

A. State Manifest Document Number: INA 0335023
B. State Generator's ID:

5. Transporter 1 Company Name: MR. FRANK INC.
6. Use EPA ID Number: ILD 069506160
C. State Transporter's ID: 0079
D. Transporter's Phone: 312-546-3377

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

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICES INC
420 S. COLFAX AVE.
GRIFFITH, IND. 46319
10. Use EPA ID Number: IN.D.0.1.6360265
G. State Facility's ID:
H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE FLAMMABLE LIQUID, N.O.S. UN 1993	1.	T.T	0.3.5.0.0	1	F003
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
SEND MANIFEST COPY TO:
THE VALSPAR CORPORATION
901 N. GREENWOOD AVE.
KANKAKEE, IL. 60901
ATTN. L. DUVALL

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

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good 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: ANTHONY JAMNIK | Signature: Anthony Jamnik | Date Month 03 Day 01 Year 89

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials — Printed/Typed Name: CARL E. MILBURN | Signature: Carl E. Milburn | Date Month 03 Day 15 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: P DUNFEE | Signature: P Dunfee | Date Month 03 Day 17 Year 89

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

2,10 OCT 52 77

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 0335023

0016560

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

0418170

Authorization Number 997788

(Company Name)	Address	Phone Number	Generator Number
Valspar Corp.	200 Sayre Street	815 987 3715	2010300032 G

City	State	Zip	EPA Number
Rockford	IL	61101	ILD001980135

WASTE HAULER(S)

Hauler Name	Hauler Address	Phone Number	S.W.H. Registration Number / EPA Number
Mr. Franks	201 W. 115th St., So. Holland IL	312 596 3377	0079029 / ILD069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

(Facility Name)	Address	Site Number
American Chemical Serv.	P.O. Box 190	91808902

City	State	Zip	Phone Number	EPA Number
Griffith	Indiana	46319	219 921 4390	IND016360265

Alternate (Facility Name)	Address	Site Number

City	State	Zip	Phone Number	EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Wash Solvent & Sludge Xylene WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
Paint Waste Wash Solvent	Flammable	UN1993	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: 005000 (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: 11/30/81

WASTE HAULER

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

(1) [signature] (Authorized Signature) DATE: 12/02/81

(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: 12/2/81

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 211 R T-50 GRM 12/2/81

001949

STATE OF ILLINOIS

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

0418171

Authorization Number 997788

TO BE COMPLETED BY WASTE GENERATOR

Valspar Corp.	200 Sayre Street	815 987 3715	2 0 1 0 3 0 0 0 3 2 G
(Company Name)	Address	Phone Number	Generator Number
Rockford	Ill.	61101	I L D 0 0 1 9 8 0 1 3 5
City	State	Zip	EPA Number

WASTE HAULER(S)

Mr. Franks	201 W.115th St., So.Holland,IL	S W H. Registration Number 0079019
Hauler Name	Hauler Address	
	312 596 3377	I L D 0 6 9 5 0 6 1 6 0
	Phone Number	EPA Number
Hauler Name	Hauler Address	S.W.H Registration Number
	Phone Number	EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Serv.	P.O. Box 190			9 1 8 0 8 9 0 2
(Facility Name)	Address			Site Number
Griffith	Ind.	46319	219 921 4390	I N D 0 1 6 3 6 0 2 6 5
City	State	Zip	Phone Number	EPA Number
Alternate (Facility Name)	Address			Site Number
City	State	Zip	Phone Number	EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Wash Solvent & Sludge Xylene WASTE 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:		
Paint Waste Wash Solvent	Flammable	U N 1 9 9 3 (UN or NA Number)	D 0 0 1 (EPA HW Number)

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 4500 (GALLONS) 2 CU. YDS. (Circle One)

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION George Conrad (Authorized Signature) DATE: [redacted]12/15/81

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) Gary Brown (Authorized Signature) DATE: 12/15/81

(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: 12/15/81

COMMENTS OR SPECIAL INSTRUCTIONS: _____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

001950

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

0435983

Authorization Number 997788

Valspar Corp. (Company Name) | 200 Sayre St (Address) | 8-159873715 (Phone Number) | 2010300032 (Generator Number)

Rockford (City) | Ill (State) | 61101 (Zip) | ILD001980135 (EPA Number)

WASTE HAULER(S)

Mr Frank's (Hauler Name) | 201 W 155 St (Hauler Address) | So. Holland Ill. | S.W.H. Registration Number 0079009

3125963377 (Phone Number) | ILD069506160 (EPA Number)

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

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chem Service (Facility Name) | PO Box 190 (Address) | 91808902 (Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip) | 2199214370 (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: Wash Solvent Sludge - Xylene WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW

SHIPPING DESCRIPTION: Paint Waste Wash Solvent

HAZARD CLASS: Flammable F003

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: 005000 (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 E Dropot (Authorized Signature) DATE 3-18-81

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) Michael Martin (Authorized Signature) DATE 03/19/81

(2) _____ (Authorized Signature) DATE __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ✓

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

[signature] (Authorized Signature) DATE 3/19/81

COMMENTS OR SPECIAL INSTRUCTIONS To West Agit 3/19/81 T-50 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

001941

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

0435984

Authorization Number 9977888

2010300032

Valspar Corp. (Company Name) | 200 Sayre St. (Address) | 8159873715 (Phone Number) | [redacted] (Generator Number)

Rockford (City) | Illinois (State) | 61101 (Zip) | ILD001980135 (EPA Number)

WASTE HAULER(S)

Mr. Frank's (Hauler Name) | 201 W. 155th St. So. Holland, IL (Hauler Address) | S.W.H. Registration Number 0079023

312596377 (Phone Number) | ILD069506160 (EPA Number)

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

(Phone Number) | (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chem. Service (Facility Name) | P.O. Box 190 (Address) | 91808902 (Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip) | 2199214390 (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: Wash Solvent Sludge-Xylene WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Paint Waste Wash Solvent Flammable

HAZARD CLASS: UN1992 (UN or NA Number) | D001 (EPA HW Number)

WEIGHT FOR D.O.T. USE: 35,000 LBS (circle one) — WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000 (1 GALLONS (Circle One) / 2 CU. YDS.)

METHOD OF SHIPMENT (Circle One) (DRUMS_____ 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 M Dysart (Authorized Signature) DATE 5/13/81

WASTE HAULER

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

(1) [signature] (Authorized Signature) DATE 05/13/81

(2) _____ (Authorized Signature) DATE __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO____

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

[signature] (Authorized Signature) DATE 05/13/81

COMMENTS OR SPECIAL INSTRUCTIONS TO EAST AGIT T-50 5/13/81 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

001942

STATE OF ILLINOIS

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

0435986

Authorization Number 9 97788

TO BE COMPLETED BY WASTE GENERATOR

Valspar Corp. (Company Name) | 201 Sayre St. (Address) | 811 598 7371 5 (Phone Number) | 20 1030 00 32 G (Generator Number)

Rockford (City) | Illinois (State) | 61101 (Zip) | ILD 0019 80 135 (EPA Number)

WASTE HAULER(S)

Mr. Frank's (Hauler Name) | 201 W. 155th St. So. Holland, IL (Hauler Address) | S.W.H. Registration Number 0079019

312 596 3377 (Phone Number) | ILD 069 506 160 (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) | P.O Box 190 (Address) | 016360265 (Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip) | 219 92 143 90 (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: Wash Solvent Sludge-Xylene WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Paint Waste Wash Solvent Flammable

HAZARD CLASS: UN 1993 (UN or NA Number) | D001 (EPA HW Number)

WEIGHT FOR D.O.T USE ____ LBS ____ TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 4500 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 E Dushot (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) Gary Thuen (Authorized Signature) DATE 06 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 WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

W McGee (Authorized Signature) DATE 6/15/81

COMMENTS OR SPECIAL INSTRUCTIONS TO WEST ACID T-350 6/15/81 JTM

IN ILLINOIS 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

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

REV. # 3

SITE COPY - PART 3

001943

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

0435987

Authorization Number 9 9 7 7 8 8

Valspar Corp. (Company Name) | 200 Sayre St. (Address) | 8 15 9 8 7 3 7 15 (Phone Number) | 2 0 1 0 3 0 0 0 3 2 G (Generator Number)

Rockford (City) | IL (State) | 61110 (Zip) | I L D 0 0 1 9 8 0 1 3 5 (EPA Number)

WASTE HAULER(S)

Mr. Franks (Hauler Name) | 201 W. 155th St. So. Holland, IL (Hauler Address) | S.W.H. Registration Number 0079029

312 (Phone Number) | I L D 0 6 9 5 0 6 1 6 0 (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) | P.O. Box 190 (Address) | 9 1 8 0 8 9 0 2 (Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip) | 2 1 9 9 2 1 4 3 9 0 (Phone Number) | IN 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: Wash Solvent & Sludge-Xylene | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION	HAZARD CLASS	UN or NA Number	EPA HW Number
Paint Waste Wash Solvent	Flammable	U N 1 9 9 3	D 0 0 1

WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 0 0 5 0 0 0 | (1) GALLONS (Circle One) (2) CU. YDS.

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION E Dimpt (Authorized Signature) DATE 7-15-81

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) Gary Lucas (Authorized Signature) DATE 071581

(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

J Dunbee (Authorized Signature) DATE 7/15/81

COMMENTS OR SPECIAL INSTRUCTIONS TO WEST ACT T-50 7/15/81 JDM

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

001944

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

0435989

Authorization Number 997788

Valspar Corp. (Company Name)	200 Sayre Street (Address)	8 1 5 9 8 7 3 7 1 5 (Phone Number)	2 0 1 0 2 0 0 0 3 2 G (Generator Number)
Rockford (City)	Illinois (State) 61101 (Zip)		I L D 0 0 1 9 8 0 1 3 5 (EPA Number)

WASTE HAULER(S)

Mr. Franks (Hauler Name)	201 W. 155th St., So. Holland, IL (Hauler Address)		S.W.H. Registration Number 0079025
		3 12 (Phone Number)	I L D 0 6 9 5 0 6 1 6 0 (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)	P.O. Box 190 (Address)			#9 1 8 0 8 9 0 2 (Site Number)
Griffith (City)	Indiana (State)	46319 (Zip)	2199214390 (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: Wahh Solvent & Sludge-Xylene WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Paint Waste Wash Solvent

HAZARD CLASS: Flammable

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 005000 (47–52) GALLONS (Circle One) 2 CU. YDS 1 (53)

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION E Dispot (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) Donald H Bult (Authorized Signature) DATE: 08/24/81 (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

[signature] (Authorized Signature) DATE 8/24/81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: TO 204R T-50 8/24/81 JM

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

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

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

SITE COPY - PART 3

001945

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

0435990

Authorization Number 997788

Valspar Corp.	200 Sayre Street	8159873715	2010300032
(Company Name)	Address	Phone Number	Generator Number
Rockford	Illinois	61101	ILD001980135
City	State	Zip	EPA Number

WASTE HAULER(S)

Mr. Franks	201 W. 155th St., So. Holland, IL	S.W.H. Registration Number 0079021
Hauler Name	Hauler Address	
	312 596-3377	ILD069506160
	Phone Number	EPA Number
Hauler Name	Hauler Address	S.W.H. Registration Number
	Phone Number	EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

Amer. Chemical Service	P.O. Box 190			91808902
(Facility Name)	Address			Site Number
/Griffith	Indiana	46319	2199214390	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: Wash Solvent & Sludge-Xylene WASTE 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:	
Paint Waste Wash Solvent Flammable	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: 005000 (GALLONS / CU. YDS. (Circle One))

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION E Dreyfus (Authorized Signature) DATE: 8/28/81

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 08/28/81

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

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

(Authorized Signature) DATE 9/2/81

COMMENTS OR SPECIAL INSTRUCTIONS: T/W SPOTTED 8/28/81. TO 211R T-50 9/2/81

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

001946

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

0435991

Authorization Number 997788

Valspar Corp. (Company Name) | 200 Sayre Street (Address) | 8159873715 (Phone Number) | 201030003 2 (Generator Number)

Rockford (City) | Ill. (State) | 61101 (Zip) | ILD001980135 (EPA Number)

WASTE HAULER(S)

Mr. Franks (Hauler Name) | 201 W. 115th St., So. Holland, IL (Hauler Address) | S W H Registration Number 0079021

3125963377 (Phone Number) | ILD069506160 (EPA Number)

Hauler Name | Hauler Address | S W H Registration Number

Phone Number | EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) | P.O. Box 190 (Address) | 91808902 (Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip) | 2199214390 (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: Wash Solvent & Sludge-Xylene | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW

SHIPPING DESCRIPTION:	HAZARD CLASS	UN or NA Number	EPA HW Number
Paint Waste Wash Solvent	Flammable	UN1993	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: 005300 (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 E Dispot (Authorized Signature) DATE 9/10/81

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) Gary Lauer (Authorized Signature) DATE 09/10/81

(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 9/10/81

COMMENTS OR SPECIAL INSTRUCTIONS: To 210 R T-50 gtm 9/10/81

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

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

REV. # 3

SITE COPY - PART 3

001947

STATE OF ILLINOIS

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

0435996

Authorization Number 9 9 7 7 8 8

TO BE COMPLETED BY WASTE GENERATOR

Valspar Corp (Company Name)	200 Sayre St. (Address)		8159873715 (Phone Number)	2010300032 (Generator Number) G
Rockford (City)	ILL (State)	61101 (Zip)		ILD001980135 (EPA Number)

WASTE HAULER(S)

Mr. Frankd (Hauler Name)	201 W. 115th St., So. Holland IL (Hauler Address)		S.W.H. Registration Number 0079021
		3125963377 (Phone Number)	ILD069506160 (EPA Number)
(Hauler Name)	(Hauler Address)		S.W.H. Registration Number
		(Phone Number)	(EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name)	P.O. Box 190 (Address)			91808902 (Site Number)
Griffith (City)	Indiana (State)	46319 (Zip)	2199214390 (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: Wash Solvent & Sludge Xylene — WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION	HAZARD CLASS	UN or NA Number	EPA HW Number
Paint Waste Wash Solvent	Flammable	UN1993	D001

WEIGHT FOR D.O.T. USE 400000 LBS / TONS (circle one) — WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. — QUANTITY OF WASTE DELIVERED 005500 — 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 E Drapt (Authorized Signature) DATE: 10-21-81

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) Michael D Martin (Authorized Signature) DATE 10/21/81

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

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

(Authorized Signature) DATE 10/21/81

COMMENTS OR SPECIAL INSTRUCTIONS: To 210Z I-50 10/21/81 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

001948

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

0418167

Authorization Number 997788

Valspar Corporation (Company Name) | 200 Sayre Street (Address) | 815 - 987-3715 (Phone Number) | 2 0 1 0 3 0 0 0 3 2 G (Generator Number)

Rockford (City) | Ill. (State) | 61101 (Zip) | I L D 0 0 1 9 8 0 1 3 5 (EPA Number)

WASTE HAULER(S)

Mr. Franks (Hauler Name) | 201 S. 115th St. So. Holland, Ill. (Hauler Address) | S.W.H. Registration Number 0079018

312 - 596-3377 (Phone Number) | I L D 0 6 9 5 0 6 1 6 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) | P.O. Box 190 (Address) | 9 1 8 0 3 9 0 Y (Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip) | 219 921-4390 (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: Wash Solvent and Sludge Xylene WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Paint Waste Wash Solvent Flammable

HAZARD CLASS: 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 004000 (47–52) 1 GALLONS (Circle One) 2 CU YDS. 1 (53)

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION E Dunphy (Authorized Signature) DATE 5-26-82

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) Michael D. Martin (Authorized Signature) DATE 05/26/82 (54–59)

(2) _____ (Authorized Signature) DATE: / / (54–59)

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

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

T Hamlee (Authorized Signature) DATE 5/26/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS _____

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

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

REV. # 3

SITE COPY - PART 3

To 205K T-506PM 5.26.82

002505

STATE OF ILLINOIS

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

0418173

Authorization Number 99788

TO BE COMPLETED BY WASTE GENERATOR

Valspar Corp. (Company Name)	200 Sayre Street (Address)	8159873715 (Phone Number)	201 03 000 32 G (Generator Number)	
Rockford, Il (City)	Ill. (State)	61101 (Zip)	ILD00 1980 135 (EPA Number)	

WASTE HAULER(S)

Mr. Franks (Hauler Name)	201 W. 115th St., So. Holland, Ill. (Hauler Address)	S.W.H. Registration Number 007902 21	
		312 596 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

American Chemical Serv. (Facility Name)	P.O. Box 190 (Address)		9 [illegible]8 08902 (Site Number)	
Griffith (City)	Ind. (State)	46319 (Zip)	219 921 4390 (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: Wash solvent and Sludge Xylene WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
Paint Waste Wash Solvent	Flammable	UN1993	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: 5500 (1 GALLONS (Circle One) 2 CU. YDS)

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION (Authorized Signature) DATE 1/29/82 ~~1/27/82~~

WASTE HAULER

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

(1) ____ (Authorized Signature) DATE: 01/29/82

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

____ (Authorized Signature) DATE 01/29/82

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

T0206R T-50 6124 1/29/82

002499

STATE OF ILLINOIS

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

0418175

Authorization Number 997788

TO BE COMPLETED BY WASTE GENERATOR

Valspar Corporation (Company Name)	200 Sayre Street (Address)	8 15 987 3715 (Phone Number)	2 0 1 0 3 0 0 0 3 2 G (Generator Number)
Rockford (City)	Ill. (State)	61101 (Zip)	I L D 0 0 1 9 8 0 1 3 5 (EPA Number)

WASTE HAULER(S)

Mr. Fraanks (Hauler Name)	201 W. 115th Street So. Holland, Ill. (Hauler Address)		S.W.H. Registration Number 0079029
		312 596 3377 (Phone Number)	I L D 0 6 9 5 0 6 1 6 0 (EPA Number)
(Hauler Name)	(Hauler Address)		S.W.H. Registration Number
		(Phone Number)	(EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Serv (Facility Name)	P.O. Box 190 (Address)				9 1 8 0 8 9 0 2 (Site Number)
Griffith (City)	Ind. (State)	46319 (Zip)	219 921 4390 (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: Wash Solvent & Sludge Xylene WASTE 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:		
Paint Waste Wash Solvent	Flammable	U N 1 9 9 3 (UN or NA Number)	D 0 0 1 (EPA HW Number)

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 0 0 5 0 0 0 (47–52) 1 GALLONS (Circle One) 2 CU YDS. (53)

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION E Dept (Authorized Signature) DATE 2-26-82

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 02 26 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 2/26/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS: 217 / 782-3637 — 24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS — OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

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

REV. # 3

SITE COPY - PART 3

TO 142R T-63 6RM 2/26/82 6RM

002500

STATE OF ILLINOIS

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

0418177

Authorization Number 997788

TO BE COMPLETED BY WASTE GENERATOR

Valspar Corporation (Company Name)	200 Sayre Street (Address)	815 - 987- 3715 (Phone Number)	2 0 1 0 3 0 0 0 3 2 G (Generator Number)
Rockford, (City)	Ill. (State)	61101 (Zip)	I L D 0 0 1 9 8 0 1 3 5 (EPA Number)

WASTE HAULER(S)

Mr. Franks (Hauler Name)	201 W. 115th St. So. Holland, Ill. (Hauler Address)		S W H. Registration Number 0079029
		312- 596- 3377 (Phone Number)	I L D 0 6 9 5 0 6 1 6 0 (EPA Number)
(Hauler Name)	(Hauler Address)		S.W.H. Registration Number
		(Phone Number)	(EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chem. Serive (Facility Name)	P.O. Box 190 (Address)			9 1 8 0 8 9 0 X (Site Number)
Griffith (City)	Indiana (State)	46319 (Zip)	219 921-4390 (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: Wash Solvent & Sludge Xylene WASTE 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:		
Paint Waste Wash Solvent	Flammable	U N 1 9 9 3 (UN or NA Number)	D 0 0 1 (EPA HW Number)

WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one)

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

QUANTITY OF WASTE DELIVERED 005000 (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 E M Nerpot (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) Gary Swan (Authorized Signature) DATE 03/30/82 (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

H W Miller (Authorized Signature) DATE 3 30 82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

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

REV. # 3

SITE COPY - PART 3

To 123R T-63 GPM 3-30-82

002501

STATE OF ILLINOIS

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

0418178

Authorization Number 997788

TO BE COMPLETED BY WASTE GENERATOR

Valspar Corporation	200 Sayre Street	815 - 987-3715	2010300032 G
(Company Name)	Address	Phone Number	Generator Number

Rockford	Ill.	61101	ILD001980135
City	State	Zip	EPA Number

WASTE HAULER(S)

Mr. FRANKS	201 W. 115th St. So. Holland, Ill.	S.W.H. Registration Number 0079021
Hauler Name	Hauler Address	
	312 - 596-3377	ILD069506160
	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	P.O. Box 190	9190590
(Facility Name)	Address	Site Number

Griffith	Ind.	46319	219- 921-4390	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: Wash Solvent & Sludge Xylene WASTE 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:	UN1993	D001
Paint Waste Wash Solvent	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 005500 (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 [signature] (Authorized Signature) DATE 4-23-82

WASTE HAULER

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

(1) [signature] (Authorized Signature) DATE 04/26/82 (54–59)

(2) _____ (Authorized Signature) DATE __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY* HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO_____

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

[signature] (Authorized Signature) DATE 04/26/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

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

REV # 3

SITE COPY - PART 3

To 121 K T-63 GRM 4.26.82

002503

0418179

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 0997788

Valspar Corporation (Company Name)	200 Sayre Street (Address)	815 - 987-3715 (Phone Number)	2010300032 (Generator Number)
Rockford (City)	Ill. (State)	61101 (Zip)	ILD001980135 (EPA Number)

WASTE HAULER(S)

Mr. Franks (Hauler Name)	201 S. 115th St. So. Holland, Ill. (Hauler Address)		S.W.H. Registration Number 0079018
		312 - 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

American Chem Serv. (Facility Name)	P.O. Box 190 (Address)			9180890 (Site Number)
Griffith (City)	Ind. (State)	46319 (Zip)	219 921-4390 (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: Wash Solvent and Sludge Xylene WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
Paint Waste Wash Solvent	Flammable	UN1993	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: 005000 (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 E Dispot (Authorized Signature) DATE 5-21-82

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) Gary Green (Authorized Signature) DATE 05/21/82

(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 5/24/82

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

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

REV. # 3

SITE COPY - PART 3 To 210 KT-50 GRM 5-21-82

002504

STATE OF ILLINOIS

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

0418180

Authorization Number 997788

TO BE COMPLETED BY WASTE GENERATOR

Valspar Corporation	200 Sayre Street	815 - 987-3715	2 0 1 0 3 0 0 0 3 2 G
(Company Name)	Address	Phone Number	Generator Number
Rockford	Ill.	61101	I L D 0 0 1 9 8 0 1 3 5
City	State	Zip	EPA Number

WASTE HAULER(S)

Mr. Franks	201 S. 115th St. So Holland, Ill.	S.W.H. Registration Number 0079/029
Hauler Name	Hauler Address	
	312 596-3377	I L D 0 6 9 5 0 6 1 6 0
	Phone Number	EPA Number
Hauler Name	Hauler Address	S.W.H. Registration Number
	Phone Number	EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chem. Service	P.O. Box 190	9 1 8 0 8 9 0 2
(Facility Name)	Address	Site Number
Griffith	Indiana	46319	219 921-4390	I N D 0 1 6 3 6 0 2 6 5
---	---	---	---	---
City	State	Zip	Phone Number	EPA Number
Alternate (Facility Name)	Address			Site Number
City	State	Zip	Phone Number	EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Wash Solvent and Sludge Xylene WASTE 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:		
Paint Waste Wash Solvent Flammable		U N 1 9 9 3	D 0 0 1
		UN or NA Number	EPA HW Number

WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 0 0 5 0 0 0 (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 E Dwight (Authorized Signature) DATE 6-28-82

WASTE HAULER

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

(1) Donald H Bult (Authorized Signature) DATE 06 28 82 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

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

(Authorized Signature) DATE 6/28/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS, 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

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

REV. # 3

SITE COPY - PART 3

To 210 RT-50 6RM 6-28-82

002506

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

0418181
Authorization Number ~~99188~~

Valspar Corporation	200 Sayre Street	815 987-3715	2 0 1 0 3 0 0 0 3 2 G
(Company Name)	Address	Phone Number	Generator Number
Rockford, Ill.	Ill.	61101	I L D 0 0 1 9 8 0 1 3 5
City	State	Zip	EPA Number

WASTE HAULER(S)

Mr. Franks	201 S. 115th St. So Holland, Ill.	S.W.H. Registration Number 0079018
Hauler Name	Hauler Address	
	312 596-3377	I L D 0 6 9 5 0 6 1 6 0
	Phone Number	EPA Number
Hauler Name	Hauler Address	S.W.H. Registration Number
	Phone Number	EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

Amoerican Chemical Service	P.O. Box 190	9180390
(Facility Name)	Address	Site Number

Griffith	Indiana	46319	219 921-4390	I N D 0 1 6 3 6 0 2 6 5
City	State	Zip	Phone Number	EPA Number

Alternate (Facility Name)	Address	Site Number
City	State	Zip / Phone Number / EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Wash Solvent and Sludge Xylene WASTE 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:		
Paint Waste Wash Solvent	Flammable	U N 1 9 9 3 (UN or NA Number)	D 0 0 1 (EPA HW Number)

WEIGHT FOR D.O.T. USE 28,500 (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 6 0 0 (1 GALLONS, 2 CU. YDS. (Circle One)) 2

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/OR E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION E Dephor (Authorized Signature) DATE 7-15-82

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) Robert Perkins (Authorized Signature) DATE 07/15/82

(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 7/15/82

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 211 RT-50 GRN 7.15.82

002507

STATE OF ILLINOIS

0418182

TO BE COMPLETED BY WASTE GENERATOR

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

Authorization Number ____

Valspar Corporation	200 Sayre Street	815 - 987-3715	2 0 1 0 3 0 0 0 3 2 G
(Company Name)	Address	Phone Number	Generator Number
Rockford	Ill.	61101	I L D 0 0 1 9 8 0 1 3 5
City	State	Zip	EPA Number

WASTE HAULER(S)

Mr. Franks	201 S. 115th St. So. Holland, Ill.	S.W.H. Registration Number 0 0 7 9 0 2 9
Hauler Name	Hauler Address	
	312 - 596-3377	I L D 0 6 9 5 0 6 1 6 0
	Phone Number	EPA Number
Hauler Name	Hauler Address	S.W.H. Registration Number
	Phone Number	EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service	P.O. Box 190			9 1 8 0 8 9 0 Y
(Facility Name)	Address			Site Number
Griffith	Indiana	46319	219 - 921-4390	I N D 0 1 6 3 6 0 2 6 5
City	State	Zip	Phone Number	EPA Number
Alternate (Facility Name)	Address			Site Number
City	State	Zip	Phone Number	EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Wash solvent and Sludge Xylene WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS	UN or NA Number	EPA HW Number
Paint Waste Wash Solvent	Flammable	U N 1 9 9 3	D 0 0 1

WEIGHT FOR D.O.T USE 40,000 (LBS) TONS (circle one)

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

QUANTITY OF WASTE DELIVERED 0 0 5 0 0 0 (47–52) 1 (GALLONS) 2 CU. YDS. (Circle One) 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) ____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION E Dippel (Authorized Signature) DATE: 8-B-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) Michael D Martin (Authorized Signature) DATE 08/13/82 (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:

P Lemke (Authorized Signature) DATE 08/13/82 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: ____

IN ILLINOIS, 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS, 800 / 424-8802 or 202 / 426-2675

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

REV. # 3

SITE COPY - PART 3

To 210 TE 7-50 EPA 8-13-82

002508

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

0418183

Authorization Number

(Company Name)	Address	Phone Number	Generator Number
Valspar Corporation	200 Sayre STreet	815-987-3715	2010300032 G

City	State	Zip	EPA Number
Rockford,	Ill.	61101	ILD001980135

WASTE HAULER(S)

Hauler Name	Hauler Address	S.W.H. Registration Number	Phone Number	EPA Number
Mr. Franks	201 S. 115th St., So. Holland, Ill.	0079019	312-596-3377	ILD069506160

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

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

(Facility Name)	Address	Site Number	City	State	Zip	Phone Number	EPA Number
American Chemical Service	P.O. Box 190		Griffith	Indiana	46319	219-921-4390	IND016360265

Alternate (Facility Name)	Address	Site Number	City	State	Zip	Phone Number	EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Wash solvent and Sludge Xylene WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION	HAZARD CLASS	UN or NA Number	EPA HW Number
Paint Waste Wash Solvent	Flammable	UN1993	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 004500 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 E Dispot (Authorized Signature) DATE 9-3-82

WASTE HAULER

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

(1) Gary Cruen (Authorized Signature) DATE 09/08/82

(2) _____ (Authorized Signature) DATE __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ____

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

[signature] (Authorized Signature) DATE 9/8/82

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

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

REV. # 3

SITE COPY - PART 3 To 211RT-50 6AM 9.8.82

002511

OMPLETED 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

0418184

Authorization Number

Valspar Corporation (Company Name) | 200 Sayre STreet (Address) | 815 987-3715 (Phone Number) | 2 0 1 0 3 0 0 0 3 2 G (Generator Number)

Rockford (City) | Ill. (State) | 61101 (Zip) | I L D 0 0 4 1 9 8 0 1 3 5 (EPA Number)

WASTE HAULER(S)

Mr. Franks (Hauler Name) | 201 S. 115th St. So Holland, Ill. (Hauler Address) | S.W.H. Registration Number 0079019

312 596-3377 (Phone Number) | I L D 0 6 9 5 0 6 1 6 0 (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) | P.O. Box 190 (Address) | 9 1 8 0 8 9 0 2 (Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip) | 219 921-4390 (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: Wash solvent and Sludge Xylene | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW

SHIPPING DESCRIPTION:	HAZARD CLASS	UN or NA Number	EPA HW Number
Paint Waste WAsh Solvent	Flammable	U N 1 9 9 3	D 0 0 1

WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 0 0 4 5 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 C Wright (Authorized Signature) DATE 9-10-82

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) Ronald Bridgewater (Authorized Signature) DATE 9/13/82

(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.

(Authorized Signature) DATE 9/13/82

COMMENTS OR SPECIAL INSTRUCTIONS: _____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

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

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

REV. # 3

SITE COPY - PART 3

To 211E 7-SOGAW 9-13-82

002510

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

0418186

Authorization Number

Valspar Corporation	200 Sayre Street	815-987-3715	2 0 1 0 3 0 0 0 3 2 G
(Company Name)	Address	Phone Number	Generator Number
Rockford	Ill.	61101	I L D 0 0 1 9 8 0 1 3 5
City	State	Zip	EPA Number

WASTE HAULER(S)

Mr. Franks	201 W. 155th St. So. Holland, Ill.		S.W.H. Registration Number 0079025
Hauler Name	Hauler Address	312-596-3377 Phone Number	I L D 0 6 9 5 0 6 1 6 0 EPA Number
			S.W.H. Registration Number
Hauler Name	Hauler Address	Phone Number	EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chem. Serice	P.O. Box 190			Site Number
(Facility Name)	Address			
Griffith	Ind	46319	219-921-4390	I ND 0 1 6 3 6 0 2 6 5
City	State	Zip	Phone Number	EPA Number
Alternate (Facility Name)	Address			Site Number
City	State	Zip	Phone Number	EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Wash Solvent and Sludge Xylene WASTE 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:		
Paint Waste WAsh Solvent	Flammable	U N 1 9 9 3 UN or NA Number	D 0 0 1 EPA HW Number

WEIGHT FOR D.O.T. USE 37,500 ~~LBS~~ TONS (circle one)

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

QUANTITY OF WASTE DELIVERED 005000 GALLONS (Circle One) 2 CU. YDS. 1

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Dumuth (Authorized Signature) DATE 10-26-82

WASTE HAULER

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

(1) Robert Perkins (Authorized Signature) DATE 10/26/82

(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: 10/26/82

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 TO205 R T-SO EXM 10 26 82

002514

0418190

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 _____

(Company Name)	Address	Phone Number	Generator Number
Valspar Corporation	200 Sayre Street	815-987-3715	2010300032 G

City	State	Zip	EPA Number
Rockford	Ill.	61101	ILD001980135

WASTE HAULER(S)

Hauler Name	Hauler Address	S.W.H. Registration Number	Phone Number	EPA Number
Mr. Franks	201 S. 115th St. So. Holland, Ill.	0079019	312 - 596-3377	ILD069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

(Facility Name)	Address	Site Number	City	State	Zip	Phone Number	EPA Number
American Chemical Service	P.O. Box 190		Griffith	Indiana	46319	219-921-4390	IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Wash solvent and Sludge Xylene WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
Paint Waste Wash Solvent	Flammable	UN1993	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 004500 1 GALLONS (Circle One) 2 CU. YDS. 1

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Charles Baymiller (Authorized Signature) DATE: 9/21/82

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) Michael D. Morton (Authorized Signature) DATE: 09/21/82

(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 09/21/82

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

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

T0210E T-50 GRM 9-21-82

002512

STATE OF ILLINOIS

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

0418191

Authorization Number

TO BE COMPLETED BY WASTE GENERATOR

Valspar Corporation (Company Name) | 200 Sayre Street (Address) | 815-987-3715 (Phone Number) | 2 0 1 0 3 0 0 0 3 2 G (Generator Number)

Rockford (City) | Ill. (State) | 61101 (Zip) | I L D 0 0 1 9 8 0 1 3 5 (EPA Number)

WASTE HAULER(S)

Mr. Franks (Hauler Name) | 201 S. 115th St. So. Holland, Ill. (Hauler Address) | S.W.H. Registration Number 0079603

312 - 596-3377 (Phone Number) | I L D 0 6 9 5 0 6 1 6 0 (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) | P.O. Box 190 (Address) | 9 1 8 0 9 8 0 2 (Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip) | 219-921-4390 (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: Wash solvent and Sludge Xylene — WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW

SHIPPING DESCRIPTION: Paint Waste Wash Solvent — HAZARD CLASS: Flammable

U N 1 9 9 3 (UN or NA Number) | D 0 0 1 (EPA HW Number)

WEIGHT FOR D.O.T USE ____ LBS / TONS (circle one)

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

QUANTITY OF WASTE DELIVERED 0 0 5 0 0 0 — 1 GALLONS (Circle One) / 2 CU. YDS. 1

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION E M Despot /ss (Authorized Signature) DATE 12/8/82

WASTE HAULER

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

(1) [signature] (Authorized Signature) DATE 12/08/82

(2) ____ (Authorized Signature) DATE ____/____/____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

[signature] (Authorized Signature) DATE 12/08/82

COMMENTS OR SPECIAL INSTRUCTIONS ____

IN ILLINOIS, 217 / 782-3637 — *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS, 800 / 424-8802 or 202 / 426-2675

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

REV. # 3

SITE COPY - PART 3

TC 211KT-SC 6EM 12-8-82

002515

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

0418203 (1–7)

Authorization Number (8–13)

Valspar Corporation (Company Name) | 200 Sayre Street (Address) | 815-987-3700 (Phone Number) | 2 0 1 0 3 0 0 0 3 2 (14–24 Generator Number)

Rockford (City) | Illinois (State) | 61101 (Zip) | I L D 0 0 1 9 8 0 1 3 5 (EPA Number)

WASTE HAULER(S)

Mr. Franks (Hauler Name) | 201 W. 155th St., So. Holland, IL (Hauler Address) | S.W.H. Registration Number 0079019 (25–31)

312-596-3377 (Phone Number) | I L D 0 6 9 5 0 6 1 6 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) | P.O. Box 190 (Address) | 9 1 8 0 9 8 0 2 (39–46 Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip) | 219-921-4390 (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: Wash solvent and Sludge Xylene | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Paint Waste Wash Solvent | HAZARD CLASS: Flammable | U N 1 9 9 3 (UN or NA Number) | D 0 0 1 (EPA HW Number)

WEIGHT FOR D.O.T. USE 42000 (LBS) TONS (circle one) | WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. | QUANTITY OF WASTE DELIVERED: 004500 (47–52) | 1 GALLONS (Circle One) 2 CU. YDS. / (53)

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION 53 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 Dispol (Authorized Signature) DATE: 9-30-83

WASTE HAULER

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

(1) Michael Morton (Authorized Signature) DATE: 10/02/83 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

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

(Authorized Signature) DATE: 10/03/83 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS: 217 / 782-3637 | *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* | OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

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

REV. # 3

SITE COPY - PART 3

To 210 KT-50 GAL. 10-3-83

004618

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

0418192

Authorization Number

Valspar Corporation (Company Name) | 200 Sayre Street (Address) | 815-987-3700 (Phone Number) | 2 0 1 0 3 0 0 0 3 2 G (Generator Number)

Rockford (City) | Ill. (State) | 61101 (Zip) | I L D 0 0 1 9 8 0 1 3 5 (EPA Number)

WASTE HAULER(S)

Mr. Franks (Hauler Name) | 201 W. 155th St. So. Holland, Ill. (Hauler Address) | S.W.H. Registration Number 0079018

312-596-3377 (Phone Number) | I L D 0 6 9 5 0 6 1 6 0 (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) | P.O. Box 190 (Address) | Site Number

Griffith (City) | Indiana (State) | 46319 (Zip) | 219-921-4390 (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: Wash solvent and Sludge ~~EXX~~ Xylene WASTE 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
Paiftt Waste Wash Solvent	Flammable	U N 1 9 9 3	D 0 0 1

WEIGHT FOR D.O.T. USE ____ LBS / ____ TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 005000 (1 GALLONS / 2 CU. YDS. (Circle One)) 1

METHOD OF SHIPMENT (Circle One): (DRUMS ____ Number) TANK TRUCK OPEN TRUCK OTHER (Specify) ____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION E Dight (Authorized Signature) DATE 1-11-83

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 01/11/83

(2) ____ (Authorized Signature) DATE ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

____ (Authorized Signature) DATE 1/11/83

COMMENTS OR SPECIAL INSTRUCTIONS: ____

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 /

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

REV # 3

SITE COPY - PART 3

To 210K T-50 01M 1/11/83

005445

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

0418193 (1–7)

Authorization Number ____ (8–13)

Valspar Corporation (Company Name)	200 Sayre Street (Address)	815-987-3700 (Phone Number)	2 0 1 0 3 0 0 0 3 2 (14 Generator Number) G (24)
Rockford (City)	Ill. (State)	61101 (Zip)	I L D 0 0 1 9 8 0 1 3 5 (EPA Number)

WASTE HAULER(S)

Mr. Franks (Hauler Name)	201 S. 115th St. So. Holland, Ill (Hauler Address)	S.W.H. Registration Number 0079 029 (25–31)
	312-596-3377 (Phone Number)	I L D 0 6 9 5 0 6 1 6 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)	P.O. Box 190 (Address)			(39 Site Number 46)
Griffith (City)	Indiana (State)	46319 (Zip)	219-921-4390 (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: Wash solvent and Sludge Xylene WASTE 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:		
Paint Waste Wash Solvent	Flammable	U N 1 9 9 3 (UN or NA Number)	D 0 0 1 (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 5 0 0 0 (47–52) GALLONS (Circle One) 2 CU. YDS (53)

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION ____ (Authorized Signature) DATE: 2-7-83

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: 02/07/83 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

Bob Mauck (Authorized Signature) DATE: 2/10/83 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: 17

IN ILLINOIS 217 / 782-3637 *24 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 K7-50 GRM 2-8-83

005446

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

0418189

Authorization Number

Valspar Corporation (Company Name)	200 Sayre Street (Address)	815-987-3700 (Phone Number)	2010300032 (Generator Number)
Rockford (City)	Ill. (State)	61101 (Zip)	ILD001980135 (EPA Number)

WASTE HAULER(S)

Mr. Franks (Hauler Name)	201 S. 115th St. So. Holland, Ill. (Hauler Address)	312-596-3377 (Phone Number)	S.W.H. Registration Number 0079019
			ILD069506160 (EPA Number)
(Hauler Name)	(Hauler Address)	(Phone Number)	S.W.H. Registration Number
			(EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name)	P.O. Box 190 (Address)			Site Number
Griffith (City)	Indiana (State)	46319 (Zip)	219-921-4390 (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: Wash solvent and Sludge Xylene WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW

SHIPPING DESCRIPTION: Paint Waste Wash Solvent HAZARD CLASS: Flammable

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: 003500 (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 E. Dispot (Authorized Signature) DATE: 3-18-83

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) Michael Martin (Authorized Signature) DATE: 03/18/83 (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

[signature] (Authorized Signature) DATE: 03/18/83 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2

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 T0211ET-50-6EM 3.18.83

005447

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

0418194

Authorization Number

Valspar Corporation (Company Name) | 200 Sayre Street (Address) | 815-987-3700 (Phone Number) | 2 0 1 0 3 0 0 0 3 2 G (14 Generator Number 24)

Rockford (City) | Ill. (State) | 61101 (Zip) | I L D 0 0 1 9 8 0 1 3 5 (EPA Number)

WASTE HAULER(S)

Mr. Franks (Hauler Name) | 201 S. 115th St. So.Holland, Ill. (Hauler Address) | S.W.H. Registration Number 0079019 (25 31)

312-596-3377 (Phone Number) | I L D 0 6 9 5 0 6 1 6 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) | P.O. Box 190 (Address) | (39 Site Number 40)

Griffith (City) | Indiana (State) | (Zip) | 219-921-4390 (Phone Number) | I N D 0 1 6 3 6 0 2 6 5 (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: Wash solvent and Sludge Xylene | WASTE PHASE: liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION	HAZARD CLASS	UN or NA Number	EPA HW Number
Paint Waste Wash Solvent	Flammable	U N 1 9 9 3	D 0 0 1

WEIGHT FOR D.O.T USE _____ LBS / TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 004500 (47 52) 1 GALLONS (Circle One) 2 CU. YDS. (53)

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION _____ (Authorized Signature) DATE 4-12-83

WASTE HAULER

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

(1) _____ (Authorized Signature) DATE 04/12/83 (54 59)

(2) _____ (Authorized Signature) DATE __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO XX

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

_____ (Authorized Signature) DATE 04/12/83 (60 65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

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

REV. # 3

SITE COPY - PART 3

TO 211 RT-50 GRM 4.12.83

005448

STATE OF ILLINOIS

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

0418195

TO BE COMPLETED BY WASTE GENERATOR

Authorization Number

Valspar Corporation (Company Name) | 200 Sayre St. (Address) | 815-987-3700 (Phone Number) | 2 0 1 0 3 0 0 0 3 2 G (Generator Number)

Rockford, (City) | Ill. (State) | 61101 (Zip) | I L D 0 0 1 9 8 0 1 3 5 (EPA Number)

WASTE HAULER(S)

Mr. Franks (Hauler Name) | 201 S. 156th St. So. Holland, Ill. (Hauler Address) | S.W.H. Registration Number 0079019

312-596-3377 (Phone Number) | I L D 0 6 9 5 0 6 1 6 0 (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) | P.O. Box 190 (Address) | 9 1 8 0 9 8 6 2 (Site Number)

Griffith (City) | Indiana (State) | 46319 (Zip) | 219-921-4390 (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: Wash solvent and sludge Xylene | WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
Paint Waste Wash Solvent	Flammable	U N 1 9 9 3	D 0 0 1

WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one)

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

QUANTITY OF WASTE DELIVERED 004500 (47–52) | 1 GALLONS (Circle One) 2 CU YDS. | 1 (53)

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION (Authorized Signature) | DATE 4/26/83

WASTE HAULER

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

(1) Michael Marten (Authorized Signature) | DATE 04/27/83 (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 04/27/83 (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 210F T-50 GRM 4.27.83

005449

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

0418196

OUT OF STATE DISPOS

Authorization Number 000000 (8–13)

Valspar Corporation (Company Name)	200 Sayre St. (Address)	815/987-3700 (Phone Number)	2 0 1 0 3 0 0 0 3 2 (14) Generator Number (24) G
Rockford (City)	Ill. (State)	61101 (Zip)	I L D 0 0 1 9 8 0 1 3 5 EPA Number

WASTE HAULER(S)

Mr. Franks (Hauler Name)	201 S. 115th St. So. Holland, Ill. (Hauler Address)		S.W.H. Registration Number 0079029 (25–31)
		312/596-3377 (Phone Number)	I L D 0 6 9 5 0 6 1 6 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)	P.O. Box 190 (Address)			9 1 8 0 9 8 0 2 (39–46) Site Number
Griffith (City)	Indiana (State)	46319 (Zip)	219/921-4390 (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: Wash solvent and sludge Xylene WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW

SHIPPING DESCRIPTION	HAZARD CLASS	UN 1993 (UN or NA Number)	D001 (EPA HW Number)
Paint Waste Wash Solvent	Flammable		

WEIGHT FOR D.O.T. USE 38,000 (BS) TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 005000 (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 E Dispot (Authorized Signature) DATE: 5-19-83

WASTE HAULER

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

(1) Robert Perkins (Authorized Signature) DATE: 05/20/83 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES____ NO X

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

(Authorized Signature) DATE: 5/20/83 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS ____

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

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

REV # 3

SITE COPY - PART 3

To 211 FT-50 ERM 5-20-83

005450

0418197

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

out of state

Authorization Number 000000 (8–13)

Valspar Corporation	200 Sayre St.	815/987-3700	2010300032 G
(Company Name)	Address	Phone Number	Generator Number (14–24)

Rockford	Illinois	61101	ILD001980135
City	State	Zip	EPA Number

WASTE HAULER(S)

Mr. Franks	201 S. 115th St. So. Holland, Ill.		S.W.H. Registration Number 0079018 (25–31)
Hauler Name	Hauler Address	312/596-3377 Phone Number	ILD069506160 EPA Number
Hauler Name	Hauler Address		S.W.H. Registration Number (32–38)
		Phone Number	EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service	P.O. Box 190			918098 02
(Facility Name)	Address			Site Number (39–46)
Griffith	Indiana	46319	219/921-4390	IND016360265
City	State	Zip	Phone Number	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: Wash solvent and sludge Xylene WASTE PHASE Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW.

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
Paint Waste Wash Solvent	Flammable	UN1993	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 004800 (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 E Despot (Authorized Signature) DATE 6-9-83

WASTE HAULER

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

(1) [signature] (Authorized Signature) DATE 06/09/83 (54–59)

(2) _____ (Authorized Signature) DATE __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

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

_____ (Authorized Signature) DATE 06/09/83 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS _____

IN ILLINOIS 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

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

REV # 3

SITE COPY - PART 3

To 211 FT. 50 GPM 6.9.83

005451

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

0418198

Authorization Number

Valspar Corporation (Company Name)	200 Sayre Street (Address)	815-987-3700 (Phone Number)	2 0 1 0 3 0 0 0 3 2 G (Generator Number)
Rockford (City)	Ill. (State)	61101 (Zip)	I L D 0 0 1 9 8 0 1 3 5 (EPA Number)

WASTE HAULER(S)

Mr. Franks (Hauler Name)	201 S. 115th St. So. Holland, Ill. (Hauler Address)	312-596-3377 (Phone Number)	S.W.H. Registration Number 0 0 7 9 0 7 1 (EPA Number) I L D 0 6 9 5 0 6 1 6 0
(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)			(Site Number)
Griffith (City)	Indiana (State)	46319 (Zip)	219092104390 (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: Wash solvent and Sludge Xylene WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW

SHIPPING DESCRIPTION	HAZARD CLASS	UN or NA Number	EPA HW Number
Paint Waste Wash Solvent	Flammable	U N 1 9 9 3	D 0 0 1

WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 0 0 4 1 0 0 (47–52) 1 GALLONS (Circle One) / 2 CU. YDS. (53)

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION _____ (Authorized Signature) DATE: 6/29/83

WASTE HAULER

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

(1) _____ (Authorized Signature) DATE: 06/29/83. (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: 06/29/83. (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. # 3

SITE COPY - PART 3

To 211 RT-50 GRN 6-29-83

005452

STATE OF ILLINOIS

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

0418199 (1–7)

Authorization Number (8–13)

TO BE COMPLETED BY WASTE GENERATOR

Valspar Corporation (Company Name)	200 Sayre Street (Address)	815-987-3700 (Phone Number)	2 0 1 0 3 0 0 0 3 2 G (14–24) Generator Number	
Rockford (City)	Illinois (State)	61101 (Zip)	I L D 0 0 1 9 8 0 1 3 5 (EPA Number)	

WASTE HAULER(S)

Mr. Franks (Hauler Name)	201 W. 155th St. So. Holland, Il. (Hauler Address)		S.W.H. Registration Number 0079019 (25–31)
		312-596-4390 (Phone Number)	I L D 0 6 9 5 0 6 1 6 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)	P.O. Box 190 (Address)			9 1 8 0 9 8 0 2 (39–46) Site Number
Griffith (City)	Indiana (State)	46319 (Zip)	219-921-4390 (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: Wash solvent and Sludge Xylene WASTE 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:		
Paint Waste Wash Solvent	Flammable	U N 1 9 9 3 (UN or NA Number)	D 0 0 1 (EPA HW Number)

WEIGHT FOR D.O.T. USE 36,000 (LBS) TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 004500 (47–52) (GALLONS) 2 CU YDS. (Circle One) (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 E Dwight (Authorized Signature) DATE 7-14-83

WASTE HAULER

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

(1) [signature] (Authorized Signature) DATE 07/15/83 (54–59)

(2) _____ (Authorized Signature) DATE __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO [X]

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

[signature] (Authorized Signature) DATE 7/15/83 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS. _____

IN ILLINOIS 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

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

REV # 3

SITE COPY - PART 3 To 210 E T-50 6AM 7.15.83

005453

0418200

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 _____

Valspar Corporation (Company Name)	200 Sayre Street (Address)	815-987-3700 (Phone Number)	2010300032 G (Generator Number)
Rockford (City)	Ill. (State)	61101 (Zip)	ILD001980135 (EPA Number)

WASTE HAULER(S)

Mr. Franks (Hauler Name)	201 W. 155th St. So. Holland, Ill. (Hauler Address)		S.W.H. Registration Number 0079009
		312-596-3377 (Phone Number)	ILD069506160 (EPA Number)
(Hauler Name)	(Hauler Address)		S.W.H. Registration Number _____
		(Phone Number)	(EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name)	P.O. Box 190 (Address)			91809802 (Site Number)
Griffith (City)	Indiana (State)	46319 (Zip)	219-921-4390 (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: Wash solvent and sludge Xylene WASTE PHASE: liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW

SHIPPING DESCRIPTION:	HAZARD CLASS	UN or NA Number	EPA HW Number
Paint Waste Wash Solvent	Flammable	UN1993	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: 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 E Dispot (Authorized Signature) DATE: 7-15-83

WASTE HAULER

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

(1) [signature] (Authorized Signature) DATE 07/20/83

(2) _____ (Authorized Signature) DATE __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

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

[signature] (Authorized Signature) DATE: 7/20/83

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 211K T-50 GRM 7.20.83

005454

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

0418201

Authorization Number

Valspar Corporation (Company Name)	200 Sayre Street (Address)	815-987-3700 (Phone Number)	2010300032 G (Generator Number)
Rockford (City)	Illinois (State)	61101 (Zip)	ILD001980135 (EPA Number)

WASTE HAULER(S)

Mr. Franks (Hauler Name)	201 W. 155th St. So. Holland, Ill. (Hauler Address)	312-596-3377 (Phone Number)	S.W.H. Registration Number 0079021 / ILD069506160 (EPA Number)
(Hauler Name)	(Hauler Address)	(Phone Number)	S.W.H. Registration Number (EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name)	P.O. Box 190 (Address)			91809802 (Site Number)
Griffith (City)	Indiana (State)	46319 (Zip)	219-921-4390 (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: Wash solvent and Sludge Xylene WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS.	UN or NA Number	EPA HW Number
Paint Waste Wash Solvent	Flammable	UN1993	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: 005300 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 E Despot (Authorized Signature) DATE 8-18-83

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) Gary Druen (Authorized Signature) DATE 08 18 83

(2) _____ (Authorized Signature) DATE / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ___ NO X

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

(Authorized Signature) DATE 8 18 83

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

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

REV # 3

SITE COPY - PART 3

T021 TKT-50 GRM 8-18-83

005455

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

0418202 (1–7)

Authorization Number (8–13)

Valspar Corporation (Company Name)	200 Sayre Street (Address)	815-987-3700 (Phone Number)	2 0 1 0 3 0 0 0 3 2 (14 Generator Number) G (24)
Rockford (City)	Illinois (State)	61101 (Zip)	I L D 0 0 1 9 8 0 1 3 5 (EPA Number)

WASTE HAULER(S)

Mr. Franks (Hauler Name)	201 W. 155th St., So. Holland, IL (Hauler Address)	S.W.H. Registration Number 0079018 (25–31)
	312-596-3377 (Phone Number)	I L D 0 6 9 5 0 6 1 6 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)	P.O. Box 190 (Address)			9 1 8 0 9 8 0 2 (39 Site Number 46)
Griffith (City)	Indiana (State)	46319 (Zip)	219-921-4390 (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: Wash solvent and Sludge Xylene WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS	UN or NA Number	EPA HW Number
Paint Waste Wash Solvent	Flammable	U N 1 9 9 3	D 0 0 1

WEIGHT FOR D.O.T. USE 38000 (LBS) TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 005000 (47–52) (GALLONS (circle One)) 2 CU. YDS. (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 E D Isbot (Authorized Signature) DATE 9-6-83

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) [signature] (Authorized Signature) DATE 09 06 83 (54–59)

(2) _____ (Authorized Signature) DATE __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO X

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

[signature] (Authorized Signature) DATE: 9 7 83 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

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

REV # 3

SITE COPY - PART 3

To 210K T-50 GRM 9-7-83

005456

STATE OF ILLINOIS

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

0418205

OUT OF STATE
Authorization Number

TO BE COMPLETED BY WASTE GENERATOR

Valspar Corporation	200 Sayre Street	815-987-3700	2 0 1 0 3 0 0 0 3 2 G
(Company Name)	Address	Phone Number	14 Generator Number 24
Rockford	Illinois 61101		I L D 0 0 1 9 8 0 1 3 5
City	State Zip		EPA Number

WASTE HAULER(S)

Mr. Franks	201 W. 155th St., So. Holland, IL	S.W.H. Registration Number 0079037
Hauler Name	Hauler Address	25 31
	312-596-3377	I L D 0 6 9 5 0 6 1 6 0
	Phone Number	EPA Number
Hauler Name	Hauler Address	S.W.H. Registration Number 32 38
	Phone Number	EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service	P.O. Box 190			9 1 8 0 9 8 0 2
(Facility Name)	Address			39 Site Number 46
Griffith	Indiana	46319	219-921-4390	I N D 0 1 6 3 6 0 2 6 5
City	State	Zip	Phone Number	EPA Number
Alternate (Facility Name)	Address			39 Site Number 46
City	State	Zip	Phone Number	EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Wash solvent and Sludge Xylene WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW

SHIPPING DESCRIPTION	HAZARD CLASS	UN or NA Number	EPA HW Number
Paint Waste Wash Solvent	Flammable	U N 1 9 9 3	D 0 0 1

WEIGHT FOR D.O.T. USE _____ LBS / TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 0 0 4 2 0 0 (47–52) GALLONS (Circle One) / 2 CU YDS (53)

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND/OR P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION E Dizpt (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) Gary Owen (Authorized Signature) DATE: 11/30/83 (54–59)

(2) _____ (Authorized Signature) DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES_____ NO X

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

(Authorized Signature) DATE: 11/30/83 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

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

REV # 3

SITE COPY - PART 3

TO 211 FT 50 GRM 11.30.83

005482

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

0418206

Authorization Number

(Company Name)	Address	Phone Number	Generator Number
Valspar Corporation	200 Sayre Street	815-987-3700	2010300032

City	State	Zip	EPA Number
Rockford	Illinois	61101	ILD001980135

WASTE HAULER(S)

Hauler Name	Hauler Address	Phone Number	S.W.H. Registration Number	EPA Number
Mr. Franks	201 W. 155th St., So. Holland, Ill.	312-596-3377	0077018	ILD069506160

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

(Facility Name)	Address			Site Number
American Chemical Service	P.O. Box 190			91809802

City	State	Zip	Phone Number	EPA Number
Griffith	Indiana	46319	219-921-4390	IND016360265

Alternate (Facility Name)	Address			Site Number

City	State	Zip	Phone Number	EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Wash solvent and sludge xylene

WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
Paint Waste Wash Solvent	Flammable	UN1993	D001

WEIGHT FOR D.O.T. USE 28000 LBS TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 004000 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 E Dispat (Authorized Signature) DATE: 1-17-84

WASTE HAULER

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

(1) [signature] (Authorized Signature) DATE: 01/17/84

(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: 1/17/84

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. # 3

SITE COPY - PART 3 T0211 FT-50 GRM 1.17.84

006819

TO BE COM... WASTE GENERA

ATE OF ILLINOIS

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

0418207

Authorization Number

Valspar Corporation	200 Sayre Street	815-987-3700	2 0 1 0 3 0 0 0 3 2 G
(Company Name)	Address	Phone Number	Generator Number
Rockford	Illinois 61101		I L D 0 0 1 9 8 0 1 3 5
City	State Zip		EPA Number

WASTE HAULER(S)

Mr. Franks	201 W. 155th St., So. Holland, IL.	S.W.H. Registration Number 0079026
Hauler Name	Hauler Address	
	312-596-3377	I L D 0 6 9 5 0 6 1 6 0
	Phone Number	EPA Number
Hauler Name	Hauler Address	S.W.H. Registration Number
	Phone Number	EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service	P. O. Box 190			9 1 8 0 9 8 0 2
(Facility Name)	Address			Site Number
Griffith	Indiana	46319	219-921-4390	I N D 0 1 6 3 6 0 2 6 5
City	State	Zip	Phone Number	EPA Number
Alternate (Facility Name)	Address			Site Number
City	State	Zip	Phone Number	EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Wash solvent and sludge xylene WASTE 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:		
Paint Waste Wash Solvent	Flammable	U N 1 9 9 3 (UN or NA Number)	D 0 0 1 (EPA HW Number)

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)

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

QUANTITY OF WASTE DELIVERED: 0 0 4 0 0 0 (47–52) GALLONS (Circle One) 2 CU. YDS. (53)

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION E Dupot (Authorized Signature) DATE: 3-1-84

WASTE HAULER

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

(1) [signature] (Authorized Signature) DATE: 03/01/84 (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: 3/1/84 (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. # 3

SITE COPY - PART 3

To210RT-506RM 3.1.84

006751

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

0418209

Authorization Number OUT OF STATE

Valspar Corporation (Company Name)	200 Sayre Street (Address)	8 1 5 9 8 7 3 7 0 0 (Phone Number)	2 0 1 0 3 0 0 0 3 2 (Generator Number) G
Rockford (City)	Illinois (State) 61101 (Zip)		I L D 0 0 1 9 8 0 1 3 5 (EPA Number)

WASTE HAULER(S)

Mr. Franks (Hauler Name)	201 W. 155th St., So. Holland, Il. (Hauler Address)	S.W.H. Registration Number 0079019
	312-596-3377 (Phone Number)	I L D 0 6 9 5 0 6 1 6 0 (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)	P.O. Box 190 (Address)			9 1 8 0 9 8 0 2 (Site Number)
Griffith (City)	Indiana (State)	46319 (Zip)	219-921-4390 (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 Wash solvent and sludge xylene WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:	HAZARD CLASS:	UN or NA Number	EPA HW Number
Paint Waste Wash Solvent	Flammable	U N 1 9 9 3	D 0 0 1

WEIGHT FOR D.O.T. USE 40,000 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 004500 (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 E Dispt (Authorized Signature) DATE 4-19-84

WASTE HAULER

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

(1) John Van Nyman (Authorized Signature) DATE 04 19 84

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ____

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

(Authorized Signature) DATE: / /

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

212 R T-50 4.19.84 [illegible]

006753

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

0418211

Authorization Number

Valspar Corporation (Company Name)	200 Sayre Street (Address)	8159873700 (Phone Number)	2010300032 (Generator Number)
Rockford (City)	Illinois (State)	61101 (Zip)	ILD001980135 (EPA Number)

WASTE HAULER(S)

Mr. Franks (Hauler Name)	201 W. 155th St., So. Holland, Il. (Hauler Address)	S.W.H. Registration Number 0079021	
		3125963377 (Phone Number)	ILD069506160 (EPA Number)
(Hauler Name)	(Hauler Address)	S.W.H. Registration Number	
		(Phone Number)	(EPA Number)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name)	P.O. Box 190 (Address)			91809802 (Site Number)
Griffith (City)	Indiana (State)	46319 (Zip)	2199214390 (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: Wash solvent and sludge xylene WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Paint waste wash solvent Flammable

HAZARD CLASS: UN1993 (UN or NA Number) D001 (EPA HW Number)

WEIGHT FOR D.O.T. USE 34,000 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 004800 (47–52) 1 GALLONS (Circle One) 2 CU. YDS. 1 (53)

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

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [signature] (Authorized Signature) DATE 7-19-84

WASTE HAULER

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

(1) John Van Vlymen (Authorized Signature) DATE: 07/19/84 (54–59)

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

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES ____ NO ____

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

[signature] (Authorized Signature) DATE: 7/19/84 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: ____

IN ILLINOIS: 217 / 782-3637 "24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS" OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

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

212RT-50 9800 BTU 1.2% cl

006759

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 9 8 0 1 3 5 — Manifest Document No. 0 0 0 1

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

GENERATOR

3. Generator's Name and Mailing Address: THE VALSPAR CORPORATION, 200 SAYRE ST., ROCKFORD, IL 61108

4. Generator's Phone (815) 987-3700

A. Illinois Manifest Document Number: IL 1115976

B. Illinois Generator's ID: 2 0 1 0 3 0 0 0 4 2

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

6. US EPA ID Number: I L D 0 6 9 5 0 6 1 6

C. Illinois Tranporter's ID: 1 0 1 7 9

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

7. Transporter 2 Company Name

8. US EPA ID Number

E. Illinois Transporter's ID

F. ( ) Transporter's Phone

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

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

G. Illinois Facility's ID: 9 1 1 8 1 0 8 9 0 0 0 2

H. Facility's Phone: (312) 768-3400

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	WASTE FLAMMABLE LIQUID, N. O. S. FLAMMABLE LIQUID UN1993	X	0 0 1	T	4 5 0 0 0	G	EPA HW Number F 0 0 3 / Authorization Number
b.							EPA HW Number / Authorization Number
c.							EPA HW Number / Authorization Number
d.							EPA HW Number / Authorization Number

J. Additional Descriptions for Materials Listed Above: Waste Solvent and Paint

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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: Sam Chiarelli — Signature — Date: Month 3 Day 11 Year 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: CARL E. MILBURN — Signature — Date: Month 3 Day 11 Year 85

18. Transporter 2 Acknowledgement or Receipt of Materials

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

FACILITY

19. Discrepancy Indication Space

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

Printed/Typed Name: EDUFEE — 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

210 KT-50

009221

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 085346468 — Manifest Document No.: 0001

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
VAN LEER CONTAINERS, INC.
4300 WEST 130TH STREET
ALSIP, IL XXXXX 60658

4. Generator's Phone (312) 568-3535 ATTN: R. COLLIS

A. Illinois Manifest Document Number: IL 1447096

B. Illinois Generator's ID: 0 3 1 0 0 3 0 0 2

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

6. US EPA ID Number: ILD 069506160

C. Illinois Transporter's ID: 0 0 7 9

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

7. Transporter 2 Company Name

8. US EPA ID Number

E. Illinois Transporter's ID

F. ( ) Transporter's Phone

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICES
P.O. BOX 190
GRIFFITH, INDIANA 46319

10. US EPA ID Number: IND 016360265 XXXXXXXXXXXX

G. Illinois Facility's ID: 9 1 8 0 8 9 0 0 0 2

H. Facility's Phone: 312 768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a. WASTE PAINT/FLAMMABLE LIQUID NOS. FLAMMABLE LIQUID UN 1263	X	001	TT	03000	GAL	EPA HW Number: D 0 0 1 / Authorization Number: 000000
b.						EPA HW Number / Authorization Number
c.						EPA HW Number / Authorization Number
d.						EPA HW Number / Authorization Number

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above In Item #14
1 = Gallons 2 = Cubic Yards

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, 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: WALTER BREWER — Signature: Walter Brewer — Date (Month Day Year): 1 1 0 1 8 5

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: JOHN VAN WYMEN — Signature: John Van Wymen — Date (Month Day Year): 1 1 0 1 8 5

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Date (Month Day Year)

FACILITY

19. Discrepancy Indication Space

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

Printed/Typed Name: EDWIN FEE — Signature — Date (Month Day Year): 1 1 1 8 5

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV #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

205-R-T-50

009216

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 085346468 | Manifest Document No.: 991

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
VAN LEER CONTAINERS, INC.
4300 WEST 130TH STREET, ALSIP, IL 60658

A. Illinois Manifest Document Number: IL 1447098

4. Generator's Phone (312) 568-3535 - Attn: R. Collins

B. Illinois Generator's ID: 0 8 1 0 0 8 0 0 2

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

6. US EPA ID Number: ILD 069506160

C. Illinois Transporter's ID: 0 0 1 7 9

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

7. Transporter 2 Company Name

8. US EPA ID Number

E. Illinois Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICES
P.O. BOX190
GRIFFITH, INDIANA 46319

10. US EPA ID Number: IND 016360265

G. Illinois Facility's ID: 9 1 8 0 8 9 0 0 0 2

H. Facility's Phone: 312 768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a. WASTE PAINT/FLAMMABLE LIQUID NOS. UN 1263 WASTE FLAMMABLE LIQUID	X	001	TT	03000	GAL	EPA HW Number: D001 1 / Authorization Number: 0000000
b.						EPA HW Number / Authorization Number
c.						EPA HW Number / Authorization Number
d.						EPA HW Number / Authorization Number

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above In Item #14
1 = Gallons 2 = Cubic Yards

15. Special Handling Instructions and Additional Information

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

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

Printed/Typed Name	Signature	Date (Month Day Year)
Walter Brewer	Walter Brewer	10 12 15 86

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)
RICH WHITE	Rich White	10 12 25 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)

17 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

GENERATOR COPY – PART 1 - DO NOT REMOVE PART 1 FROM SET UNTIL COMPLETED.

ed 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 eed $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

211 RT-50

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

DO NOT WRITE IN THIS SPACE

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

Form Approved OMB No. 2000 0404 Expires 7 31 86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. ILD 018 513 461 468 — Manifest Document No. 6604

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

3. Generator's Name: VAN LEER CONTAINERS, INC
4000 W. 130th ST
ALSIP, ILL 60658

A. State Manifest Document Number: IN 093029

4. Generator's Phone (312) 568 3532 ATT: J. K. COLLIS

B. State Generator's ID: 4031003042

5. Transporter 1 Company Name: UP FRANK INC. — 6. US EPA ID Number: IND 980 610 160 — C. State Transporter's ID: IN 2525-0001-21 — D. Transporter's Phone: 317 546 3371

7. Transporter 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
1200 S. COLFAX AVE
GRIFFITH IN 46319 — 10. US EPA ID Number: IND 011 363 606 15 — G. State Facility's ID: 918 089 0002 — H. Facility's Phone: 219 924 9370

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 / FLAMMABLE LIQUID NOS. UN 1263	0101	TT	05500	GAL	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: SECONDARY FUEL REGINA -

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, 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: 12 12 17

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials — Date

Printed/Typed Name: Joe Koonign | Signature: Joe Koonign | Month Day Year: 12 12 17

18. Transporter 2 Acknowledgement of Receipt of Materials — Date

Printed/Typed Name | Signature | Month Day Year

FACILITY

19. Discrepancy Indication Space

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

Printed/Typed Name: F DUNTEE | Signature | Month Day Year: 12 12 17

IN 093029

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

T.S.D. DETACH AND RETAIN THIS COPY

28 20SRTSO

012264

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: VARN PRODUCTS 905 S WESTWOOD AVE ADDISON, IL 60101

4. Generator's Phone (312) 543-8600

A. State Manifest Document Number: IN 034221

B. State Generator's ID: 0430055134

5. Transporter 1 Company Name: MR FRANK INC.

6. US EPA ID Number: ILD069506160

C. State Transporter's ID: IN 803-0000-21

D. Transporter's Phone: 312 396-3377

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: 918 089 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	Waste No.
a. NON-HAZARDOUS WASTE LIQUID, NOS DOT NON-REGULATED	001	TT	01350 ~~01450~~	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

WASTE TO BE INCINERATED ONLY BY ACS

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, 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: JIM WATSON | Signature: [signature] | Month Day Year: 04 13 87

17. Transporter 1 Acknowledgement of Receipt of Materials | Date

Printed/Typed Name: MICHEL GARCIA | Signature: [signature] | Month Day Year: 04 13 87

18. Transporter 2 Acknowledgement of Receipt of Materials | Date

Printed/Typed Name | Signature | Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name: F DUNFEE | Signature: [signature] | Month Day Year: 04 13 87

IN 034221

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

T.S.D. DETACH AND RETAIN THIS COPY

211 RT 50 5

012263

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.: Small Quainty exempt

2. Page 1 of: 1

Information in the shaded areas is not required by Federal law

3. Generator's Name
Vaughns Auto Repair
534 25th Street
West Palm Beach, Fla. 33407

4. Generator's Phone
305 659-3055

A. State Manifest Document Number: IN034110

B. State Generator's ID

5. Transporter 1 Company Name: ABC Services

6. US EPA ID Number: WIED017611591813 9

C. State Transporter's ID

D. Transporter's Phone

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
American Chemical Service
420 So. Colfax Street
Griffith, In 46319

10. US EPA ID Number: IND016316102165

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.
GENERATOR a. Flammable Liquid NOS Igultable - UN 1993 n	04	D M	12 20		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
Harold Eddie Vaughn	Harold Vaughn	9	19	86

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Lenard Powell	Lenard Powell			

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
DUNCE	J Dunce			9 23 86

IN 034110

EPA Form 8700-22A (Rev. 11-85)

T.S.D. DETACH AND RETAIN THIS COPY

123ET63 UHWM 2/LP2

011478

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			
TRANSPORTER # 1			
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
7										

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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Hold

TSDF COPY

006748

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			
TRANSPORTER # 1			
TRANSPORTER # 2 (if required)	—		
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY			
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		F001	HALOGENATED SOLVENTS					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.

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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Unload at dock 11/20/91 GRM

TSDF COPY To 122 R T-63 G 001936

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			
TRANSPORTER # 1			
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY			
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)

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

6

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FILE COPY

001935

HAZARDOUS WASTE MANIFEST

[illegible]
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		VERMETTE MACHINE CO. INC. 7-143RD. ST. HAMMOND, IN. 46320 931-5406	3/24/82
TRANSPORTER # 1		Strand Truck	
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		American Chem 0004002	
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)
4		F001	TRICHLOROETHYLENE					220 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

[signature] 3/24/82
GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

[signature]
TRANSPORTER #1 SIGNATURE & DATE TRANSPORTER #2 SIGNATURE & DATE (if required)

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

TSDF SIGNATURE DATE

5

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

To122 RT-63 Ond dock 3/24/82 GRM GRM 4.1.82

TSDF COPY

003804

HAZARDOUS WASTE MANIFEST

(illegible)
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		VECTOR VINYL CO (illegible)	7/14/82
TRANSPORTER # 1	IND 016360	AMERICAN CHEMICAL SERVICE C/O STRAND (illegible)	7/15/82
TRANSPORTER # 2 (if required)	IND 016 360 516	AMERICAN CHEMICAL SERVICE C/O STRAND (illegible)	7/16/82
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
5		F001	TRICHLOROETHYLENE					275 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 7/16/82

5

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TSDF COPY

TO IART T-63 GEM 8.9.82

003505

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			
TRANSPORTER # 1			
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		American Chemical Services	
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)

SPECIAL HANDLING INSTRUCTIONS

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

COMMENTS

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

PLACARDS TENDERED Yes ☐ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

TOTAL CHARGES. $

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

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

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

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

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

CERTIFICATION

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

GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

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

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

TSDF SIGNATURE DATE

5

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TSDF COPY

To 120 R T-63 GRW 6.3.83
004541

ARDOUS WASTE MANIFEST

00105
MANIFEST DOCUMENT NUMBER

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	SMALL GENERATOR	VERMETTE MACH. CO. 7-143RD. ST. HAMMOND, IN 46320 219-931-5406	3/11/85
TRANSPORTER # 1	ILD 000644810	STRAND TRUCKING 13642 S. KENTON CRESTWOOD, ILL.	3/11/85
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND 016360363	AMERICAN CHEMICAL 420 S. COLFAX AVE. GRIFFITH IND.	3/11/85
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)
6 DRUMS		F001	TRICHLOROETHYLENE					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 ☐ $

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

× Arthur A. Rock 8/11/85
GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

James Butler 3/11/85
TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

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

Michael J. Bulger 3/11/85
TSDF SIGNATURE DATE

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3

TRANSPORTER #1

009214

HAZARDOUS WASTE MANIFEST

MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

NAME OF CARRIER (SCAC)

185 VERMETTE MACH CO. no amt

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NU	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER			
TRANSPORTER # 1			
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

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

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

5

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TSDF COPY

Hold Crude 009215

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. APPLIED FOR 2/5/86 | 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
VERMETTE MACHINE CO. INC.
7-143 2nd ST. HAMMOND, IN. 46320

4. Generator's Phone (219) 931-5436

A. State Manifest Document Number 00107

B. State Generator's ID

5. Transporter 1 Company Name: STAND TRUCKING | 6. US EPA ID Number: ILD 000646810

C. State Transporter's ID 0311

D. Transporter's Phone (312) 385-8440

7. Transporter 2 Company Name: AMERICAN CHEM. SERV. | 8. US EPA ID Number: IND 016360265

E. State Transporter's ID 0024

F. Transporter's Phone 312 768-3400

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
420 S. COLFAX
GRIFFITH IN 46319

10. US EPA ID Number: IND 016360265

G. State Facility's ID 41808907

H. Facility's Phone (317) 768-3400

GENERATOR

	11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	WASTE TRICHLOROETHYLENE		7	DM	344	GAL	F001
b.	UN 1710 ORM-A						
c.							
d.							

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, 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: ARTHUR KOCH | Signature: Arthur Koch | Month 03 Day 4 Year 86

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: JAMES BATTEN | Signature: James Batten | Month 03 Day 04 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 | Signature | Month 03 Day 04 Year 86

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

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

T-63 ✓

TSDF COPY

011638

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: IND005226469
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: VERMETTE MACHINE CO. INC
7-143 RD. ST. HAMMOND, IN 46320
4. Generator's Phone (219) 931-5406

A. State Manifest Document Number: 00108
B. State Generator's ID:

5. Transporter 1 Company Name: STRAND TRUCKING
6. US EPA ID Number: ILD[illegible]
C. State Transporter's ID:
D. Transporter's Phone: 312-355-5440

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: AMERICAN CHEMICAL SERVICE
420 S. COLFAX
GRIFFITH, IN 46319
10. US EPA ID Number: IND016360265
G. State Facility's ID: 91808902
H. Facility's Phone: 312-768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE TRICHLOROETHYLENE UN 1710 ORM-A		~~7~~	~~DM~~	~~[illegible]~~	~~GAL~~	~~F001~~
b.		6	DM	330	GAL	F001
c.						
d.						

J. Additional Descriptions for Materials Listed Above:
K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information:

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, 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: ARTHUR KOCH
Signature: Arthur Koch
Month 9 Day 24 Year 86

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Stan Strand
Signature: Stan Strand
Month 9 Day 24 Year 86

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

GENERATOR / TRANSPORTER / FACILITY

Style F15R-6 Labelmaster, Div. of American Labelmark Co Inc. 60646 EPA Form 8700-22 (Rev. 4-85) Previous edition is obsolete.

Hold T63

011639

TSDF COPY

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.: ILD057857146 — Manifest Document No.: 0001

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: VERN KIEBLER ASSOC. INC, 201 N. GABLES BLVD, WHEATON IL 60187

4. Generator's Phone (312) 668-5407

A. Illinois Manifest Document Number: IL 1582736

B. Illinois Generator's ID: 0431050001

5. Transporter 1 Company Name: STRAND TRUCKING CO

6. US EPA ID Number: ILD000646810

C. Illinois Transporter's ID: 0311

D. (312) 385-8440 Transporter's Phone

7. Transporter 2 Company Name:

8. US EPA ID Number:

E. Illinois Transporter's ID: 0024

F. Transporter's Phone

9. Designated Facility Name and Site Address: AMERICAN CHEMICAL SERVICE, 420 S. KOLFAX AVE PO 190, GRIFFITH IN

10. US EPA ID Number: IND016360265

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)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a.	WAST OIL IGNITABLE UN 1993	24	DR	1320	GA	EPA HW Number / Authorization Number
b.						EPA HW Number / Authorization Number
c.						EPA HW Number / Authorization Number
d.						EPA HW Number / Authorization Number

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above In Item #14: 1 = Gallons 2 = Cubic Yards

15. Special Handling Instructions and Additional Information

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

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

Printed/Typed Name: JEFFREY L. Gumm — Signature: [signature] — Date: Month 10 Day 27 Year 86

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: STAN STRAND — Signature: STAN STRAND — Date: Month 10 Day 27 Year 86

18. Transporter 2 Acknowledgement of Receipt of Materials

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

19. Discrepancy Indication Space

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

Printed/Typed Name: HARROLD F Schmidt — Signature: Harrold F Schmidt — Date: Month 10 Day 27 Year 86

GENERATOR — TRANSPORTER — FACILITY

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV #6

GENERATOR COPY – PART 1 - DO NOT REMOVE PART 1 FROM SET UNTIL COMPLETED.

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½ Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

204R750

011277

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. MIDG 000 088 781 | Manifest Document No. 000101 | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
VERSATILE FABRICATION CO., INC.
2708 NINTH STREET
MUSKEGON, MI 49444

4. Generator's Phone (616)739-7115

A. State Manifest Document Number: MI 0552669

B. State Generator's ID:

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

6. US EPA ID Number: ILD 069 506 160

C. State Transporter's ID: 3006

D. Transporter's Phone: 312 563 3575

7. Transporter 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. & C & O RAILROAD P.O. BOX 190
GRIFFITH, IN 46319

10. US EPA ID Number: IND 006 164 165

G. State Facility's ID:

H. Facility's Phone:

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER). HM		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.	N/H
a.	X	WASTE PAINT RELATED MATERIAL NA1263	1	DM	55	G	006	N
b.								
c.								
d.								

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
FLAMMABLE LIQUID

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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: JOSEPH BALASKOVITZ, JR. | Signature: Joseph A. Balaskovitz Jr | Date: Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: CARL E. MILBURN | Signature: Carl E Milburn | Date: 03 14 86

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name: [redacted] | Signature | Date

19. Discrepancy Indication Space

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: 3 17 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.

GENERATOR | TRANSPORTER | FACILITY

EPA Form 8700-22 (3-84)

PR 5110 Rev. 7/84

TSDF COPY 204 R. F-50 ✓

011635

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.: MI G 00000 8 87 8
Manifest Document No.: 00 00 3
2. Page 1 of 7
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
VERSATILE FABRICATION CO., INC.
2708 NINTH ST.
MUSKEGON HTS., MI 49444

4. Generator's Phone (616) 739-7115

A. State Manifest Document Number: MI 0954593
B. State Generator's ID:

5. Transporter 1 Company Name: MR. FRANK, INC.
6. US EPA ID Number: ILD 069 50 6 16-0
C. State Transporter's ID: 0079
D. Transporter's Phone: 312-596-3377

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

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
COLFAX AVE AND C AND O RAILROAD-P.O. BOX 190
GRIFFITH, IN 46319
10. US EPA ID Number: IN D 01 63 60 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). HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.	N/H
a.	X WASTE PAINT RELATED MATERIAL NA 1263 FLAMMABLE LIQUID	1	D M	5 5	G	D-001 ~~[illegible]~~	
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: JOSEPH BALASKOVITZ
Signature: Joseph Balaskovitz
Date: Month Day Year: 02 06 88

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

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

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Harold E. Schmidt
Signature: Harold E. Schmidt
Date: Month Day Year: 02 06 88

GENERATOR

TRANSPORTER

FACILITY

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

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

PR 5110 Rev. 2/2/86

TSDF COPY

1-126R TC3B

011637

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.: MI GD 0 0 0 0 88 7 8
Manifest Document No.: 00 00 2
2. Page 1 of 1
Information in the shaded areas is not required by Federal law

3. Generator's Name
VERSATILE FABRICATION CO., INC.
2708 NINTH ST.
MUSKEGON, MI 49444
616-739-7115

A. State Manifest Document Number: IN 076744
B. State Generator's ID:

4. Generator's Phone

5. Transporter 1 Company Name: MR. FRANK, INC.
6. US EPA ID Number: IL D 0 69 50 6 16 0
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
COLFAX AVE AND C AND O RAILROAD-P.O. BOX 190
GRIFFITH, IN 46319
10. US EPA ID Number: I ND 01 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	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE PAINT RELATED MATERIAL NA1263	1	D M	55	G	006LN
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, 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: JOSEPH BALASKOVITZ,
Signature:
Month Day Year: 10 16 86

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JA C McCOY
Signature:
Date: Month Day Year

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

19. Discrepancy Indication Space

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

GENERATOR / TRANSPORTER / FACILITY

IN 076744

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

T.S.D. DETACH AND RETAIN THIS COPY

200146360

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 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
MIG000008787	0004	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
VERSATILE FABRICATION CO., INC.
2708 NINTH STREET MUSKEGON HTSL, MI 49444

A. State Manifest Document Number: INA 0162927

4. Generator's Phone (616) 739-7115 MUSKEGON

B. State Generator's ID:

5. Transporter 1 Company Name: MR. FRANK, INC
6. Use EPA ID Number: TNDOT6950611600
C. State Transporter's ID: 0079
D. Transporter's Phone: 312-596-3377

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

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
COLFAX AVE. AND C AND O RAILROAD
CRIFFITH, IN 46319
10. Use EPA ID Number: ILD984816306
G. State Facility's ID:
H. Facility's Phone: 212-768-3400

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 PAINTRELATED MATERIAL FLAMABLE LIQUID NA 1263	001	DM	00055	G	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

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

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good 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
JOSEPH BALASKOVITZ, JR.		02	23	88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
MR. FRANK		02	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 Item 19.

Printed/Typed Name	Signature	Month	Day	Year
HAROLD F. SCHMIDT		02	24	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 0162927

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865 1-1267 T-63 2/25/88

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

0015106

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 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.: MIG 0 0 0 0 0 8 8 7 8 | Manifest Document No.: 0 0 0 9 5 | 2. Page 1 of 8 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
VERSATILE FABRICATION CO., INC.
2708 NINTH STREET MUSKEGON HTS., MI 49444

4. Generator's Phone (616) 739-7115

A. State Manifest Document Number: INA 0249097
B. State Generator's ID:
C. State Transporter's ID: 0079
D. Transporter's Phone: 312-596-3377
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID:
H. Facility's Phone: 212-768-3400

5. Transporter 1 Company Name: MR. FRANK, INC.
6. Use EPA ID Number: I N D 0 6 9 5 0 6 1 6 0

7. Transporter 2 Company Name: A
8. Use EPA ID Number:

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
COLFAX AVE AND C AND O RAILROAD
GRIFFITH, IND 46319

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

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE PAINT RELATED MATERIAL FLAMABLE LIQUID NA 1263	0 0 1	D M	0 0 0 5 5	G	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

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

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Printed/Typed Name: JOSEPH BALASKOVITZ, JR. | Signature: [signature] | Month 07 | Day 200 | Year 8 8

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Walter C. Klaubo | Signature: Walter C. Klaubo | Month 07 | Day 21 | Year 8 8

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: ALVIN WH HAKER | Signature: [signature] | Month 7 | Day 21 | Year 88

GENERATOR / TRANSPORTER / FACILITY

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

INA 0249097

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 FTSD 7/22

0015107

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 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 8 8 7 8 | Manifest Document No.: 0 0 0 0 6 | 2. Page 1 of 8 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
VERSATILE FABRICATION CO., INC.
2703 MENTH ST. MUSKEGON HTS., MI 49444
4. Generator's Phone (616) 739-7115

A. State Manifest Document Number: INA 0249098
B. State Generator's ID:
C. State Transporter's ID: 0079
D. Transporter's Phone: 312-596-3377
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID:
H. Facility's Phone: 212-768-3400

5. Transporter 1 Company Name: MR. FRANK, INC.
6. Use EPA ID Number: I N D 0 6 9 5 0 6 1 5 0
7. Transporter 2 Company Name:
8. Use EPA ID Number:
9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICES
COLFAX AVE AND C AND O RAILROAD
GRIFFITH, IND 46319
10. Use EPA ID Number: I N D 0 1 1 6 3 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.	L Waste No.
a. WASTE PAINT RELATED MATERIAL FLAMABLE LIQUID NA 1263	001	D M	0 0 0 5 5	G	D 001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

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GENERATOR — Printed/Typed Name: JOSEPH BALASKOVITZ, JR. | Signature | Date: Month 12 Day 13 Year 88

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JOSEPH L. KOOINGA | Signature: Joseph L Kooinga | Date: Month 12 Day 13 Year 88
18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Date: Month . Day . Year .

FACILITY
19. Discrepancy Indication Space
204TC T50 12/16M
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: HARROLD F SCHMIDT | Signature: Harrold F Schmidt | Date: Month 12 Day 15 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

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 0249098

0015108

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

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1	Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.
M IG.0.0.0.9.0.8.8.7.8	00 0 0 7	1 of 1	

3. Generator's Name and Mailing Address
VERSATILE FABRICATION CO., INC.
2708 NINTH ST. MUSKEGON HTS., MI 49444
4. Generator's Phone (616) 739-7115

A. State Manifest Document Number: INA 0370210
B. State Generator's ID:

5. Transporter 1 Company Name: MR. FRANK, INC.
6. Use EPA ID Number: IL D 9 84 7 7 5 0 4 9
C. State Transporter's ID: 0079
D. Transporter's Phone: 312-568-4191

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

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICES
COLFAX AVE AND C AND O RAILROAD
GRIFFITH, IND 46319
10. Use EPA ID Number: IN D 0 16 3 60 2 6 5
G. State Facility's ID:
H. Facility's Phone: 219-768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No
a. WASTE PAINTERELATED MATERIAL FLAMABLE LIQUID NA 1263	0 01	D M	0 0 0 5 5	G	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

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GENERATOR

Printed/Typed Name	Signature	Date Month	Day	Year
JOSEPH BALASKOVITZ, JR.		0 6	1 5	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
WHITAKER A		8	15	89

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

COPY 5. TSD COPY

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

INA 0370210

30-47C50 8/18

0016559

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 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 G 0 0 0 0 0 8 8 7 8	0 0 0 0 7		

GENERATOR

3. Generator's Name and Mailing Address
VERSATILE FABRICATION CO., INC.
2708 NINTH ST. MUSKEGON HTS., MI 49444
4. Generator's Phone (616) 739-7115

A. State Manifest Document Number: INA 0370211
B. State Generator's ID:

5. Transporter 1 Company Name: MR. FRANK, INC.
6. Use EPA ID Number: I L D 9 8 4 7 7 5 0 4 9
C. State Transporter's ID: 0079
D. Transporter's Phone: 312-243-5191

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

9. Designated Facility Name and Site Address: AMERICAN CHEMICAL SERVICES
[redacted]
COLFAX AVE AND C AND O RAILROAD
GRIFFITH, IND 46319
10. Use EPA ID Number: I N D 0 1 6 3 6 0 3 6 5
G. State Facility's ID:
H. Facility's Phone: 212-768-3400

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 RELATED MATERIAL, FLAMABLE LIQUID NA 1263	0 0 1	D M	0 0 0 5 5	G	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good 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
JOSEPH BALASKOVITZ, JR.	Joseph J. Balaskovitz	04	25	90

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year
PETE CRUSH IV	Peter Crush	04	25	90

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year

FACILITY

19 Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19

Printed/Typed Name	Signature	Month	Day	Year
STEVE KULAVICK	Steve Kulavick	04	27	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 0370211

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY

0018149

STATE OF MICHIGAN

WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS) ☐ Act 136 Waste ☐ Other **MI** 0325266

004342

IDENTIFICATION

Generator's Name	Primary Transporter's Name	Treatment, Storage or Disposal Facility
Viking Corporation	Valley City Refuse Disposal, Inc.	American Chemical Servide, Inc.
Site Address	**Transporters Address**	**Facility Address**
210 North Industrial Park Hastings, MI 49058	2650 Thornwood, S.W. Wyoming, MI 49509	420 S. Colfax Griffith, IN 46319
Phone Number	**Phone Number**	**Phone Number**
(616) 945-9501	(616) 538-8499	(219) 924-4370
Generator's Site EPA I.D. Number	**Transporter's EPA I.D. Number**	**Facility Site EPA I.D. Number**
MID 006 407 142	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.	1,1,1-Trichloroethane	ORM-A	2831	09	7	DR		X			385	GAL	F002
2.													
3.													
4.													
5.													
6.													

COMMENTS

Include Safety precautions and special handling instructions.

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or 1969 PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature ① Clifford Kavey — Date Shipped MO. DAY YEAR 1/1/83

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 H830366

Subsequent Transporter Vehicle I.D. No's

Transporter Signature ② [signature] — Date(s) Received 1/1/83

Subsequent transporter(s) signature(s) ③

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF COMPLETES

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature ④ [signature] — Facility Site EPA I.D. Number IND016360265

☒ Accepted ☐ Rejected — Date Received 1/1/83

Describe any significant discrepancies between manifest and shipment.

Was a Surcharge Assessed? ☐ Yes ☒ No

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 800—292-4706 OR OUT-OF-STATE AT 517—373-7660 AND THE NATIONAL RESPONSE CENTER AT 800—424-8802 24 HOURS PER DAY.

On dock

TSDF COPY TO 120 FT-63 GKM 2.22.84

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. M I D 0 0 6 4 0 7 1 4 2 — Manifest Document No. 3 5 7 8 6

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Viking Corporation
210 North Industrial Park, Hastings, MI 49058

4. Generator's Phone (616) 945-9501

A. State Manifest Document Number: MI 0535786

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).	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.	J. N/H
a.	X 1,1,1-Trichloroethane ORM-A 2831	2	DM	110	G	F 0 0 2	
b.							
c.							
d.							

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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: CLIFFORD HAVEY — Signature: Clifford Havey — Date: Month 11 Day 01 Year 84

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: JACK RUSTER — Signature: Jack Ruster — Date: Month 11 Day 01 Year 84

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name: — Signature: — Date: Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: R Rishuck — Signature: R Rishuck — Date: Month 11 Day 01 Year 84

GENERATOR — TRANSPORTER — FACILITY

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOURS PER DAY.

EPA Form 8700-22 (3-84)

PR 5110 Rev. 7/84

TSDF COPY Hold for Crude ✓

006747

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0098272
1 7

Authorization Number 993119 8 13

VIKING METAL CABINET CO., INC (Company Name) 5321 W. 65TH STREET Address

CHICAGO City IL State 60638 Zip

031 6000839 Generator Number 14 G 24

WASTE HAULER(S)

(1) LANDGREBE MOTOR TRANS Hauler Name VALPARAISO, IN Hauler Address S.W.H. Registration Number IND 009-842824 ICC #2980 25 31

(2) Hauler Name Hauler Address S.W.H. Registration Number 32 38

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) 420 S COLFAX AVENUE Address 91808902 Site Number 39 40

GRIFFITH City IN State 46319 Zip IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENT WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: FLAMMABLE LIQUID HAZARD CLASS: FLAMMABLE UN1993

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 7-17-81 (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 440 47 52 (1 GALLONS, 2 CU. YDS.) (Circle One) 1 53

17 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) Mitchell S. Mueller (Authorized Signature) DATE: 7/22/81 54 59

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

Tom Cahillane (Authorized Signature) DATE: 7/20/81 60 65

COMMENTS OR SPECIAL INSTRUCTIONS: UNLOADED AT DOCK 7/20/81 - TO 126E - T-63 7/21/81 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

001933

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

Aut. 10

VIKING METAL CABINET CO, INC (Company Name) 5321 W 65TH ST (Address)

CHICAGO (City) IL (State) 60638 (Zip)

WASTE HAULER(S)

(1) LANDGREBE MOTOR TRANS (Hauler Name) VALPARAISO, IND (Hauler Address) S.W.H. Registration Number IL ICC#29

(2) _____ (Hauler Name) _____ (Hauler Address) S.W.H. Registration Number _____

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) 420 S COLFAX AVENUE (Address) 91 (Site No.)

GRIFFITH (City) IND (State) 46319 (Zip) IND016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: WASTE SOLVENT WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: FLAMMABLE LIQUID HAZARD CLASS: 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: NOV 17, 1981 (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 275 (47–52) (1) GALLONS (2) CU. YDS. (Circle One) (53)

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER _____ (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) _____ (Authorized Signature) DATE: 11 / 24 / 81 (54–59)

(2) _____ (Authorized Signature) DATE: ____ / ____ / ____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

_____ (Authorized Signature) DATE: 12, 25, 81 (60–65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

Unload at dock 11/25/81 GRM
#0126 TR T-63 ERM 12/4/81

001934

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0098233

Authorization Number 993119

VIKING METAL CABINET CO., INC (Company Name) 5321 W 65TH ST (Address)

031 6000839 (Generator Number)

CHICAGO (City) IL (State) 60638 (Zip)

WASTE HAULER(S)

(1) LANDGREBE MOTOR TRANS. (Hauler Name) VALPARAISO, IND (Hauler Address) S.W.H. Registration Number IND009-842824

(2) (Hauler Name) (Hauler Address) ICC #2980 S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) 420 S COLFAX AVENUE (Address) 91808902 (Site Number)

GRIFFITH (City) IND (State) 46319 (Zip) IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENT WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: FLAMMABLE LIQUID HAZARD CLASS: 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: 3-9-82 (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 275 (1) GALLONS (Circle One) CU. YDS. 5

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) Landgrebe Don Egl (Authorized Signature) DATE: 3/9/82

(2) _____ (Authorized Signature) DATE: ___/___/___

117

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

(Authorized Signature) DATE: 3/10/82

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS 217 / 782-3637 — 24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* — OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

On dock 3/10/82 GRM
To 124 R T-63 GLM 3/16/82

002567

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0098232

WASTE GENERATOR

Authorization Number 993119

VIKING METAL CABINET CO., INC (Company Name) 5321 W 65TH ST (Address)

031 6000839 G (Generator Number)

CHICAGO (City) IL (State) 60638 (Zip)

WASTE HAULER(S)

(1) LANDGREBE MOTOR TRANS (Hauler Name) VALPARAISO, IND (Hauler Address) S.W.H. Registration Number IND009-842824

ICC #2980

(2) (Hauler Name) (Hauler Address) S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) 420 S COLFAX AVENUE (Address) 91808902 (Site Number)

GRIFFITH (City) IND (State) 46319 (Zip) IND016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: WASTE SOLVENT WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: FLAMMABLE LIQUID

HAZARD CLASS: FLAMMABEE

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: 7-19-82 Delmar Newberry (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 220 (1) GALLONS (2) CU. YDS. (Circle One) 4

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) Mitchell S Mullins (Authorized Signature) DATE: 7/21/82

(2) _____ (Authorized Signature) DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED

Allen Whitaker (Authorized Signature) DATE: 7/22/82

COMMENTS OR SPECIAL INSTRUCTIONS.

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

T0126ET-63 GLM 7.22.82

002568

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

20640098240

Authorization Number [illegible]

VIKING METAL CABINET CO., INC (Company Name) 5321 W 65TH STREET (Address)

CHICAGO (City) IL (State) 60638 (Zip)

1031 6000839 (Generator Number)

(312) 594-1111

WASTE HAULER(S)

(1) LANGREBE MOTOR TRANS (Hauler Name) VALPARAISO, IN (Hauler Address)

(219) 462-4181

S.W.H. Registration Number IND009-842824

ICC #2980

(2) (Hauler Name) (Hauler Address)

S.W.H. Registration Number

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

(219) 768-3400

AMERICAN CHEMICAL SERVICE (Facility Name) 420 S COLFAX AVENUE (Address)

91808902 (Site Number)

GRIFFITH (City) IN (State) 46319 (Zip)

IND016360765

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WATER SOLVENT

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW.

SHIPPING DESCRIPTION: FLAMMABLE LIQUID

HAZARD CLASS: FLAMMABLE

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 11/9/82

(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 330 GALLONS / CU. YDS. (Circle One) 6

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER _____ (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) DATE: 11/9/82

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

Frank Price (Authorized Signature) DATE: 11/11/82

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424 8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

To 125 KT-63 GM 11.11.82-

002569

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0098242
1 7

Authorization Number 8 13

VIKING METAL CABINET CO., INC (Company Name) 5321 W 65TH STREET (Address)

031 6000839 G (14 Generator Number 24)

CHICAGO (City) IL (State) 60638 (Zip)

(312) 594-1111

WASTE HAULER(S)

(1) LANGREBE MOTOR TRANS (Hauler Name) VALPARAISO, IN (Hauler Address) S.W.H. Registration Number IND009-842828 (25 31)

(219) 462-4181

(2) _____ (Hauler Name) _____ (Hauler Address) ICC #2980 S.W.H. Registration Number (32 38)

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

(219) 768-3400

AMERICAN CHEMICAL SERVICE (Facility Name) 420 S COLFAX AVENUE (Address) 91808902 (39 Site Number 46)

GRIFFITH (City) IN (State) 46319 (Zip)

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE ~~WATER~~ SOLVENT WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: FLAMMABLE LIQUID HAZARD CLASS: FLAMMABLE

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 2/21/83 J Paramba (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED 320 ~~270~~ (47 52) (1) GALLONS (2) CU. YDS. (Circle One) ~~X~~ 4 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS) TANK TRUCK OPEN TRUCK OTHER _____ (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) _____ (Authorized Signature) DATE: 2/21/83 (54 59)

(2) _____ (Authorized Signature) DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

_____ (Authorized Signature) DATE: __/__/__ (60 65)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS, 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS 800 / 424 8802

DISTRIBUTION PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

To 124 TK T-63 67264 2.24.83

006064

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0098239

Authorization Number

VIKING METAL CABINET CO., INC (Company Name) 5321 W 65TH STREET (Address)

CHICAGO (City) IL (State) 60638 (Zip)

031 6000839 G (Generator Number)

(312) 594-1111

WASTE HAULER(S)

(1) LANGEBBE MOTOR TRANS (Hauler Name) VALPARAISO, IN (Hauler Address)

(219) 462-4181

S.W.H. Registration Number IND009-842824

ICC #2980

(2) (Hauler Name) (Hauler Address)

S.W.H. Registration Number

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

(219) 768-3400
AMERICAN CHEMICAL SERVICE (Facility Name) 420 S COLFAX AVENUE (Address)

GRIFFITH (City) IN (State) 46319 (Zip)

91808902 (Site Number)

IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE [redacted] SOLVENT

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: FLAMMABLE LIQUID

HAZARD CLASS: FLAMMABLE

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 6/16/83 (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 300 (1 GALLONS) (Circle One) 6

METHOD OF SHIPMENT (Circle One) (DRUMS) TANK TRUCK OPEN TRUCK OTHER _____ (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [signature] (Authorized Signature) DATE 6/16/83

(2) (Authorized Signature) DATE

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

Frank Price (Authorized Signature) DATE 6/17/83

COMMENTS OR SPECIAL INSTRUCTIONS

IN ILLINOIS 217 / 782 3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILL.

DISTRIBUTION PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

6 Drums to 204 ET-50 GRM 6/17/83

006063

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0098238

Authorization Number

VIKING METAL CABINET CO., INC 5321 W 65TH STREET
(Company Name) Address

031 600839 G
Generator Number

CHICAGO IL 60638
City State Zip

(312) 594-1111

WASTE HAULER(S)

(1) LANGREBE MOTOR TRANS VALPARAISO, IN
Hauler Name Hauler Address

S.W.H. Registration Number IND009-842824

(219) 462-4181

ICC #2980

(2)
Hauler Name Hauler Address

S.W.H. Registration Number

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

(219) 768-3400

AMERICAN CHEMICAL SERVICE 420 S COLFAX AVENUE
(Facility Name) Address

91808902
Site Number

GRIFFITH IN 46319
City State Zip

IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENT

WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: FLAMMABLE LIQUID

HAZARD CLASS: FLAMMABLE

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 10/18/83

(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 250

(1 GALLONS) (Circle One)
2 CU YDS.

5

METHOD OF SHIPMENT (Circle One) (DRUMS) TANK TRUCK OPEN TRUCK OTHER _____ (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) _____
(Authorized Signature)

DATE: 10/19/83

(2) _____
(Authorized Signature)

DATE: ____/____/____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED

_____
(Authorized Signature)

DATE: 10/20/83

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

To 204 FT-50 GRM 10-20-83

006062

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0098237 (1–7)

Authorization Number ____ (8–13)

VIKING METAL CABINET CO., INC (Company Name) 5321 W 65TH STREET (Address)

CHICAGO (City) IL (State) 60638 (Zip)

031 6000839 G (14–24) Generator Number

(312) 594-1111

WASTE HAULER(S)

(1) LANGREBE MOTOR TRANS (Hauler Name) VALPARAISO, IN (Hauler Address) S.W.H. Registration Number IND009-842824 (25–31)

(219) 462-4181 ICC #2980

(2) _____ (Hauler Name) _____ (Hauler Address) S.W.H. Registration Number _____ (32–38)

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

(219) 768-3400

AMERICAN CHEMICAL SERVICE (Facility Name) 420 S COLFAX AVENUE (Address) 91808902 (39–46) Site Number

GRIFFITH (City) IN (State) 46319 (Zip) IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE ~~PAPER~~ SOLVENT

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

*THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: FLAMMABLE LIQUID

HAZARD CLASS: FLAMMABLE

THIS IS TO CERTIFY THAT THE ABOVE NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 2-8-84 (Authorized Signature)

WASTE HAULER*:

QUANTITY OF WASTE RECEIVED: 200 (47–52) (1 GALLONS / 2 CU. YDS.) (Circle One) 1 (53)

METHOD OF SHIPMENT (Circle One) (DRUMS) TANK TRUCK OPEN TRUCK OTHER _____ (Specify)

I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Mark Mark (Authorized Signature) DATE: 2/2/84 (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: 2-7-84 (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

TO204 RT-50 GRM 2.5.84

006743

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0098236

WASTE GENERATOR

Authorization Number _____

VIKING METAL CABINET CO., INC 5321 W 65TH STREET
(Company Name) Address

CHICAGO IL 60638
City State Zip

031 6000839 G
Generator Number

(312) 594-1111

WASTE HAULER(S)

(1) LANGREBE MOTOR TRANS VALPARAISO, IN
Hauler Name Hauler Address

S.W.H. Registration Number IND009-842824
ICC #2980

(219) 462-4181

(2) _____ _____
Hauler Name Hauler Address

S.W.H. Registration Number _____

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

(219) 768-3400
AMERICAN CHEMICAL SERVICE 420 S COLFAX AVENUE 10395 91808902
(Facility Name) Address Site Number

GRIFFITH IN 46319 IND016360265
City State Zip

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE ~~WATER~~ SOLVENT

WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: FLAMMABLE LIQUID

HAZARD CLASS: FLAMMABLE

THIS IS TO CERTIFY THAT THE ABOVE NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 5/3/84 (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 250 (1 GALLONS / 2 CU. YDS.) (Circle One) 5

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: 5/8/84

(2) _____ (Authorized Signature) DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

_____ (Authorized Signature) DATE: 5/9/84

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

204 & T-50

006744

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

Authorization Number 0098235

VIKING METAL CABINET CO., INC. 5321 W 65TH STREET
(Company Name) Address

CHICAGO | IL | 60638
City | State | Zip

6005839
031 6000839x
Generator Number
(312) 594-1111

WASTE HAULER(S)

(1) LANDGREBE MOTOR TRANS | VALPARAISO, IN
Hauler Name | Hauler Address
S.W.H. Registration Number IND009-842824
(219) 462-4181
ICC #2980

(2) _____ | _____
Hauler Name | Hauler Address
S.W.H. Registration Number _____

DESTINATION – DISPOSAL STORAGE OR TREATMENT SITE

(219) 768-3400
AMERICAN CHEMICAL SERVICE 420 S COLFAX AVENUE
(Facility Name) Address
91808902
Site Number
GRIFFITH | IN | 46319
City | State | Zip
IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENT
WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: FLAMMABLE LIQUID
HAZARD CLASS: FLAMMABLE
UN=1993

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 9/18/84 (Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 385 (1 GALLON / 2 CU. YDS.) (Circle One) 7

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 21 84

(2) _____ (Authorized Signature) DATE: __/__/__

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

_____ (Authorized Signature) DATE: 9/21/84

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

204E T-50

006745

STATE OF ILLINOIS ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0610

LPC 62 8/81

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) **EPA Form 8700-22 (3-84)** Form Approved. OMB No. 2000-0404. Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. | Manifest Document No.

2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but is required by Illinois law.

3. Generator's Name and Mailing Address
VIKING METAL CABINET CO INC
5321 WEST 65TH STREET
CHICAGO IL 60638

4. Generator's Phone (312)594-1111

A. Illinois Manifest Document Number: IL 1164456

B. Illinois Generator's ID: 0 3 1 6 0 0 5 8 3 9

5. Transporter 1 Company Name: LANDGREBE MOTOR TRANSPORT INC

6. US EPA ID Number: I N D 0 0 9 8 4 2 8 2 4

C. Illinois Tranporter's ID: I C C 2 9 8 1 0

D. (219) 768-4181 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 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: (219 768-3400

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a. F005 SOLVENTS	X	6	DM	00330	L	EPA HW Number / 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)
EUGENE CIABATTARI	Eugene Ciabattari	12 6 84

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)
Landgrebe Motor Trans	D. Philip L Tyars	12 10 84

FACILITY

19. Discrepancy Indication Space

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	12 11 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

006746

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 5127006
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
Viking Metal Cabinet Co., Inc.
5321 West 65th Street
Chicago IL 60638
4. Generator's Phone (312) 594-1111

A. Illinois Manifest Document Number: IL 1164457
B. Illinois Generator's ID: 0 8 1 6 0 0 5 8 3 9
C. Illinois Tranporter's ID: ICC [illegible]
D. Transporter's Phone: 219 768-4181

5. Transporter 1 Company Name: Landgrebe Motor Transport, Inc.
6. US EPA ID Number: I N D 0 0 9 8 4 2 8 2 4
7. Transporter 2 Company Name:
8. US EPA ID Number:
E. Illinois Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Service
420 S. Colfax Avenue
Griffith, IN 46319
10. US EPA ID Number: I N D 0 6 3 6 0 2 6 5
G. Illinois Facility's ID: 9 1 8 0 8 8 0 0 0 2
H. Facility's Phone: (219) 768-3400

GENERATOR

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	L Waste No.
a.	F005 Solvents	X	7	DM	00385	1	EPA HW Number / 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: Eugene Ciabattari
Signature: Eugene B. Ciabattari
Date: Month 03 Day 18 Year 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: MiTcA MuLLins
Signature: Mitch Mullins
Date: Month 03 Day 21 Year 85

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name:
Signature:
Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: F. PRICE
Signature: Frank Price
Date: Month 3 Day 23 Year 85

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV.# 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½ Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

009210

204ET-SP

STATE OF ILLINOIS ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0610
LPC 62 8/81

Print or type. (Form designed for use on elite (12-pitch) typewriter.) EPA Form 8700-22 (3-84) Form Approved. OMB No. 2000-0404 Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: ILDoo 512706
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
Viking Metal Cabinet Co., Inc.
5321 West 65th Street
Chicago IL 60638
4. Generator's Phone (312) 594-1111

A. Illinois Manifest Document Number: IL 1164460
B. Illinois Generator's ID: 0 3 1 6 0 0 5 8 3 9
C. Illinois Transporter's ID: ICC 2 9 8 0
D. (219) 768-4181 Transporter's Phone

5. Transporter 1 Company Name: Landgrebe Motor Transport, Inc.
6. US EPA ID Number: I N D 0 0 9 8 4 2 8 2 6
E. Illinois Transporter's ID: 1 8 7 5
F. ( ) Transporter's Phone

7. Transporter 2 Company Name
8. US EPA ID Number
G. Illinois Facility's ID: 0 1 8 0 8 9 0 0 0 2
H. Facility's Phone: (219) 768-3400

9. Designated Facility Name and Site Address
American Chemical Service
420 S. Colfax Ave.
Griffith, IN 46319
10. US EPA ID Number: I N D 0 1 6 3 6 0 2 6 5

	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.	X F005 SOLVENTS	X	4	DM	00220	1	EPA HW Number / 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)
Eugene Ciabattari	Eugene Ciabattari	05 01 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)
LANDGREBE	Landgrebe Don Ed.	5 23 85

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name	Signature	Date (Month Day Year)
FRANK PRICE	Frank Price	5 24 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 009211

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 0 0 5 1 2 7 0 0 6 — 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
VIKING METAL CABINET CO., INC.
5321 WEST 65TH STREET
CHICAGO IL 60638
4. Generator's Phone (312)594-1111

A. Illinois Manifest Document Number IL 1164459
B. Illinois Generator's ID 0 3 1 6 0 0 5 8 3 9
C. Illinois Tranporter's ID ICC 2 9 8 0
D. (219) 768-4181 Transporter's Phone

5. Transporter 1 Company Name: LANDGREBE MOTOR TRANSPORT INC
6. US EPA ID Number: I N D 0 0 9 8 4 2 8 2 4
7. Transporter 2 Company Name
8. US EPA ID Number
E. Illinois Transporter's ID
F. ( ) Transporter's Phone

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
420 S COLFAX AVENUE
GRIFFITH IN 46319
10. US EPA ID Number: 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	Waste No.
a.	F005 SOLVENTS	X	5	DM	00275	1	EPA HW Number / 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: EUGENE CIABATTARI — Signature — Date: Month 6 Day 4 Year 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: LANDGrebe Don EGLI — Signature — Date: Month 6 Day 11 Year 85

18. Transporter 2 Acknowledgement or Receipt of Materials
Printed/Typed Name — Signature — Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: FRANK PRICE — Signature — Date: Month 6 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

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

123RT-63 009212

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 0 0 5 1 2 7 0 6 — 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
Viking Metal Cabinet Co., Inc.
5321 West 65th Street
Chicago, IL 60638

4. Generator's Phone (312) 594-1111

A. Illinois Manifest Document Number: IL 1164458

B. Illinois Generator's ID: 0 3 1 6 0 0 5 8 3 9

5. Transporter 1 Company Name: Landgrebe Motor Transport Inc.

6. US EPA ID Number: I N D 0 0 9 8 4 2 8 2 4

C. Illinois Tranporter's ID: ICC 2 9 8 0

D. (219) 768-4181 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 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: (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	Waste No.
a.		X	F005 SOLVENTS	5	DM	00275	1
b.							
c.							
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: Eugene Ciabattari — Signature: Eugene B Ciabattari — Date: Month 9 Day 30 Year 85

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature: (5) Landgrebe Carl Coulter — Date: Month 10 Day 4 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 — Signature: M A Royce — Date: Month Day Year

GENERATOR / TRANSPORTER / FACILITY

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV.# 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-009213

STATE OF ILLINOIS ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0610

LPC 62 8/81

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) EPA Form 8700-22 (3-84) Form Approved. OMB No. 2000-0404. Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I L D 0 0 5 1 2 7 0 0 6 — 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
Viking Metal Cabinet Co., Inc.
5321 West 65th Street
Chicago IL 60638

4. Generator's Phone (312) 594-1211

A. Illinois Manifest Document Number IL 152091 0

B. Illinois Generator's ID 0 3 1 8 0 0 5 8 3 9

5. Transporter 1 Company Name: Landgrebe Motor Transport, Inc.

6. US EPA ID Number: I N D 0 0 9 8 4 2 8 2 4

C. Illinois Transporter's ID ICC 2 9 8 0

D. (219) 768-4181 Transporter's Phone

7. Transporter 2 Company Name

8. US EPA ID Number

E. Illinois Transporter's ID 18175

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. 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	Waste No.
a.	F005 Solvents UN 1993	x	6	DM	00330	1	EPA HW Number / Authorization Number
b.							EPA HW Number / Authorization Number
c.							EPA HW Number / Authorization Number
d.							EPA HW Number / Authorization Number

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above In Item #14
1. = Gallons 2 = Cubic Yards

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and Illinois regulations.

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

Printed/Typed Name: Eugene Ciabattari — Signature — Date (Month Day Year): 02 07 86

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: F. W. Schlundt — Signature — Date (Month Day Year): 2 12 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: FD UNFEE — Signature — Date (Month Day Year): 2 13 86

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV. #6

GENERATOR COPY – PART 1 - DO NOT REMOVE PART 1 FROM SET UNTIL COMPLETED.

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983 Chapter 111½ Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center

FACILITY COPY - PART 3

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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.: ILD005127006 | 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:
VIKING METAL CABINET CO INC
5321 WEST 65TH STREET
CHICAGO IL 60638

4. Generator's Phone: (312)594-1111

A. Illinois Manifest Document Number: IL 1520913

B. Illinois Generator's ID: 0131160105813 9

5. Transporter 1 Company Name: LANDGREBE MOTOR TRANSPORT INC | 6. US EPA ID Number: IND009842824

C. Illinois Transporter's ID: ICC1875

D. 219768-4181 Transporter's Phone

7. Transporter 2 Company Name | 8. US EPA ID Number

E. Illinois Transporter's ID

F. (NCN) Transporter's Phone

9. Designated Facility Name and Site Address:
AMERICAN CHEMICAL SERVICE
420 S COLFAX AVENUE
GRIFFITH IN 46319

10. US EPA ID Number: IND016360265

G. Illinois Facility's ID: 911810891010012

H. Facility's Phone: (219)768-3400

GENERATOR

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a.	"F005 SOLVENTS UN 1993"	X	12	DM	00660		EPA HW Number / 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:
[illegible]

K. Handling Codes for Wastes Listed Above In Item #14:
1 = Gallons 2 = Cubic Yards
[illegible]

15. Special Handling Instructions and Additional Information:
[illegible]

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, 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)
EUGENE CIABATTARI	Eugene B. Ciabattari	10 28 86

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)
C. HORN for LANDGREBE	[signature]	10 29 86

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name	Signature	Date (Month Day Year)
HAROLD F. SCHMIDT	[signature]	10 29 86

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV #6

GENERATOR COPY – PART 1 - DO NOT REMOVE PART 1 FROM SET UNTIL COMPLETED.

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FACILITY COPY - PART 3

123ET63 011634

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.	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.
ILD005127006	1		

3. Generator's Name and Mailing Address
VIKING METAL CABINET CO., INC.
5321 WEST 65TH STREET, CHICAGO, IL 60638
4. Generator's Phone (312) 594-1111

A. Illinois Manifest Document Number: 015289JA

B. Illinois Generator ID Number: 031405100369

C. Illinois Transporter 1 ID: ICC1187455

D. Transporter 1 Phone: 219-768-4181

E. Illinois Transporter 2 ID

F. Transporter 2 Phone

G. Illinois Facility ID: 0160390002

H. Facility's Phone: 219-768-3400

5. Transporter 1 Company Name	6. US EPA ID Number
LANDGREBE MOTOR TRANSPORT INC	IND009842824

7. Transporter 2 Company Name	8. US EPA ID Number

9. Designated Facility Name and Site Address	10. US EPA ID Number
AMERICAN CHEMICAL SERVICE 420 S. COLFAX AVENUE GRIFFITH, IN 46319	IND016360265

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a. X WASTE SOLVENTS "F005 SOLVENTS UN 1993"	9	DM	00496	P	
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 and Illinois regulations.

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Printed/Typed Name	Signature	Date (Month Day Year)
EUGENE B CIABATTARI	Eugene B Ciabattari	03 20 87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)
DENNY STALBAUM	Denny Stalbaum	03 24 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)
ROBERT F. SCHMIDT	Robert F. Schmidt	03 25 87

K. Handling Codes for Wastes Listed Above In Item #14:
1 = Gallons 2 = Cubic Yards

IN ILLINOIS: 217 / 782-3637 *24 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

MRC 9-12 3TE TGI 13

012257

STATE OF ILLINOIS ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761 IL532-0510

LPC 662

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. ILD005127006 — 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
VIKING METAL CABINET CO., INC.
5321 WEST 65TH STREET, CHICAGO, IL 60638

4. Generator's Phone (312) 594-1111

A. Illinois Manifest Document Number: IL 1520915

B. Illinois Generator's ID: 0312100058319

5. Transporter 1 Company Name: KANDGREBE MOTOR TRANSPORT INC

6. US EPA ID Number: IND009842824

C. Illinois Transporter 1 ID: CC-1871-5

D. Transporter 1 Phone: 219/769-4181

7. Transporter 2 Company Name

8. US EPA ID Number

E. Illinois Transporter 2 ID

F. Transporter 2 Phone

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
420 S. COLVAX AVENUE
GRIFFITH, IN 46319

10. US EPA ID Number: IND016360265

G. Illinois Facility's ID: 0890620072

H. Facility's Phone: 219/924-2400

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 SOLVENTS, FLAMMABLE, N.O.S. (F005 SOLVENTS) UN 1993	4	DM	00128		
b.					
c.					
d.					

I. Additional Descriptions for Materials Listed Above

J. Handling Codes for Wastes Listed Above
In Item #14 1 = Gallons 2 = Cubic Yards

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and Illinois regulations.

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Printed/Typed Name	Signature	Date (Month Day Year)
EUGENE B CIABATTARI	Eugene B Ciabattari	06 05 87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)
Jim Marrs	Jim Marrs	06 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	06 10 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

MRK 4-123R TG3 B

012258

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.: ILD005127006
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:
VIKING METAL CABINET CO., INC.
5321 WEST 65TH STREET, CHICAGO IL 60638
4. Generator's Phone: (312) 594-1111

A. Illinois Manifest Document Number: IL 1848028
B. Illinois Generator's ID: [illegible]
C. Illinois Transporter's ID: ICC [illegible]
D. Transporter's Phone: 219 462-4181

5. Transporter 1 Company Name: LANDGREBE MOTOR TRANSPORT INC
6. US EPA ID Number: INC009842824
E. Illinois Transporter's ID:
F. Transporter's Phone:

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: IND 016360265
G. Illinois Facility's ID: [illegible]
H. Facility's Phone: 219 768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a. WASTE SOLVENTS F005 SOLVENTS UN 1993	3	DM	00165		XX F005
b.					XX
c.					XX
d.					XX

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.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good 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)
EUGENE CIABATTARI	[signature]	07 21 87

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)
Dan [illegible]	[signature]	7 24 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)
HARRELD F. Schmidt	[signature]	07 24 87

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 7

GENERATOR COPY — PART 1-DO NOT REMOVE PART 1 FROM SET UNTIL COMPLETED.

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.

FACILITY COPY - PART 3

3-125R T63 B

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012259

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

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

17892 / 69694

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: ILD005127006 — 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
VIKING METAL CABINET CO., INC.
5321 WEST 65TH STREET
CHICAGO IL 60638 (312)594-1111

4. Generator's Phone

A. Illinois Manifest Document Number: IL 1848031
B. Illinois Generator's ID: 0316005839
C. Illinois Transporter's ID: 1CC1875
D. Transporter's Phone: 219 462-4181

5. Transporter 1 Company Name: LANDGREBE MOTOR TRANSPORT INC
6. US EPA ID Number: INC009842824

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: 219 768-3400

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 SOLVENTS F005 SOLVENTS UN 1993	7	DM	00385		EPA HW Number: XX Authorization Number:
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)
EUGENE CIABATTARI	[signature]	101687

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)
JIM MARRS	[signature]	102187

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)
HARROLD F. SCHMIDT	[signature]	102287

GENERATOR — TRANSPORTER — FACILITY

IN ILLINOIS: 217 / 782-3637 — "24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS" — OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV 7

GENERATOR COPY — PART 1-DO NOT REMOVE PART 1 FROM SET UNTIL COMPLETED.

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7-125K T-63 10/22/87 gm FACILITY COPY - PART 3

012260

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 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·0·0·5·1·2·7·8·0·6	1	1 of 1	

GENERATOR

3. Generator's Name and Mailing Address
VIKING METAL CABINET CO., INC.
5321 WEST 65TH STREET, CHICAGO, IL 60638

4. Generator's Phone (312)594-1111

A. State Manifest Document Number: INA 0160152

B. State Generator's ID: 0 3 1 6 0 0 5 8 3 9

5. Transporter 1 Company Name: LANDGREBE MOTOR TRANSPORT INC

6. Use EPA ID Number: I·N·C·0·0·9·8·4·2·8·2·4

C. State Transporter's ID: ICC1875

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: 9180890002

H. Facility's Phone: (219)768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE SOLVENTS F005 UN 1993	4.	DM	00220	G	F005
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

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Printed/Typed Name	Signature	Date Month	Day	Year
EUGENE B CIABATTARI		02	09	88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year
		02	11	88

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.

Printed/Typed Name	Signature	Date Month	Day	Year
HAROLD F SCHMIDT		02	17	88

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865 4-1235 T-63 2/15/88

DISTRIBUTION:
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

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 0160152

0015099

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 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·0·0·5·1·2·7·0·0·6			

GENERATOR

3. Generator's Name and Mailing Address
VIKING METAL CABINET CO., INC.
5321 W 65TH STREET
CHICAGO IL 60638
4. Generator's Phone (312) 594-1111

A. State Manifest Document Number: INA 0190779
B. State Generator's ID: 0316005839
C. State Transporter's ID: ICC1875
D. Transporter's Phone: (219)462-4181
E. State Transporter's ID:
F. Transporter's Phone:

5. Transporter 1 Company Name: LANDGREBE MOTOR TRANSPORT INC
6. Use EPA ID Number: I·N·C·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: I.N.D.0.1.6.3.6.0.2.6.5

G. State Facility's ID: 9180890002
H. Facility's Phone: (219)768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE SOLVENTS F005 UN 1993	4	DM	0.0229	G	F005
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

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Printed/Typed Name	Signature	Date Month	Day	Year
EUGENE B CIABATTARI		03	25	88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year
DAVID FULL		3	31	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
HAROLD E SCHMIDT		04	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 0190779

EPA Form 8700-22 (Rev. 9-86) DISTRIBUTION
Previous editions are obsolete.
State Form 11865 4-1237L 763 4/4/88 9

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

0015100

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.
I L D 0 0 5 1 2 7 0 0 6	1		

3. Generator's Name and Mailing Address
VIKING METAL CABINET CO INC
5321 WEST 65TH STREET
CHICAGO IL 60638
4. Generator's Phone (312) 594-1111

A. State Manifest Document Number: INA 0190780
B. State Generator's ID: 0316005839
C. State Transporter's ID: ICC1875
D. Transporter's Phone: (219)462-4181
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID: 9180890002
H. Facility's Phone: (219)768-3400

5. Transporter 1 Company Name: LANDGREBE MOTOR TRANSPORT INC
6. Use EPA ID Number: IN C 0 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: 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 SOLVENTS FOOS UN 1993	4	D.M	00220	G	F005
b.					
c.			15		
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

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Printed/Typed Name	Signature	Month	Day	Year
EUGENE B CIABATTARI		05	09	85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.

Printed/Typed Name	Signature	Month	Day	Year
Horacio F Schmidt		05	13	85

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INA 0190780

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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

C015101

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.
I L D0 0 51 2 7 0 0 6	1		

3. Generator's Name and Mailing Address
VIKING METAL CABINET CO INC
5321 WEST 65TH STREET, CHICAGO, IL 60638

4. Generator's Phone (312) 594-1111

A. State Manifest Document Number: INA 0190781
B. State Generator's ID: 0316005839

5. Transporter 1 Company Name	6. Use EPA ID Number	C. State Transporter's ID	D. Transporter's Phone
LANDGREBE MOTOR TRANSPORT INC	I N C 0 0 9 8 4 2 8 2 4	ICC1875	(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 SERV ICE 420 S COLFAX GRIFFITH IN 46319	I N D 0 1 6 3 6 0 2 6 5	9180890002	(219)768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE SOLVENTS F005 UN1993	4	DM	00220	G	F005
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

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Printed/Typed Name	Signature	Date Month	Day	Year
EUGENE B CIABATTARI		06	09	88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year
Steve Lynch				

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year

FACILITY

19. Discrepancy Indication Space

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

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INA 0190781

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

S-1238 763 6/15/88
T-2047 TSD 6/15/88

C015102

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE *(Form designed for use on elite (12-pitch) typewriter.)* *Form Approved. OMB No. 2050-0039. Expires 9-30-88*

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1	Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.
I·L·D·0·0·5 1 2 7 0 0 6		1 of 1	

3. Generator's Name and Mailing Address
VIKING METAL CABINET CO., INC.
5321 WEST 65TH STREET
CHICAGO IL 60638
4. Generator's Phone (312) 594-1111

A. State Manifest Document Number INA 0160137
B. State Generator's ID 0316005839

5. Transporter 1 Company Name	6. Use EPA ID Number	C. State Transporter's ID	D. Transporter's Phone
LANDGREBE MOTOR TRANSPORT INC	I·N·C·0·9·8·4·2·8·2·4	ICC1875	(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 IN 46319	I N D 0 1 6 3 6 0 2 6 5	9180890002	(219)768-3400

11. US DOT Description *(Including Proper Shipping Name, Hazard Class, and ID Number)*	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE SOLVENTS F005 UN1993	4	DM	00220	G	F005
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

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Printed/Typed Name	Signature	Month	Day	Year
EUGENE B CIABATTARI		08	17	88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
		08	19	88

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

19. Discrepancy Indication Space
123TC T63 08/26

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name	Signature	Month	Day	Year
ARVIN WHITAKER		8	22	88

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INA 0160137

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

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PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

0015103

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: I·L·D·0·0·5·1·2·7·0·0·6
Manifest Document No.: 1
2. Page 1 of 1
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
VIKING METAL CABINET CO., INC.
5321 WEST 65TH STREET
CHICAGO IL 60638
4. Generator's Phone (312)594-1111

A. State Manifest Document Number: INA 0190783
B. State Generator's ID: 0316005839

5. Transporter 1 Company Name: LANDGREBE MOTOR TRANSPORT INC
6. Use EPA ID Number: I·N·C·0·0·9·8·4·2·8·2·4
C. State Transporter's ID: ICC1875
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: 9180890002
H. Facility's Phone: (219)768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE SOLVENTS F005 UN 1993	3	DM	00165	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: EUGENE B CIABATTARI
Signature: [signature]
Date: Month 09 Day 27 Year 88

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Date: Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
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: [signature]
Signature: [signature]
Month 10 Day 04 Year 88

GENERATOR / TRANSPORTER / FACILITY

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0190783

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

123KJ63 10

0015104

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·0·0·5·1·2·7·0·9·6
Manifest Document No.: 1
2. Page 1 of 1
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
VIKING METAL CABINET CO., INC.
5321 WEST 65TH STREET, CHICAGO IL 60638
4. Generator's Phone (312) 594-1111

A. State Manifest Document Number: INA 0190784
B. State Generator's ID: 0316005839
C. State Transporter's ID: ICC1875
D. Transporter's Phone: (219)462-4181
E. State Transporter's ID:
F. Transporter's Phone:

5. Transporter 1 Company Name: LANDGREBE MOTOR TRANSPORT INC
6. Use EPA ID Number: I·N·C·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: I·N·D·0·1·6·3·6·0·2·6·5

G. State Facility's ID: 9 1 8 0 8 9 0 0 0 2
H. Facility's Phone: (219)768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE SOLVENTS F005 UN 1993	3	DM	00165	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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GENERATOR

Printed/Typed Name	Signature	Month	Day	Year
EUGENE B CIABATTARI		11	10	88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.

Printed/Typed Name	Signature	Month	Day	Year
HAROLD E SCHMIDT		11	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 0190784

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

0015105

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.
I L D 0 0 5 1 2 7 0 0 6	000001		

3. Generator's Name and Mailing Address
VIKING METAL CABINET CO., INC.
5321 WEST 65TH STREET
CHICAGO IL 60638

4. Generator's Phone (312) 594-1111

A. State Manifest Document Number: INA 0190782
B. State Generator's ID: 0316005839
C. State Transporter's ID: ICC1875
D. Transporter's Phone: (219)462-4181
E. State Transporter's ID:
F. Transporter's Phone:

5. Transporter 1 Company Name	6. Use EPA ID Number
LANDGREBE MOTOR TRANSPORT INC	I N C 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	10. Use EPA ID Number
AMERICAN CHEMICAL SERVICE 420 S COLFAX GRIFFITH IN 46319	I N D 0 1 6 3 6 0 2 6 5

G. State Facility's ID: 9180090002
H. Facility's Phone: 768-3400

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	Waste No.
GENERATOR	a. WASTE SOLVENT F005 UN1993	002	DM	0041.0	G	F005
	b.					
	c.					
	d.					

J. Additional Descriptions for Materials Listed Above
LADED AREAS IS REQUIRED BY INDIANA STATE LAW

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

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Printed/Typed Name	Signature	Month	Day	Year
EUGENE B CIABATTARI		12	27	88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
MITCH WILLIAMS		12	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 Item 19.

Printed/Typed Name	Signature	Month	Day	Year
WHITAKER ALVIN		1	3	89

EPA Form 8700-22 (Rev. 9-86) DISTRIBUTION: PAGE 1 (white) TSD MAIL TO GENERATOR
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State Form 11865 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

12427 1/6/89

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/638-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0190782

0016552

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 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·00 5 1 2 7 0 0 6
Manifest Document No.: 0·0·0·0·1
2. Page 1 of 1
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
VIKING METAL CABINET CO., INC.
5321 W 65TH STREET
CHICAGO IL 60638
4. Generator's Phone (312) 594-1111

A. State Manifest Document Number: INA 0313000
B. State Generator's ID: 0316005839

5. Transporter 1 Company Name: LANDGREBE MOTOR TRANSPORT INC
6. Use EPA ID Number: I.N.C.0.0.9.8.4.2.8.2.4
C. State Transporter's ID: ICC1875
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: 9180890002
H. Facility's Phone: 768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE SOLVENT F005 UN1993	4	DM	220	G	F005
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

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Printed/Typed Name: EUGENE B CIABATTARI
Signature: [signature]
Month: [illegible] Day: [illegible] Year: 9

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: B H SCHEERINGA
Signature: [signature]
Month: 2 Day: 9 Year: 89

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Month: Day: Year:

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19
Printed/Typed Name: WHITAKER A
Signature: Whitaker A
Month: 02 Day: 10 Year: 89

GENERATOR / TRANSPORTER / FACILITY

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA0313000

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

124VCT63 3/13

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0016553

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 1 2 7 0 0 6 | Manifest Document No. 0 0 0 0 1
2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
VIKING METAL CABINET CO., INC.
5321 WEST 65TH STREET
CHICAGO IL. 60638
4. Generator's Phone (312) 594-1111

A. State Manifest Document Number: INA 0312999
B. State Generator's ID: 0316005839

5. Transporter 1 Company Name: LANDGREBE MOTOR TRANSPORT INC.
6. Use EPA ID Number: I N C 0 0 9 8 4 2 8 2 4
C. State Transporter's ID: ICC1875
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: 9180890002
H. Facility's Phone: 768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE SOLVENTS F005 UN 1993	4	DM	00220	G	F005
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

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GENERATOR

Printed/Typed Name: Eugene B. Ciabattari
Signature:
Date: Month 6 Day 14 Year 89

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: [illegible]
Signature:
Date: Month 6 Day 14 Year 89

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Date: Month . Day . Year .

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted item 19.
Printed/Typed Name: STEVE KULNICK
Signature:
Date: Month 06 Day 21 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

0016554

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 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 2 7 0 0 6
Manifest Document No.: 0 0 0 0 1
2. Page 1 of 1
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
VIKING METAL CABINET CO., INC.
5321 WEST 65TH STREET
CHICAGO IL 60638
4. Generator's Phone (312) 594-1111

A. State Manifest Document Number: INA 0312993
B. State Generator's ID: 0316005839

5. Transporter 1 Company Name: LANDGREBE MOTOR TRANSPORT INC
6. Use EPA ID Number: I N C 0 0 9 8 4 2 8 2 4
C. State Transporter's ID: ICC1875
D. Transporter's Phone: (219) 462-418

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 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: 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 SOLVENTS F005 UN1993	4	DM	00220	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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GENERATOR
Printed/Typed Name: EUGENE B. CIABATTARI
Signature: Eugene B Ciabattari
Date: Month 06 Day 21 Year 89

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: ROBERT J DITMANN
Signature: Robert J Ditmann
Date: Month 6 Day 21 Year 89

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Date: Month . Day . Year .

FACILITY
19. Discrepancy Indication Space

20 Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted item 19.
Printed/Typed Name: STEVE KUNUCK
Signature: Steve Kunuck
Date: Month 6 Day 29 Year 35

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 123TCT63 6/30

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INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.
I L D 0 0 5 1 2 7 0 0 6	1		

3. Generator's Name and Mailing Address
VIKING METAL CABINET CO., INC.
5321 WEST 65TH STREET
CHICAGO IL 60638
4. Generator's Phone (312) 594-1111

A. State Manifest Document Number: INA 0312995
B. State Generator's ID: 0316005839

5. Transporter 1 Company Name: LANDGREBE MOTOR TRANSPORT INC
6. Use EPA ID Number: I N C 0 0 9 8 4 2 8 2 4
C. State Transporter's ID: ICC1875
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: IND016360265
G. State Facility's ID: 9180890002
H. Facility's Phone: 768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE SOLVENTS F005 UN1993	4	DM	00220	G	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: EUGENE B. CIABATTARI
Signature:
Date: Month 08 Day 14 Year 89

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: REX Gluth
Signature:
Date: Month 08 Day 17 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 ALVIN
Signature:
Date: Month 8 Day 23 Year 89

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA0312995

0016557

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE *(Form designed for use on elite (12-pitch) typewriter.)* *Form Approved. OMB No. 2050-0039. Expires 9-30*

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: I L D 0 0 5 1 2 7 0 | Manifest Document No.: 0 6 . . . 1 | 2. Page 1 of 1 | Information in the shaded areas not required by Federal law, b items D, F, H and I are required b State law.

3. Generator's Name and Mailing Address
VIKING METAL CABINET CO., INC.
5321 W 65TH ST; CHICAGO, IL 60638
4. Generator's Phone (312) 594-1111

A. State Manifest Document Number: INA 0312996
B. State Generator's ID: 0316005839

5. Transporter 1 Company Name: LANDGREBE MOTOR TRANSPORT INC
6. Use EPA ID Number: I N C 0 0 9 8 4 2 8 2 4
C. State Transporter's ID: ICC1875
D. Transporter's Phone: (219)462-41

7. Transporter 2 Company Name: [illegible]
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: 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 SOLVENTS F005 UN1993	4	DM	0.0220	G	F005
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I ha determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to r which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good fa effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: EUGENE B. CIABATTARI | Signature: [signature] | Date: Month 10 Day 09 Ye 8

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: [illegible] | Signature: [signature] | Date: Month 10 Day 11 Ye

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: | Signature: | Date: Month Day Ye

19. Discrepancy Indication Space

123 UCV 63 10/13

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted Item 19
Printed/Typed Name: WHITAKER ALVIN | Signature: [signature] | Date: Month 10 Day 12 Ye 8

GENERATOR

TRANSPORTER

FACILITY

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY

0016556

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 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.: IL.D0.0.5.1.2.7.0.0.6
Manifest Document No.: 1
2. Page 1: 1 of 1
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
VIKING METAL CABINET CO., INC.
5321 W 65TH ST, CHICAGO, IL 60638

4. Generator's Phone (708) 594-1111

A. State Manifest Document Number: INA 0312998
B. State Generator's ID: 0316005839

5. Transporter 1 Company Name: LANDGREBE MOTOR TRANSPORT INC
6. Use EPA ID Number: IN.C.0.0.9.8.4.2.8.2.4
C. State Transporter's ID: ICC1875
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: IND016360265
G. State Facility's ID: 918089002
H. Facility's Phone: 768-3400

11. US DOT Description *(Including Proper Shipping Name, Hazard Class, and ID Number)*	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. WASTE SOLVENTS F005 UN1993	4	DM	00220	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: EUGENE B. GIABATTARI
Signature: [signature]
Date: Month 12 Day 01 Year 89

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: BOB DUITMANN
Signature: Bob Duitmann
Date: Month 12 Day 07 Year 89

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Date: Month Day Year

19. Discrepancy Indication Space:

20. Facility Owner or Operator. Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: WHITAKER A.
Signature: [signature]
Month Day Year 12 8 89

GENERATOR / TRANSPORTER / FACILITY

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY 1237063 14/11

0016558

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

77136

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.0N0.5.1.2.7.0.0.6	1		

3. Generator's Name and Mailing Address
VIKING METAL CABINET CO., INC.
5321 W 65TH ST, CHICAGO IL 60638

4. Generator's Phone (708) 594-1111

A. State Manifest Document Number: INA 0312997
B. State Generator's ID: 0316005839

5. Transporter 1 Company Name	6. Use EPA ID Number	C. State Transporter's ID	D. Transporter's Phone
LANDGREBE MOTOR TRANSPORT INC	I N C 0 0 9 8 4 2 8 2 4	ICC1875	(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 IN 46319	I.N.D.0.1.6.3.6.0.2.6.5	918039002	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 SOLVENTS F005 UN1993	3.	DM	00.165	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.

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GENERATOR

Printed/Typed Name	Signature	Date Month Day Year
EUGENE B. CIABATTARI		01 29 90

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month Day Year
LANDGREBE BOB DUTMAN	LANDGREBE	01 31 90

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month Day Year
		. . .

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted Item 19

Printed/Typed Name	Signature	Date Month Day Year
WALKER A		2 1 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 (Rev. 3-87)
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY

123563

0018145

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 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 2 7 0 0 6
Manifest Document No.: 1
2. Page 1: 1 of 1
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
VIKING METAL CABINET CO., INC.
5321 W 65TH ST CHICAGO IL 60638

4. Generator's Phone (708) 594-1111

A. State Manifest Document Number: INA 0312994
B. State Generator's ID: 0316005839

5. Transporter 1 Company Name: LANDGREBE MOTOR TRANSPORT INC
6. Use EPA ID Number: I N C 0 0 9 8 4 2 8 2 4
C. State Transporter's ID: ICC1875
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: 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 SOLVENTS F005 UN1993	4	DM	00220	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: EUGENE B. CIABATTARI
Signature: [signature]
Date: Month 03 Day 27 Year 90

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: LANDGREBE JERRY THOMPSON
Signature: [signature]
Date: Month 3 Day 30 Year 90

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Date: Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: WHITAKER A
Signature: [signature]
Date: Month 4 Day 3 Year 90

GENERATOR

TRANSPORTER

FACILITY

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA0312994

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY

123 JCT 63 4/5

0018146

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 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 2 7 0 0 6
Manifest Document No.:
2. Page 1 of 1
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
VIKING METAL CABINET CO., INC.
5321 W 65TH ST CHICAGO IL 60638

A. State Manifest Document Number: INA 0444125
B. State Generator's ID: 0316005839

4. Generator's Phone (708) 594-1111

5. Transporter 1 Company Name: LANDGREBE MOTOR TRANSPORT INC
6. Use EPA ID Number: I N C 0 0 9 8 4 2 8 2 4
C. State Transporter's ID: ICC1875
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: 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 SOLVENTS F005 UN1993	4	DM	002.2	G	F005
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

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GENERATOR

Printed/Typed Name	Signature	Date Month	Day	Year
Gene R Cichetti		05	21	90

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year
BOB DUITMANN		05	24	90

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date Month	Day	Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted Item 19

Printed/Typed Name	Signature	Date Month	Day	Year
STEVE KULWICK		05	25	90

DATED 5/29

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)

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INA 0444125

001814

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: IL D 0 0 5 1 2 7 0 0 6
Manifest Document No.: 1
2. Page 1 of 1
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
VIKING METAL CABINET CO., INC.
5321 W 65TH ST CHICAGO IL 60638

A. State Manifest Document Number: INA 0444126

4. Generator's Phone (708) 594-1111

B. State Generator's ID: 0316005839

5. Transporter 1 Company Name: LANDGREBE MOTOR TRANSPORT, INC
6. Use EPA ID Number: I N C 0 0 9 8 4 2 8 2 4
C. State Transporter's ID: ICC1875
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: 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 SOLVENTS FOOS UN1993	4	DM	00220	G	F005
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

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GENERATOR

Printed/Typed Name: EUGENE B. CIABATTARI
Signature:
Date: Month 6 Day 28 Year 90

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: BOB DUITMANN
Signature:
Date: Month 7 Day 30 Year 90

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: MICHAEL YURECHKO
Signature:
Date: Month 07 Day 31 Year 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: W. TAYLOR A
Signature:
Date: Month 7 Day 31 Year 90

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-89)

120VC 63 8/93

COPY 5. TSD COPY

0018148

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 0444126

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.: MND059662437
Manifest Document No.:
2. Page 1 of 8
Information in the shaded areas is not required by Federal law

3. Generator's Name
Viking Olds
4646 Highway 52 N., Rochester, MN 55901
4. Generator's Phone (507) 288-1811

A. State Manifest Document Number: IN034276
B. State Generator's ID:

5. Transporter 1 Company Name: Strand TRucking
6. US EPA ID Number: ILD000646810
C. State Transporter's ID: 0311
D. Transporter's Phone: 312-385-8440

7. Transporter 2 Company Name:
8. US EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical 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. RQ WASTE PAINT RELATED MATERIAL (F003) FLAMMABLE LIQUID NA1263	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.

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

Printed/Typed Name: Bob Ludwig
Signature: Bob Ludwig
Month Day Year: 08 07 88

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: STEPHEN J MASSAT
Signature: Stephen J Massat
Date: 08 07 88

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Date: Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: [illegible]
Signature: [illegible]
Month Day Year: 08 11 88

GENERATOR / TRANSPORTER / FACILITY

IN034276

EPA Form 8700-22A (Rev. 11-85) UHWM 2/LP2

116FT63 8/15

T.S.D. DETACH AND RETAIN THIS COPY

0015097

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.: MND 059 662 437
Manifest Document No.: 11168F
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Viking Olds
4646 Hwy. 52 North, Rochester, MN. 55901
4. Generator's Phone (507) 288-1811

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID 0367
D. Transporter's Phone 312-429-1660
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone 219-924-4370

5. Transporter 1 Company Name: ADCO Express
6. US EPA ID Number: ILD 047 267 364
7. Transporter 2 Company Name
8. US EPA ID Number

9. Designated Facility Name and Site Address
American Chemical Service
420 South Colfax Avenue
Griffith, IN. 46319
10. US EPA ID Number: IND 016 360 265

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		5	dm	275	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: Robert Ludwig
Signature: Robert Ludwig
Month Day Year

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: RONALD R. BUCHARD
Signature
Month Day Year: 12 6 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: Whitaker A
Signature: W Whitaker
Month Day Year: 12 1 88

Style F15REV-6 Labelmaster, Div. of American Labelmark Co. Inc 60646

EPA Form 8700-22 (Rev. 9/86) Previous editions are obsolete.

126CT681 W/N

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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 059 662 437
Manifest Document No.: 0516896
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Viking Olds
4646 Hwy. 52 North, Rochester, MN 55901
4. Generator's Phone (507) 288-1811

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: IND 047 267 364
7. Transporter 2 Company Name
8. US EPA ID Number
9. Designated Facility Name and Site Address: American Chemical Service, 420 So. Colfax Ave, Griffith, IN 46319
10. US EPA ID Number: IND 016 360 255

	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.	RQ WASTE PAINT RELATED MATERIAL (F003) FLAMMABLE LIQUID NA 1263	X	8	dm	432	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
Robert Ludwig		5	16	89

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
VINCENT L. AGUILAR		05	16	89

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name	Signature	Month	Day	Year
[illegible]		5	22	89

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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.: MND059662437 8229F

2. Page 1 of 1

Information in the shaded areas is not required by Federal law.

GENERATOR

3. Generator's Name and Mailing Address
Viking Olds
4646 Hwy 52 North, Rochester, MN 55901

4. Generator's Phone (507) 288-1811

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: ADCOM EXPRESS

6. US EPA ID Number: ILD047263764

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 (F003) FLAMMABLE LIQUID NA 1263		004	DM	220	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: T. [illegible]

Signature: [signature]

Month Day Year: 08 23 89

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Stephen SEEKUP

Signature: [signature]

Month Day Year: 08 23 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: 08 28 89

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. A N D 0 5 9 6 6 2 4 3 7 | Manifest Document No. 1 1 3 0 E

2. Page 1 of 1 | Information in the shaded areas is not required by Federal law.

GENERATOR

3. Generator's Name and Mailing Address
Viking Olds
46466 Hwy. 52 North, Rochester, MN 55901
4. Generator's Phone (507) 288-1611

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name
ADCOM EXPRESS
6. US EPA ID Number 1 1 1 1 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 South Colfax avenue
Griffith, IN 46319
10. US EPA ID Number I N D 0 1 6 3 4 4 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 (FOO3) FLAMMABLE LIQUID NA 1263		1	DM	220	G	FOO3
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 T. [illegible] | Signature [illegible] | Month Day Year

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name STEPHEN SEERUP | Signature [illegible] | Month Day Year 1 0 9 5 9 2

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 [illegible] | Month Day Year 1 0 9 5 2

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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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.

M N D 0 5 9 6 5 2 4 3 7 | 3 1 9 0 H

3. Generator's Name and Mailing Address
Vikings Olds
4646 Hwy 52 North Rochester, MN 55901
4. Generator's Phone (507) 288-1811

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 5 3 6 0 2 5 5
G. State Facility's ID
H. Facility's Phone: 219-924-4370

GENERATOR

	11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	HM	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	RQ WASTE PAINT RELATED MATERIAL (F003 & F005) FLAMMABLE LIQUID NA1263		1	5 D M	275	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
[illegible]	[signature]	09	20	90

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
STEPHEN SEERUP	Stephen Seerup	09	21	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
WALKER A	[signature]	09	25	90

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INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: MIG000013745 — Manifest Document No.: 66982
2. Page 1 of 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
Village Stripper
111 Mill St, Caledonia MI 49316

4. Generator's Phone (616) 891-8239

A. State Manifest Document Number: INA 0266982
B. State Generator's ID:

5. Transporter 1 Company Name: VALLEY CITY REFUSE DISPOSAL, INC.
6. Use EPA ID Number: MID981956063
C. State Transporter's ID:
D. Transporter's Phone: (616) 235-1500

7. Transporter 2 Company Name:
8. Use EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE
420 S. Colfax, P.O. Box 190
Griffith, IN 46319-0190

10. Use EPA ID Number: IND016360265
G. State Facility's ID:
H. Facility's Phone: (219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No
a. Waste Paint Related Material Flammable Liquid NA1263	1	DM	55	G	F002
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above:
K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information:

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

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Printed/Typed Name: DON SCHAEFER — Signature: Don Schaefer — Date: Month 02 Day 21 Year 89

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Roger Norton — Signature: Roger Norton — Date: Month 2 Day 21 Year 89

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: — Signature: — Date: Month Day Year

19. Discrepancy Indication Space:

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: Whitaker A — Signature: Whitaker A — Month 2 Day 24 Year 89

GENERATOR / TRANSPORTER / FACILITY

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0266982

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

204RTR0 2/27 (20)

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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.

EPA Form 8
Previous edi
State Form

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. W I D 0 4 7 2 5 9 2 8 8 | Manifest Document No. 6 4 6 0 | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Vilter Manufacturing
2177 S. 1st St.
Milwaukee, WI 53207

A. State Manifest Document Number: INA 0364860

B. State Generator's ID:

4. Generator's Phone (414) 744-0111

5. Transporter 1 Company Name: E&K Hazardous Waste Service, Inc.

6. Use EPA ID Number: W.I.D.9.8.2.2.1.9.5.2.9

C. State Transporter's ID:

D. Transporter's Phone: 414/458-6030

7. Transporter 2 Company Name:

8. Use EPA ID Number:

E. State Transporter's ID:

F. Transporter's Phone:

9. Designated Facility Name and Site Address
American Chemical Service
420 S. Colfax
Griffith, IN 46319

10. Use EPA ID Number: I.N.D.0.1.6.3.6.0.2.6.5

G. State Facility's ID:

H. Facility's Phone: 219/924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. "RQ", Waste Flammable Liquid, N.O.S., Flammable Liquid, UN 1993, (EPA Ignitability)	001	DM	00055	G	D001
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
11a) Jewel cleaning solution

K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information
Please contact CBC at (414)764-7005 with any load discrepancies (off spec material).

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

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GENERATOR

Printed/Typed Name	Signature	Month	Day	Year
ARNOLD WATERS		4	22	87

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Pete Adams		04	22	87

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

19 Discrepancy Indication Space

20 Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name	Signature	Month	Day	Year
Whitaker A		8	25	87

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.

INA0364860

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

1-20/R T50 8/29/87

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IM HAZARD
STE MANIFES

3. Generator's Name and M
Vin Devers Dodg
5570 Monroe St.

4. Generator's Phone (419

5. Transporter 1 Company
ADCO Express

7. Transporter 2 Company

9. Designated Facility Nam
American Chemi
420 S. Colfax
Griffith, IN

11. US DOT Description (In

GENERATOR

	HM	
a.	X	RQ WASTE PAI FLAMMABLE
b.		
c.		
d.		

J. Additional Descriptions

15. Special Handling Ins

16. GENERATOR'S CERTI
proper shipping name a
according to applicable

If I am a large quantity
economically practicab
future threat to human
the best waste manage

Printed/Typed Nam

TRANSPORTER

17. Transporter 1 Ackn

Printed/Typed Nam

18. Transporter 2 Ackn

Printed/Typed Nam

FACILITY

19. Discrepancy Indica

20. Facility Owner or C

Printed/Typed Nar

Style F15REV-6 Labelmaster,

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 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.: SH QTY GENERATOR | Manifest Document No.: 0 0 0 1 | 2. Page 1 of | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address: OHO 084560465
Vin Devers Dodge
5570 Monroe St. Sylvania, OH 43560

A. State Manifest Document Number: INA 0159770

4. Generator's Phone (419) 885-5111

B. State Generator's ID:

5. Transporter 1 Company Name: A & B INDUSTRIAL SERVICE | 6. Use EPA ID Number: M I D 0 1 7 1 6 7 2 2 2 | C. State Transporter's ID:

D. Transporter's Phone: 616-375-9595

7. Transporter 2 Company Name | 8. Use EPA ID Number | E. State Transporter's ID:

F. Transporter's Phone:

9. Designated Facility Name and Site Address: American Chemical Service
420 S. Colfax Ave.
Griffith, IN 46319 | 10. Use EPA ID Number: I N D 0 1 6 3 6 0 2 6 5 | G. State Facility's ID:

H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. RQ WASTE PAINT RELATED MATERIAL (F003), FLAMMABLE LIQUID NA1263	02	M	020110	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	Signature	Month	Day	Year
		7	6	88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
MICHAEL MILLER		7	6	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
A WHITAKER		7	13	88

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/126-2675.

INA 0159770

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

126FCT03 7/14/88

0015096

STATE OF MICHIGAN

Rev. 8/81

WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS) ☐ Act 136 Waste ☐ Other

MI 0188784

IDENTIFICATION

Generator's Name	Primary Transporter's Name	Treatment, Storage or Disposal Facility
VINCENTS PAINTING SERVICE	THOMAS SOLVENT COMPANY	AMERICAN CHEMICAL
Site Address: 117 W. Jackson Street, Tekonsha MI 49092	Transporters Address: 1180 N. Raymond Road, Battle Creek MI 49016	Facility Address: 420 S. Colfax, Griffith IN 46319
Phone Number: (517) 767-35-93	Phone Number: (616) 963-5565	Phone Number: (219) 924-4570
Generator's Site EPA I.D. Number: MID047147814	Transporter's EPA I.D. Number: MID039993902	Facility Site EPA I.D. Number: IND016360265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES — WASTE INFORMATION

LOT NO.	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name).	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container No.	Container Type	Form Solid	Form Liquid	Form Gas	Form Sludge	Total Weight or Volume	Units	Hazardous or Liquid Waste Number
1.	Waste Ink Thinner	FLAMMABLE	NA 1142	0 7	4	DR		X			220	Gal.	F017
2.													
3.													
4.													
5.													
6.													

COMMENTS

Include Safety precautions and special handling instructions.

Flammable & Hazardous Waste Labels Attached to each Drum

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or 1969 PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature: ① Robert L. Mohrhardt

Date Shipped: MO. DAY YEAR 3/15/83

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: AA6107 14671 C

Subsequent Transporter Vehicle I.D. No's:

Transporter Signature: ② [signature]

Subsequent Transporter(s) signature(s): ③

Date(s) Received: 3/15/83

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF COMPLETES

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature: ④ [signature]

Facility Site EPA I.D. Number: IND016360265

☒ Accepted ☐ Rejected

Date Received: 3/17/83

Describe any significant discrepancies between manifest and shipment.

Was a Surcharge Assessed? ☐ Yes ☒ No

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 800—292-4706 OR OUT-OF-STATE AT 517—373-7660 AND THE NATIONAL RESPONSE CENTER AT 800—424-8802 24 HOURS PER DAY.

TS 204 KT-50 GRM 3.22.83

TSDF COPY

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 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. | Manifest Document No.

2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but is required by Illinois law.

3. Generator's Name and Mailing Address
VOGEL PETERSON Co.
RT E3 & MADISON ST. ELMHURST, IL 60126

4. Generator's Phone (312) 279-7123

A. Illinois Manifest Document Number IL 1190692

B. Illinois Generator's ID 0430355007

5. Transporter 1 Company Name: LANDGREB MOTOR TRANSIT
6. US EPA ID Number: IND 009842824
C. Illinois Tranporter's ID 1875
D. (219) 462-4161 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 INC
4205 CLEAY AVE
GRIFFITH, IN 46319
10. US EPA ID Number: IND 016360265
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.	WASTE COMPOUND CLEANING SOLUTION FLAMMABLE LIQUID NA 1993	X	001	DM	00330	1	EPA HW Number F005 / Authorization Number
b.							EPA HW Number / Authorization Number
c.							EPA HW Number / Authorization Number
d.							EPA HW Number / Authorization Number

J. Additional Descriptions for Materials Listed Above
WT 2400 LL

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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: CHANDRA SEKHAR REDDY | Signature: Chandra Sekhar Reddy | Date: Month 12 Day 10 Year 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Landgrebe Motors Philip L Hynes | Signature: Philip L Hynes | Date: Month 12 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 12 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 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

204ET-50

009209

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.: I1 D044247229 — Manifest Document No.: 0001

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
Vogel-Peterson
Rt. 83 & Madison St.
Elmhurst, Il 60126

4. Generator's Phone (312) 279-7123

A. Illinois Manifest Document Number: IL 1769541

B. Illinois Generator's ID: 0 4 3 0 3 5 5 0 0 8

5. Transporter 1 Company Name: Landgreg Motor Transit

6. US EPA ID Number: IND009842824

C. Illinois Tranporter's ID: 1 8 7 5

D. (219) 462-4181 Transporter's Phone

7. Transporter 2 Company Name: N/a

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 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: (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 Compound Cleaning Solution Flamable Liquids NA1993	006	DM	0 0 3 85	1	EPA HW Number: XX F0005 Authorization Number:
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
WT2800 II

K. Handling Codes for Wastes Listed Above In Item #14
1 = Gallons 2 = Cubic Yards

15. Special Handling Instructions and Additional Information
75600

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, 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)
CHANDRA SEKHAR REDDY	Chandra Sekhar Reddy	10 30 86

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)
F. Schlundt	F. Schlundt	10 30 86

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name	Signature	Date (Month Day Year)
Harrold F. Schmidt	Harrold F. Schmidt	10 31 86

GENERATOR / TRANSPORTER / FACILITY

IN ILLINOIS: 217 / 782-3637 "24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS" OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV #6 **GENERATOR COPY – PART 1- DO NOT REMOVE PART 1 FROM SET UNTIL COMPLETED.**

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111½ Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed $25,000 per day of violation. Falsification of this information may result in a fine up to $50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

@ 123 T-63

011632

012253

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

(178) 5-45396

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.: IL D044247229 — Manifest Document No.: 0001
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
Vogel-Peterson
Rt. 83 & Madison St.
Elmhurst, Il 60126

4. Generator's Phone (312) 279-7123

A. Illinois Manifest Document Number: IL 1769543

B. Illinois Generator's ID: 0 4 3 0 3 5 0 0 0 8

5. Transporter 1 Company Name: Landgreg Motor Transit
6. US EPA ID Number: IND009842824

C. Illinois Tranporter's ID: 1 8 7 5

D. (219) 462-4181 Transporter's Phone

7. Transporter 2 Company Name: n/a
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 C olfax 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: 219 924-5370

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a.	Waste Compound Cleaning S olution Flamable Liquids NA1993	004	DM	000 2 2 0	1	EPA HW Number: XX F 0 0 5 Authorization Number:
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: ~~WT2000~~ WT 1900155

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: Richard Balcer — Signature: [signature] — Month Day Year: 02 05 [illegible]

17. Transporter 1 Acknowledgement of Receipt of Materials — Date

Printed/Typed Name: [illegible] — Signature: [signature] — Month Day Year: [illegible]

18. Transporter 2 Acknowledgement of Receipt of Materials — Date

Printed/Typed Name: — Signature: — Month Day Year:

19. Discrepancy Indication Space

2000

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: Harrold F. Schmidt — Signature: [signature] — Month Day Year: 02 06 [illegible]

IN ILLINOIS: 217 / 782-3637 24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 42[illegible]

DISTRIBUTION: PART 1 GENERATOR, PART 2 IEPA, PART 3 FACILITY, PART 4 TRANSPORTER, PART 5 IEPA, PART 6 GENERATOR

REV. 86

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 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 Man Center.

FACILITY COPY - PART 3

NRIC 4-125K T63 - 123

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.: ILD044247229 00002

2. Page 1 of

Information in the shaded areas is not required by Federal law.

3. Generator's Name: Vogel&Peterson
Rt. 83 & Madison
Elmhurst, Il 60126

4. Generator's Phone: 312 - 279-7123

A. State Manifest Document Number: IN105036

B. State Generator's ID: 043 035 0008

5. Transporter 1 Company Name: Langreb Motor Transit

6. US EPA ID Number: IND009842824

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 Services
420 Colfax Ave
Griffith, Indiana 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.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	15. Waste No.
a. Waste Compound Cleaning Solution Flamable Liquids ~~NA1993~~ UN1993	005	DM	02V5	Gal	F005
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
Wt. 19001bs.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, 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: Richard Balcer | 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

S-125R T63 B

IN 105036

012254

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.: ILD044247229 — Manifest Document No.: 00003

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law

3. Generator's Name: Vogel Peterson
Rt. 83 & Madison St. Elmhurst, Il 60126

4. Generator's Phone (312) 279-7123

A. State Manifest Document Number: IN 105037

B. State Generator's ID: 042 035 0008

5. Transporter 1 Company Name: Langrebe Motor Transport

6. US EPA ID Number: IND009842824

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 Services
420 Colfax Ave
Griffith, Indiana 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	Waste No.
a. Waste Compound Cleaning Colution Flamable Liquids UN1993	005	DM	00275	Gal	F005
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: WC 2125 lbs

K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information:

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

Printed/Typed Name: Richard Balcer — Signature: [signature] — Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials — Date

Printed/Typed Name — Signature — Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials — Date

Printed/Typed Name — Signature — Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.

Printed/Typed Name: HARROLD F. Schmidt — Signature: [signature] — Month Day Year

GENERATOR — TRANSPORTER — FACILITY

IN 105037

EPA Form 8700-22A (Rev. 11-85) UHWM 2/LP2

5-123 R-T-63 10/7/37 M T.S.D. DETACH AND RETAIN THIS COPY

012255

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.: ILD044247229 0004

2. Page 1 of 1

Information in the shaded areas is not required by Federal law

3. Generator's Name: Vogel Peterson
Rt 83 & Madison St.
Elmhurst, Il 60126

4. Generator's Phone: 312 279-7123

A. State Manifest Document Number: IN105038

B. State Generator's ID: 043 035 0008

5. Transporter 1 Company Name: Langrebe Motor Transport

6. US EPA ID Number: IND009 842824

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 Services
420 Colfax Ave
Griffith, Indiana 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.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a. Waste Compound Cleaning Solution Flamable Liquids UN1993	005	DM	00275	Gal	F005
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: WC 2125 Lbs.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, 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: Richard Balcer | Signature | Month Day Year

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Fred L. Kaselac | Signature | Date: 12 07 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: HARRULD F. Schmidt | Signature | Month Day Year: 12 08 87

IN 105038

EPA Form 8700-22A (Rev. 11-85) UHWM 2/LP2

5-123R T-63 12/8/87 T.S.D. DETACH AND RETAIN THIS COPY

012256

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.: ILD044247229 — Manifest Document No.: 00001

2. Page 1 of — Information in the shaded areas is not required by Federal law

3. Generator's Name: Vogel Peterson, Rt 83 & Madison St., Elmhurst, Il 60126

4. Generator's Phone: 312 279-7123

A. State Manifest Document Number: IN 105039

B. State Generator's ID: 043 035 0008

5. Transporter 1 Company Name: Langrebe Transport

6. US EPA ID Number: IND009842824

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 Services, 420 Colfax Ave, Griffith, Indiana 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.
a. Waste Compound Cleaning Solution Flammable Liquids UN1993	005	DM	275	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

WT 2125 lb.

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

Printed/Typed Name: Richard Balcer — Signature: [signature] — Month Day Year: 03 03 88

17. Transporter 1 Acknowledgement of Receipt of Materials — Date

Printed/Typed Name: Fred Koselke — Signature: Fred Koselke — Month Day Year: 03 03 88

18. Transporter 2 Acknowledgement of Receipt of Materials — Date

Printed/Typed Name: — Signature: — Month Day Year:

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.

Printed/Typed Name: Harold F Schmidt — Signature: [signature] — Month Day Year: 03 04 88

GENERATOR — TRANSPORTER — FACILITY

IN 105039

EPA Form 8700-22A (Rev. 11-85) UHWM 2/LP2

5-123R T-63 3/7/88

T.S.D. MAIL TO T.S.D.'S STATE

0015093

STATE OF ILLINOIS ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL 532-0610

LPC 62 8/81

print or type. (Form designed for use on elite (12-pitch) typewriter.) **EPA Form 8700-22 (3-84)** Form Approved. OMB No. 2000-0404. Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. ILD044247229 Manifest Document No. 0001

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
VOGEL PETERSON
RT. 83 & MADISON ELMHURST IL 60126

4. Generator's Phone ( )

A. Illinois Manifest Document Number IL 1125836

B. Illinois Generator's ID 0430355007

5. Transporter 1 Company Name: LANDGREB MOTOR TRANSIT

6. US EPA ID Number: IND009842824

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 INC.
420 S. COLFAX AVE.
GRIFFITH IN 46319

10. US EPA ID Number: IND016360265

G. Illinois Facility's ID 9118089000 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. WASTE COMPOUND CLEANING SOLUTION, FLAMMABLE LIQUID NA 1993	X	005	DM	00275	1	EPA HW Number F1005
b.						EPA HW Number
c.						EPA HW Number
d.						EPA HW Number

GENERATOR

J. Additional Descriptions for Materials Listed Above
WT 3,000#

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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)
ANTHONY STULPINAS	Anthony Stulpinas	03/18/85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials		
Printed/Typed Name: PHILIP A LYONS	Signature: Philip A Lyons	Date: 03/18/85
18. Transporter 2 Acknowledgement or 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 (Month Day Year)
FRANK PRICE	Frank Price	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

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-50V

009208

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 4 4 2 4 7 2 2 9 | Manifest Document No.: 0 0 0 0 1

2. Page 1 of

Information in the shaded areas is not required by Federal law

3. Generator's Name: Vogel Peterson
Rt 83 & Madison St.
Elmhurst, IL 60126

4. Generator's Phone: (312) 279-7123

A. State Manifest Document Number: IN 105040

B. State Generator's ID: 043 035 0008

5. Transporter 1 Company Name: Langrebe Transport

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 SErvices
420 Colfax
Griffith, Indiana 46319

10. US EPA ID Number: I N D 0 1 6 3 6 0 2 6 5

G. State Facility's ID: 9188890002

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 Compound Cleaning Solution Flammable Liquids UN1993	0 0 5	D M	2 7 5	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

Wt 2125 Lbs.

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, 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: Kent Olson | Signature: [illegible] | Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials | Date

Printed/Typed Name: [illegible] | Signature: [illegible] | Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials | Date

Printed/Typed Name: | Signature: | Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19

Printed/Typed Name: Alvin Whitaker | Signature: Alvin Whitaker | Month Day Year: 6 21 88

GENERATOR

TRANSPORTER

FACILITY

IN 105040

EPA Form 8700-22A (Rev. 11-85) UHWM 2/LP2

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123TCT636/23M

0015094

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.: ILD044247229 | 00001

2. Page 1 of | Information in the shaded areas is not required by Federal law

3. Generator's Name: Vogel Peterson
Rt 83 & Madison St.
Elmhurst, IL 60126

A. State Manifest Document Number: IN 105041

4. Generator's Phone: 312-279-7123

B. State Generator's ID: 043 035 0008

5. Transporter 1 Company Name: Langrebe Transport

6. US EPA ID Number: IND000984284

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 Services
420 Colfax Ave
Griffith, Indiana 46319

10. US EPA ID Number: IND016360265

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.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. Waste Compound Cleaning Solution Flammable Liquids UN1993	001	5 D	275	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

WT 2125 lbs

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, 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: Kent Olson | 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 105041

EPA Form 8700-22A (Rev. 11-85) UHWM 2/LP2

124KT63 10/ T.S.D. DETACH AND RETAIN THIS COPY

0015095

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.: ILD044247229 00001

2. Page 1 of 8

Information in the shaded areas is not required by Federal law

3. Generator's Name: Vogel Peterson
Rt 83 & Madison St. Elmhurst, IL 60126

4. Generator's Phone: 312) 279-7123

A. State Manifest Document Number: IN 105042

B. State Generator's ID: 043 085 0008

5. Transporter 1 Company Name: Langrebe Transport

6. US EPA ID Number: IND000984824

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 Services
420 Colfax Ave
Griffith, Ind. 46319

10. US EPA ID Number: IND 980 615 615

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 Compound Cleaning Solution Flammable Liquids UN 1993	005	D	275	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

WT2125 lbs

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, 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
Kent Olson				

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date: Month	Day	Year
Jim Mares		5	11	89

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date: Month	Day	Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator. Certification of receipt of hazardous materials covered by this manifest except as noted item 19.

Printed/Typed Name	Signature	Month	Day	Year
Whitaker-A		5	10	89

EPA Form 8700-22A (Rev. 11-85)

UHWM 2/LP2

1260 TC T63 Y/A T/S

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IN 105042

0016545

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 4 4 2 4 7 2 2 9 0 0 0 0 1
2. Page 1 of: 1
Information in the shaded areas is not required by Federal law

3. Generator's Name: Vogel Peterson
Rt 83 & madison St.
Elmhurst, IL 60126
4. Generator's Phone (312) 279-7123

A. State Manifest Document Number: IN 105047
B. State Generator's ID: 043 035 0008

5. Transporter 1 Company Name: Kangrebe Transport
6. US EPA ID Number: I N D 0 0 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 Services
420 Colfax Ave
Griffith, Indiana 46319
10. US EPA ID Number: I N D 0 1 6 3 6 0 2 6 5
G. State Facility's ID: 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 Compound Cleaning Solution Flammable Liquids UN 1993	0 0 5	D M	1 3 3 0	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

Wt 2550 lbs

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, 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
Kent Olson				

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

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
STEVE KULAVICK	Steve Kulavick	11	19	87

FACILITY

EPA Form 8700-22A (Rev. 11-85) UHWM 2/LP2

T.S.D. DETACH AND RETAIN THIS COPY

IN 105047

0016544

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 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 04.4.24.7.2.2.9 — Manifest Document No.: 000.03
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: Vogel Peterson, Rt 83 and Madison St, Elmhurst Ill, 60126
4. Generator's Phone (312) 279-7123

A. State Manifest Document Number: INA 0335033
B. State Generator's ID: 043 035 0008

5. Transporter 1 Company Name: LANGREBE
6. Use EPA ID Number: IN.D0.0.9.8.4.2.8.2.4
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 SERVICES, 420 COLFAX AVE., GRIFFITH, INDIANA 46319
10. Use EPA ID Number: IN.D01.63.60.2.6.5
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. FLAMMABLE LIQUID NOS FLAMMABLE UN1993	006	DM	330	GAL	F005
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: WT 2900 lbs

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Michael D. Carstens — Signature: Michael D. Carstens — Date: Month 06 Day 23 Year 89

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: FRED Schlunott — Signature: Fred Schlunott — Date: Month 6 Day 23 Year 89

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: — Signature: — Date: Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: STEVE KULAVICK — Signature: Steve Kulavick — Date: Month 06 Day 24 Year 89

GENERATOR / TRANSPORTER / FACILITY

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0335033

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY

123 [illegible] 63 6/87

0016543

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. MN0069158880 — Manifest Document No.

2. Page 1 of

Information in shaded area not required by Federal law. Minnesota rules require Items H. and I.

3. Generator's Name and Mailing Address: 916 VO TECH, 3300 CENTURY AVE NO.

4. Generator's Phone: (612) 770-2351 WHITE BEAR LAKE MN 55110

A. State Manifest Document Number: MN 0016173

B. State Generator's ID:

5. Transporter 1 Company Name: Auto Body Supply INC

6. US EPA ID Number: MND023023377

C. State Transporter's ID:

D. Transporter's Phone: 612-788-9676

7. Transporter 2 Company Name: ~~STRAND TRUCKING~~ ABC SERVICES

8. US EPA ID Number: ~~IL0000696310~~

E. State Transporter's ID: ~~[illegible]~~

F. Transporter's Phone: ~~[illegible]~~

9. Designated Facility Name and Site Address: AMERICAN CHEM SERV, 420 S COLMAX, GRIFFITH, INDIANA 46319

10. US EPA ID Number: WID 070 [illegible] 839 IND016361265

G. State Facility's ID: ILL 9180890002

H. Facility's Phone: 219-924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

	HM		12. Containers No	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a.	X	WASTE PAINT RELATED MATERIAL FLAMMABLE LIQUID NA 1263 - FOD3	3	DM	165	12 8	FOD3
b.							
c.							
d.							

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and 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: MICHAEL DORENDORF — Signature: Michael Dorendorf — Date: Month 06 Day 13 Year 86

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: DOUGLAS A. WEIMER — Signature: Douglas A. Weimer — Date: Month 06 Day 13 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

19. Discrepancy Indication Space

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: [illegible] — Date: Month 06 Day 2[illegible] Year 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

011977

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 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.: IND982615403 — Manifest Document No.: 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: Voyager Dakat Inc. P.O. Box 1743 Elkhart IN 46515
4. Generator's Phone (219) 264 9504

A. State Manifest Document Number: INA 0294155
B. State Generator's ID:

5. Transporter 1 Company Name: Mr. Frank Industrial Disposal
6. Use EPA ID Number: ILD069506160
C. State Transporter's ID: IN9505-000-21
D. Transporter's Phone: 312/596-3577

7. Transporter 2 Company 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: INAD16360265
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. Flamable Liquid NA 1294 Over 10% M.E.K. Toluol F005	025	DM	00000	G	F005
b.					
c.					
d. ACCEPTED	008	DM	00400	G	F005

J. Additional Descriptions for Materials Listed Above:
K. Handling Codes for Wastes Listed Above:

15. Special Handling Instructions and Additional Information:

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, 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: DeWayne Baxter — Signature: DeWayne G. Baxter — Date: Month 04 Day 11 Year 89

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: [illegible] — Signature: [illegible] — Date: Month 04 Day 11 Year 89

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: — Signature: — Date: Month Day Year

19. Discrepancy Indication Space
17 DRUMS REJECTED - MATERIAL DOES NOT MATCH PRESHIPMENT SAMPLE

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: STEVE KULAVICK — Signature: Steve Kulavick — Date: Month 04 Day 12 Year 89

GENERATOR / TRANSPORTER / FACILITY

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0294155

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

(350)
7-20-MCF50 4/25 — 2 GAL 20YR TSO 6/16/89
8 PAILS (48 GAL) ASHGROVE 6/15/89 90103

COPY 5. TSD COPY

0016542